



The Australian Hypnotherapy Journal

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Letters to the Editor should be clearly marked as such and be a maximum of 200 words.

Editor: Chereyl Jackman

Proof Reader: Bruni Brewin

Front Cover: Painted Sandstone Cliffs, Maria Island, Tasmania (*Your Photos are welcome*)

President's Report

Mailin Colman

Greetings members,

Happy new year to all!! With most of Australia sweltering, I hope you're keeping cool and have had a rejuvenating break. As it is so early in the year, there is not much to report as yet!

AHA 70th World Conference, Brisbane 13-15 September 2019

Work continues with organising the conference and registrations will open on the 11th March. We hope to announce the key note speakers within the next couple of weeks and then the line-up of all speakers will be decided during the first week of February and announced shortly thereafter.

National committee planning day/s

The national committee will come together once again for the annual planning day/s on the 1st and 2nd of February in Brisbane. This is a wonderful opportunity for national to reconnect, share future vision for the AHA and is always extremely productive. The minutes of these meetings will be available on request.

AHA Workshops

The AHA workshops are set for the entire year so please put them in your diary! The dates / speakers can be found via: <http://www.ahahypnotherapy.org.au/hypnotherapy-training/aha-events-calendar/>. The majority of February and March workshops are found via the above link and open for registrations now.

Membership renewals

As you're aware, we're not far off renewal time again so here are some tips to get ahead of what is required for renewal:

- Documentation is required! Your certificates of attendance for all workshops other than AHA workshops must be emailed in to admin when you submit your renewal online.
- AHA workshops are recorded in your membership profiles so no documentation is required.
- Your supervision (group and individual) must be listed by date / duration / type of supervision and signed / verified by your supervisor.

Please call admin on 1300 55 22 54 if you have questions or require assistance.

That's it for this issue. I wish you all a beautifully prosperous and healthy 2019!!

Warmest regards,

Mailin Colman
AHA President



National Hypnotherapists Register Australia: <http://www.ahahypnotherapy.org.au/find-a-practitioner/>
AHA guidelines & policies: <http://www.ahahypnotherapy.org.au/member-area/policies-procedures-and-guidelines-for-members/> (Access requires member to be logged on)
AHA Submissions to Government: <http://ahahypnotherapy.org.au/submissions-to-government/>
State and national contact details: <http://www.ahahypnotherapy.org.au/contact-us/>

Keeping in touch ...



<http://www.hypnotherapycouncilofaustralia.com>



http://www.psh.org.au/about_psh.htm



<http://asochaorgau.wordpress.com/>

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Advertising rates for the Australian Hypnotherapy Journal:

Full page	\$75.00
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Please Note: Payment must be made in full prior to lodging your advertisement. Details are listed in the Journal.

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Chereyl Jackman

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Book Review 'Sarah's Story'

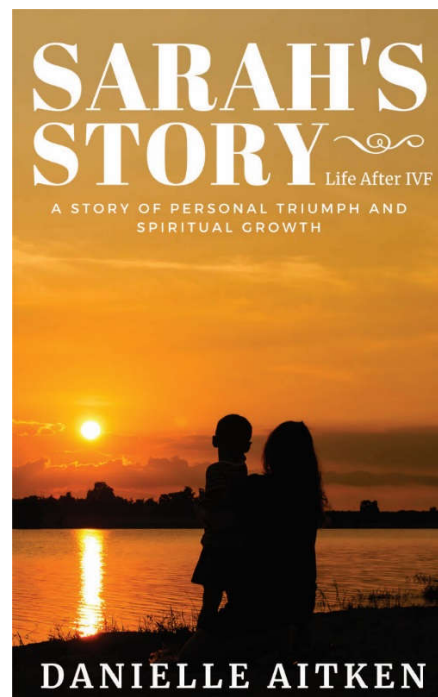
Title: Sarah's Story

- Amazon
- Kindle
- www.danielleaitkenauthor.com.au

A little about Danielle, and the 'how and why' of how Sarah's Story came to be.

As a highly experienced nurse and midwife, I spent over twenty years working at the cutting edge of IVF in Australia. During this time I observed the very common experiences of so many women and men struggling with infertility.

The nurses were at the front line. We were the patient's first point of contact and served as a liaison between all other medical and para medical departments. As you may imagine my job was sometimes the most rewarding job in the world, when finally I could tell someone their dream of becoming a parent was beginning, but equally it was often a very heavy burden to bear as time after time many of my patients continued to get negative results.



After many years, I began to feel that In order to adequately meet the emotional needs of my patients I needed more tools in my tool kit. I set about becoming a counsellor. As I did, I began to personally discover just what a difference the powerful mind makes to our every experience. I gained a thirst to learn more. I was like a sponge reading all I could read on the subject of mind body medicine and the benefits of mindfulness and meditation. From there it seemed a natural progression for me to become a clinical hypnotherapist, which is exactly what I did.

I am now a counsellor and clinical hypnotherapist running a successful private practice in rural Victoria. I assist people to move through trauma and crisis by helping them to discover their inner strengths, and this is what *Sarah's Story life after IVF* is all about.

My purpose in writing this book was to create an entertaining and heartfelt story that would be accessible to many. I wanted this story to convey a powerful and important message. Initially that message was about fertility. It was about spreading the word that fertility is finite, and it's not always a safe option to put it off your family until everything else in life is perfect. It was also a message that clearly stated IVF as a backup plan is not always a sure thing. It was a message with the purpose to validate and support those on this often difficult journey, and to educate the family and friends accompanying them. This was a book that I believed would give hope that there is a life after IVF, no matter what the outcome. Initially this was enough for me, but as I myself continued to learned more about our amazing mind body potential it also became a book with another message. The second half of the book illuminates our ability to triumph over adversities, to take the valuable lessons from all of our experiences and to create something new and unexpected. This part of the book highlights what we, as carers and therapists, do every day to assist clients to move through trauma by choosing how and where to focus their powerful attention.

As therapists, I believe, there are things to be gained from Sarah's story. It provides a valuable and realistic insight into the infertility journey, but more that, it serves as a reminder of just what is possible when a client *thinks, feels* and *believes* life can be different.

There are clinics around the world such as *Domar centre for mind body medicine* who have shown with over 20 years of follow up, wonderful successes in treatment of infertility when utilising techniques explored in the latter part of **Sarah's Story**.

E.g. “In a large federally funded study, 55% of previously infertile women who met regularly in a Mind Body Infertility program conceived within 6 months after the program, compared to only 20% in a control group that used no mind body techniques.”

Domar Centre Mind Body Medicine

About Sarah’s Story

Sarah’s Story, is a work of fiction based on the cumulative common experiences of countless numbers of women and men that I encountered over twenty years of working in the area of infertility. “**Sarah’s Story**” is an inspirational narrative about self-discovery and transformation. It’s a powerful story of love, life and resilience that leads the reader from the innocence of naivety through the emotional turmoil of unexpected despair and then emerges out the other side as it skilfully illuminates human potential to triumph over adversity.

It depicts one woman’s journey before, during and most importantly after infertility by sensitively giving a heartfelt account of the reality and the emotional rollercoaster that is “IVF”, but it is much more than that. The story serves as a metaphor that shines a light of hope that will leave you feeling empowered by the ability we possess to bring ourselves back from the depths of despair as it provides a compelling insight into a person’s capacity to turn their life around finding hope, meaning and inspiration where none previously existed.

Sarah Johnston grew up in a large Catholic family in bayside Melbourne during the 70’s and 80’s. Home life was constantly filled with siblings, cousins and extended family, and these were the days that forged Sarah’s beliefs and values. She too would one day be a wonderful mother, just like her own.

Life sometimes does not go as planned however and eventually Sarah is forced to face the unthinkable. The reader gets a front row seat as they accompany Sarah and Matt through the highs and lows of the Infertility experience gaining insight along the way as to the far reaching impact and implications of this issue on Family, friends and work colleagues alike, as Sarah and Matt attempt to navigate the highly personal and often embarrassing moments along the way.

Sarah soon finds herself faced with having to endure something that goes against her every instinct and the subsequent consequences from this experience see’s Sarah’s world disintegrate into something unrecognisable.

The reader then follows Sarah, throughout the second part of the book, as she embarks on a sometimes painful, often raw experience of personal discovery and spiritual growth as she begins to understand that life has so much more to offer her and being a Mother is more than just genetics and giving birth. Families can be forged in the most unlikely of places.

This story will make you laugh, it will make you cry, but it is a must read for anyone who has been on, or supported someone on this journey.

Sarah’s Story, Life after IVF is available at:

- Amazon
- Kindle
- www.danielleaitkenauthor.com.au

Follow the link to the web page to hear a radio Interview podcast as Danielle discusses **Sarah’s Story** on radio 3MFM.



Danielle Aitken



Alternative Solutions

Bruni Brewin

www.brunibrewin@bbbbenefits.com.au

PRESCRIPTION DRUG-INDUCED DEATHS

Prescription drug-induced deaths kill more than illicit drugs as the face of Australian addiction is transformed. The addiction a person suffers from can start innocently – and is Australia's most prolific silent killer, says Victoria Craw of News.com.au

Opioid analgesics are the mainstay of pharmacologic treatment of moderate to severe pain. However, prolonged use of opioids may result in opioid tolerance and opioid-induced hyperalgesia, which is an increased sensitivity to pain.

Alternative Solution?

In addition to medical approaches for pain relief and management, patients with chronic pain are also seeking complementary and alternative therapies, such as hypnosis.

Training patients to use hypnosis is one treatment for chronic pain that has been evaluated across a variety of conditions, including fibromyalgia, low back pain, disability-related pain, cancer-related pain, arthritis, irritable bowel syndrome, and headache. Hypnosis can be used as a stand-alone or adjunctive treatment, with some research demonstrating the ability for hypnosis to enhance the benefits of other psychological interventions.

To contact a therapist near you, go to –

<http://www.ahahypnotherapy.org.au/find-a-practitioner/>

References:

<https://www.news.com.au/lifestyle/health/health-problems/prescription-drug-induced-deaths-kill-more-than-illicit-drugs-as-face-of-australian-addiction-is-transformed/news-story/0f4d6952e25c8965864af3205117acaf>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3717822/>

FOR AHA MEMBERS ONLY ... HAVE YOU JOINED THE AHA DISCUSSION GROUP?

Nothing could be simpler

By joining the AHA discussion group forum you gain access to the largest membership of any hypnotherapy association in Australia, a huge resource of sharing ideas to benefit our practices. It helps all members, no matter which State you are in, whether you live in a CBD or Rural District – each of us are able to communicate and share ideas and knowledge with every other member.

It's as simple as writing an email, just like you do when writing an email to a friend.

Your forum email address is:

aha-discussion@googlegroups.com.

When you are a member of the forum, you receive posting from other members, as well as being able to post yourself. You can decide whether to respond to an email to be helpful, or watch other responses, or just delete the email if you have no interest in the topic of discussion. These postings can include requests for help with clients, interesting articles, and other discussion topics of interest to your hypnotherapy practice.

The one rule we have is that you do not post advertising (your own or links that have advertising of their own or someone else's business, workshops, etc).

Advertising can be placed in the Journal. Refer Australian Hypnotherapy Journal Advertising Guidelines in 'Contents' page for details of fees and page number.

We would like to see all members being involved, so if you haven't joined us yet, send an email to my personal email address:



AHA Discussion Group

Jeremy Barbouttis

02 9518 9912

jeremy@clinicalhypnotherapy.net.au

... and I will verify that you are an AHA member and add you on. (You are required to do this before you can receive or post any messages.)

Factors that Facilitate or Impede Change - Hope and Expectation

Hope is essential to hypnotherapy and probably all therapies that involve psychological effort. Placebo and expectancy are well studied in hypnotherapy, the psychotherapies and medicine (e.g., Kirsch, 2009, 2005; Blackwell, Bloomfield, and Buncher, 1972; Frank and Frank, 1991; Snyder, Irving and Anderson, 1991).

Hope can keep someone on track despite setbacks. It can help clients reach goals, and in the case of those with suicidal ideation, it can save lives. Hope means we believe something can become better, more manageable, and more acceptable and we know that, in the future, we will be happier. Hypnotherapy often brings hope where other therapies, such as medicine and psychotherapy, have failed. This modality is quite often seen by the client as a last resort and this can pose a dilemma for the hypnotherapist.

If we play along and even exaggerate hope, we might get a greater placebo effect and greater client engagement – making a positive result more likely. Yet, if hypnotherapy fails, and the client has been pinning all hopes on it, they could feel there is nowhere left to turn. They might blame themselves, the hypnotherapist, or hypnotherapy *per se*.

Raising the stakes and making hypnotherapy an all-or-nothing process is also sending a mixed message if we are also telling our clients that it is predominantly the *client* themselves who brings about change. Hypnotherapy is just one of many facilitative mechanisms. If success or failure is indeed mostly of the client's making, we cannot allow the client to think it really is a last resort because, of course, they will transport themselves into *any* therapy.

Another issue is that some hypnotherapists have some difficulty nurturing hope in clients for personal and professional reasons. One such reason is that they fear failure and what the client might say if they raised and then dashed the client's hopes. Such therapists are possibly taking too much personal responsibility when, in fact, many factors are involved in the success or failure of therapy, including the client's efforts and extratherapeutic factors.

For some hypnotherapists, despite witnessing success time and again, and seeing the research on outcomes, they still doubt whether hypnotherapy *really* works. Perhaps they conflate *whether* it works with our scant understanding of *how* it works. However, knowing and understanding what is under the bonnet should not be a precondition for having faith that a vehicle for change works. Clinical practice and research/academic theorising are tectonic plates that glide over one another, sometimes never touching and corresponding, and at other times causing a fair amount of friction. Our clients are more important than our own personal and professional introspection.

Therapy is a messy endeavour and perhaps the best we can do is muddle through on a case by case basis, doing what we think a particular client will most relate to. Sometimes it might be appropriate to provide scientific explanation and appeal to research evidence, sometimes it's best to proceed on anecdote and clinical experience, sometimes we talk about the unconscious, sometimes we are more cognitive in orientation, and sometimes we talk about the state they will find themselves in and leave unchallenged the common myth that 'trance (itself) equals change'. Clients and results are far more precious than theory and fickle attempts at establishing truth.

We will use and abuse theory in the service of creating hope and change because, ultimately, a client just wants a result. Theories and explanations come and go like any other fashion. Even those who might purport to act with greater integrity – because they go by the latest research and are 'evidence based' – might do this on a false prospectus because, however sure of themselves they may be, their theories and certainties will one day end up in the recycling bin. Such practitioners, too, are almost certainly giving clients false information, as it will eventually transpire. It doesn't take long before research that they have loyally stood by and disseminated to clients gets buried in the dusty stacks under new ways of knowing. It's best to use research to particular ends, because it is right for the particular client in front of you, rather than because it is truth, or our latest approximation to it.

This multiple and sometimes contradictory way of working unnerves some therapists and it can at times accentuate any feelings of being a charlatan. However, on another reading, it is the most respectful and honest thing we can do because hypnotherapy really is in its early stages of knowledge and there is no sign of certainty on the horizon.

When hypnotherapists get hung up on explanation rather than utility, they let themselves get in the way, and ironically, they might just deprive the client of the best possible result. We need to prioritise hope. If the client talks about healing crystals and energies, and you consider yourself to be 'scientific' in spirit, try to put your empirical hat on the hat stand for a while, or focus on the research that tells us we need to build hope, expectancy, placebo, rapport and so on. In one study, 58% of clients reported the instillation of hope as a curative factor in psychotherapy (Murphy, Cramer and Lillie, 1984) and that would appear to be transferable to hypnotherapy. And a therapist must really believe in their intervention if they are to enhance placebo (O'Regan, 1985). Of course, that belief need not be evidence-based provided the therapist is sincere.

Now that we have looked at hope, we will look at it from the other way around, with an interesting, if extreme, story of despair. Cannon 1942 reported in the *American Anthropologist* an extreme medical example of the power of expectation. A native Australian man was dying in hospital. Batteries of tests showed no physical illness. He died in hospital and even the post mortem found no physical cause of his illness. But the doctor reported that the native had told him he was a victim of 'bone-pointing'. This is part of a death spell used by some native Australians on their enemies. The *expectation* that he would die led to his actual death. Anecdotally, some partners, believing they cannot go on when their partner dies, quite often die soon afterwards from what the public would call 'a broken heart'.

Nurturing hope and positive expectation for change would appear to be essential, then, despite the risks and problems. Here are some ways in which this can be done:

- Encourage a positive therapeutic relationship.
- Mention research that has proven positive clinical outcomes for the presenting issue if you get the sense the client will be interested.
- Build positivity in your referral network so that your good reputation precedes you.
- Emphasise the good work the client has done to date in therapy and long may it continue.
- Ask the client to record and celebrate their achievements in therapy and between sessions *en route* to their main goal.
- Emphasise previous successes in life and elicit times when the client has triumphed, especially where this was in spite of thinking they couldn't change.
- Normalise the condition
- State that you have successfully helped with this issue previously (if true, of course).
- Believe in hypnotherapy – think of all the successes previous clients have had.
- Only employ techniques you really believe in after initial trials, being aware of course that a self-fulfilling prophecy can occur, so you might need to act with hope and confidence on the first few trials if you feel cynical.
- Show interest in the results of interventions and therapy as it proceeds.
- Make sure therapy and techniques are viewed by the client as credible.
- Although looking at historical events may be important, be sure to place greatest emphasis on the future.
- Have the client imagine themselves in the future with the problem resolved.
- Emphasise personal control in the client.
- Without over-promising and under-delivering, assume therapy will be brief.
- Hope-centred questioning
 - 'If you weren't doing x, what *would* you be doing?' (engaging with the outcome)
 - 'What would be the first sign that change was coming?' (presupposes change)
 - 'Where do you think you will be when the change happens?' (presupposes change)

Here's a final thought. No part of a stone arch is self-supporting. It is not until the final key stone is put in place at the top that the whole thing holds together. It may be like this for our clients. Nothing seems to hold solidly. Meanwhile the therapist erects the necessary scaffolding of support and belief and maintains the client's hope that one day the arch will stand strong and steadfast and will be self-supporting. Suddenly, that last piece is put in place and everything changes. The evidence all along appears to show that the arch is a flight of fancy. But with hope, belief and expectation all sorts of things can be built.

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Karen Bartle MSc, is the Co-founder of [Academy of Advanced Changework](http://www.academyofadvancedchangework.com.au) and has been specialising in mental health and behavioural change for over 20 years. Her Academy provides attended Diploma courses in Clinical Hypnotherapy & NLP on the Sunshine Coast, Brisbane, Gold Coast, Melbourne, Perth & Sydney, Australia, and a range of CPD courses (online, distance & attended), including an [Advanced Diploma in Hypnotherapy course](http://www.hypnotherapy-training.com.au). www.hypnotherapy-training.com.au



Gratitude to the AHA and the Volunteers – Past and Present.

As a preamble, I want to disclose that I have had a long background in training and business including being an IT and business analyst, for over 25 years, consulting to CXX level management of corporation, and project managing large business projects of enormous scale and cost. (Also have a Cert IV TAE as a professional trainer)

I have also run several successful small businesses, one for over 10 years with Approx 300 contractors and thousands of clients. I give that background to establish that I understand business dynamics and logistics of communicating with stakeholders and large groups of people.

When I decided to follow my passion and become a Clinical Hypnotherapist and Strategic Psychotherapist, I didn't really know what to expect.

I trained with Gordon Young from AIP and was impressed with his style and communication skills as an educator.

I was so impressed and delighted and able to help people so effectively from the moment I began my work in this field, that I then enrolled in and completed all of the training courses available – thus doing a double diploma along with many other certifications.

I was advised during this training to join an association, and in conversations with Gordon, many of us selected the AHA as student members.

Once diplomas were earned the process to full professional membership process was started.

In all emails, phone calls etc., I found that those who run the association not only communicated well about what to do, and how to get the best out of the platform and the membership, including meetings, training and other opportunities, I also discovered they were all volunteers.

I was impressed to say the least.

I then went to my first AGM & elected to pay for and attend the conveniently arranged training, both of which were scheduled immediately after which was convenient and helpful.

During the meeting prior to the training, what I further discovered was that the AHA is not a highly funded group. Funded only by membership fees (which are very affordable and support us all) and the revenue from a running courses and a few other methods of funds generation, and that every single cent used goes straight back into the operation of the AHA.

I have to say that after many years as a volunteer in many associations myself, that volunteering whilst rewarding is often a lot of work.

I am still currently an active member of several charities and co-ops and an active volunteer in several other capacities as well. As a volunteer you know you do it because it is a passion you are following and you do it because you love it, but also because you want to be an agent of appropriate growth and change to help others who are associated with and through the work you do.

Right now, I wanted to acknowledge that there is a very dedicated crew of people who volunteer with the AHA, and that even with my background of volunteering and working with large well-funded corporations - that the turnaround times on questions, requests and communication in general has been rapid, helpful and professional.

I hope that everyone who takes time to read this short article on gratitude takes pause for a moment to acknowledge and thank those who have made the AHA what it is today.

To thank and appreciate all those past volunteers, plus those who are running the association now, and for us all to give thought to how we can all contribute into the future with our own skills and enthusiasm, and for us to act as a volunteers whenever we can.

Thank you for all that you do, all that you have done, and for your vision that will carry us forward and into the future!

In all my years in professional associations, and training organisations, I have learnt that it is the people, such as yourselves, who work behind the scenes who keep these things going for the benefit of the rest of us.

All my best and my gratitude to all.

Kerry Bailey



Kerry Bailey
 Diploma Clinical Hypnotherapy & Strategic Psychotherapy,
 Diploma NLP Leadership and Strategic Coaching,
 Certified Trainer of Neuro Linguistic Programming (NLP),
 Neuro Linguistic Programming Coaching Certificate
 NLP Master Practitioner, NLP Practitioner, Cert IV TAE,
 Time Based Therapy (Cert), Professional Member of the AHA
 Australian Hypnotherapy Association: ID 2017255

Repeating old patterns that keep holding you back, in your work, health & relationships?
Knowing you want change is great, but discovering 'HOW' is what frees you!
For help when you want change, because you are sick of feeling STUCK
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Contact me, Kerry, to start that process now. (email, call, or book online)

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Anxiety's Orphans

By Michael Masani

Towards the end of last year I was fortunate to hear Justice Peter McClellan, chair of the Royal Commission into Child Abuse, speak at a conference in Sydney. (1)

Hardened by 20 years as a public prosecutor before becoming a judge, he was nevertheless clearly moved by hearing evidence given by survivors. He described these crimes as among the worst he had had to deal with. Outside of the public hearings, he sat with hundreds of victims on an individual basis and listened to their stories. People who had never been able to talk before, were never heard, never believed. This was an important part of their healing.

Justice McLennan had been surprised by the high incidence of survivors who had been repeatedly abused over months, even years and yet had no memory of the events. He found it perplexing and, gesturing to his audience of psychotherapists, he said perhaps we might know why this would be. He said it was known that terrible events had occurred because of confessions that had already been obtained. And while these people had no memory of the events, yet they suffered terrible traumatic scars throughout their life. It seemed the lack of memory made their suffering worse, if that were possible.

The usual response to this phenomena is to label it 'repression'. When it comes to memories, 'what's too painful to remember, we simply choose to forget'. But this may not necessarily be the real answer. Recent discoveries in neuroscience have found that when we are subjected to prolonged and severe stress, the neurons in our hippocampus shrivel, ultimately leading to a failure of our hippocampus to perform its routine functions of memory storage and retrieval.

Joseph LeDoux writes in 'The Emotional Brain' (2):

'In survivors of trauma, like victims of repeated childhood abuse, or Vietnam veterans with post-traumatic stress disorder, the hippocampus is shrunk. These same persons exhibit significant deficits in memory ability, without any loss in IQ or other functions. Stressful life events can alter the human hippocampus and its memory functions.' LeDoux goes on to say the hippocampus can recover if and when the stress factors are removed, although the extent of recovery will depend on the length and severity of the stress.

But here's the point; if an event is unable to be recorded at the time because of brain malfunction, there is no remaining trace, it cannot be recalled. Other brain functions are seemingly unaffected by stress and, in particular, the amygdala is able to register fearful emotions that, once encoded, are endlessly recalled. These orphaned memories distort our minds and bodies in a fiendish way - without remembered reason or cause. Such is often the nature of PTSD. A similar situation can arise with certain kinds of physical brain injury that take out the hippocampus but leave the amygdala intact. It is also the case that the hippocampus does not fully develop until we are 4 or 5 years old, leaving most experiences during that time lost in infantile amnesia. The amygdala however is fully operational from birth, busily encoding whatever trauma is felt.

The work of Peter McClellan and the Royal Commission is playing an important role in helping to give these orphaned feelings a context and a voice that is heard and believed.

As therapists we may also be called upon to listen to people suffering trauma and anxiety; people who are unable to find a reason for their condition. Trying to uncover memories may be unsuccessful, even trauma provoking. A process that aims towards de-potentiating the emotional memories may be more likely to succeed.

Canberra, October 2018

-
1. ANZAP conference, Sydney, October 2017.
 2. LeDoux J. 'The Emotional Brain'. 1996 Simon and Shuster Pg. 242



Email: info@syandra.com.au



The amygdala, the old, reptilian part of the brain responds to fight-flight, or freeze situations. It plays a role in unconscious memory and may respond to Switchwords which decrease or delete negative drives and

reactions. If we try to manifest what we want when old memories and beliefs oppose our conscious willingness, it's unlikely that our wishes will produce results. Switchwords allow us to move past conscious indecision.

Switchwords are similar to traditional affirmations and mantras, however a 'switchword' consists of a single word that works to create a particular manifestation or desire, rather than using a string of words.

The original source of switchwords came from James T. Mangan (1896-1970) He researched what he called "switchwords" over a period of 45-50 years, and published his findings in a book, *"The Secret of Perfect Living"*. Mangan concentrated on discovering a practical method of uniting the conscious and the subconscious and found a technique through which such a union could be achieved. His technique calls for three easily adopted attitudes and the use of *switchwords*, a means by which the conscious mind can "talk to" and direct the thought patterns of the subconscious.

* *Put your attention on what you want to happen.*

* *Throw the 'Switch' by declaring the appropriate switchword. (*sing, chant, think this over and over to manifest faster)*

* *Then let go and trust your subconscious to produce the result.* ²

The creative process involves three steps to attract all your desires...

1. **Ask** – You must know what you want. The universe can't deliver without first knowing what it is that you want to have manifested into your life.
2. **Believe** – You need to truly believe that what you are asking for will become yours. Doubts need to be pushed away. The idea that failure is a possibility will mess up the delivery. *Note* If a doubt enters your mind, immediately say 'cancel'.*
3. **Receive** – It is important that you become an active player in reaching your goals. When opportunity comes your way, you must not hesitate.

Shunyam Nirav discovered Mangan's work in 1975. He experimented with switchwords in hundreds of situations over 30+ years and observed how they produced the intended results. He reprinted Mangan's book with details of his own observations. He wrote; *"Wouldn't it be great to have a magic wand that you could just wave at any situation or creative project, and have it turn out beneficially just as you wish?"*

We all have such a wand! However most of us have not been aware of it and have never received an instruction manual for its use. Your word is your want. "Switchwords" are the essence of each life experience or desired result. Declare, affirm, chant, sing, or just mentally "Intend" the switchword. It is like switching of an electric lamp, the desired result reliably appears! ³

"How to Use One Word to get what you want" by Liz Dean. This book can be previewed online.

Dean suggests why Switchwords succeed where affirmations can fail. Switchwords work through sound and feel, which create a vibration that speaks to the unconscious mind. Affirmations work through semantics, or the words' literal meanings, which appeal to the conscious mind. ⁴

A link to a list of Mangan's Switchwords with meanings for manifestation is at the end of this article.

For example:

- TOGETHER – The master switchword for a life of heaven on earth and mastery of any task.
- REACH – To find misplaced items, forgotten ideas or memories, information or solutions to problems.
- COUNT – To manifest money...
- CANCEL – Eliminate negativity or unwanted thoughts or conditions...
- BE and CHANGE – For good health and peace...
- DIVINE – Order...
- FIND – Build a fortune...
- CARE – Memorise... remember... retain...
- REACH – Locate misplaced objects forgotten ideas, information that is unavailable to consciousness, solve problems, repair things...⁶

Vibrations - Yogi, mystic and visionary, Sadhguru is a spiritual master with an arresting blend of profundity and pragmatism. His life and work serve as a reminder that yoga is a contemporary science, vitally relevant to our times. Sadhguru explained how Aum is the universal sound. It is not religious and is found across the world in various traditions including Christianity and Islam. If the tongue is removed,

you can only make three sounds: Aaa, ooo, mmm. By placing the tongue in different positions on the palette, these three sounds combine to produce all other sounds. Aum is the basic sound of creation. When you chant the word Aum, it reverberates from just below the navel to the tip of the nose. Aum chanted correctly has healed many ailments.⁵

A fundamental law of attraction guides the Universe: Like attracts like both good and bad. Napoleon Hill expressed this law when he said; "We become what we think about." In the second century of the Common Era, the Roman emperor and Stoic philosopher Marcus Aurelius said; "Our life is what our thoughts make it." Mahatma Gandhi said: "We must become the change we want to see."

American mathematician and meteorologist, Edward Lorenz proposed the 'chaos theory' or 'butterfly effect'. He conjectured that a subtle event in one part of the world could effect a greater change elsewhere, i.e. the energy generated by the subtle movement of a butterfly wing could potentially result in a tornado on the other side of the world.

A mantra activates the energy of the universe, which responds with an event, a realisation or an experience greater in energy than the energy of the original intention. A single word repeated, may bring much more than the echo of the word. It may bring a tangible expression of our desire.⁷

'Sacred' Word Repetition May improve PTSD Symptoms, Insomnia

Results from a randomized controlled trial showed that mindful repetition of a mantram or sacred word, effectively reduced symptoms of combat-related posttraumatic stress disorder (PTSD) and insomnia. The effectiveness of mantram repetition was compared to present-centred therapy in veterans with PTSD. Both interventions were offered weekly for 8 weeks.

The program taught people to intentionally slow down thoughts and practice 'one-pointed attention' by silently repeating a personalized *mantram*, a word or phrase with spiritual meaning. Although both groups experienced some symptom improvement, those in the mantram group had significantly greater improvements in both PTSD and insomnia. Benefits continued to be present at a 2 month follow-up. Mantram repetition not only mitigated PTSD, but other symptoms of psychological distress to improve quality of life in a variety of populations.

*"For people who do not like other therapies, such as mindfulness or CBT, mantram is a good substitute. A take-home message is to be open-minded and not judge this intervention before you have tried it for yourselves."*⁸

Jill E. Bornmann, PhD, RN Research Scientist

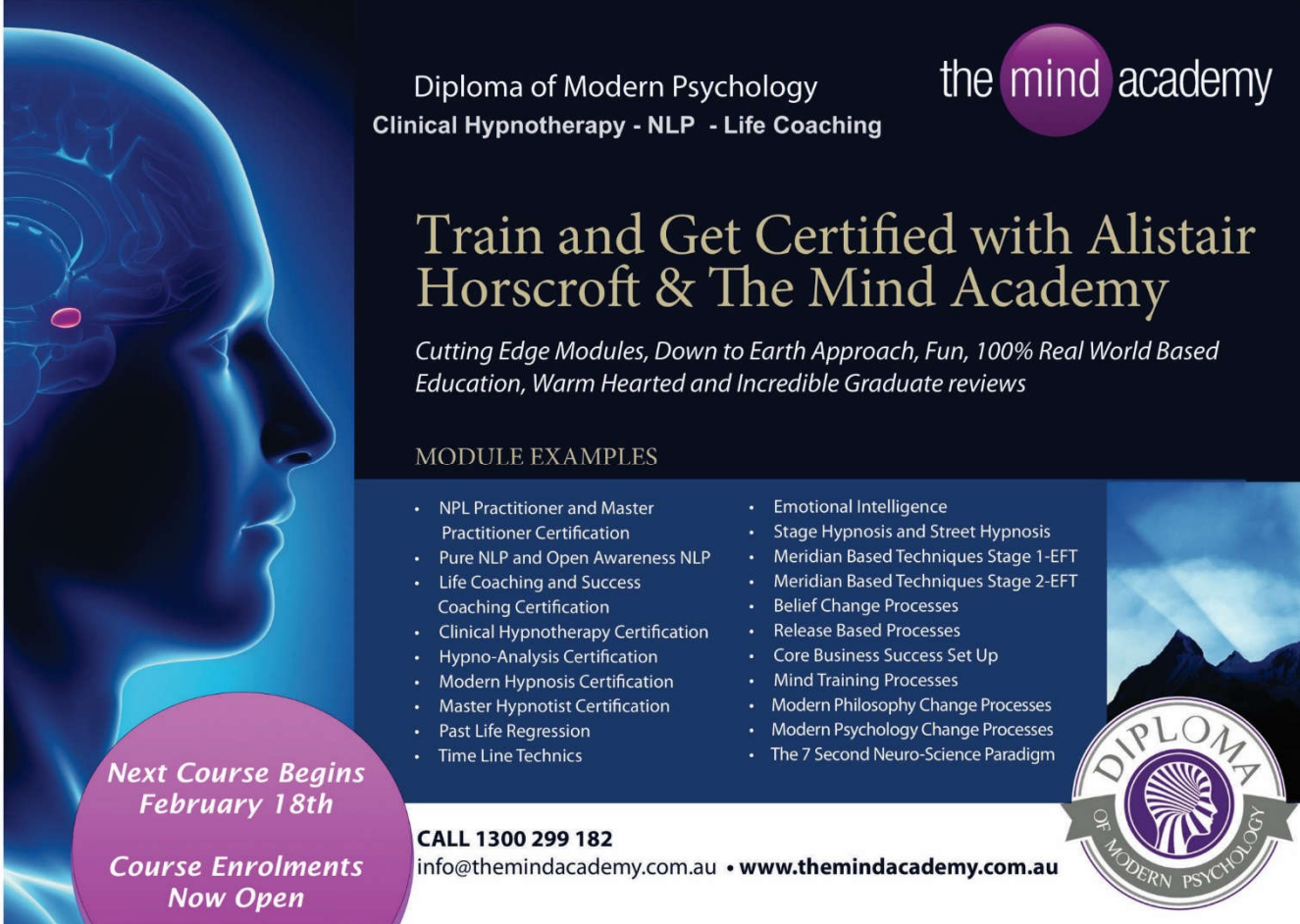
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- 2 James T Mangan - The Secret of Perfect Living <https://www.amazon.com/Secret-Perfect-Living-James-Mangan/dp/0741436078>
- 3 Shunyam Nirav - Switchwords – Easily Give To You Whatever You Want In Life, ISBN 0-9633187-8-0 Version 8.1
- 4 Liz Dean. Switch Words – How to Use One Word To Get What You Want. ISBN 978-0-00-814423-4
- 5 Sadhguru - <https://youtu.be/nBFyrKYI6TU> - Aum, Amen, Ameen - One and the Same. How to chant it properly, go here - <https://youtu.be/rCZ78UzGsWU> - Sadhguru chants Aum (om) 108 times with bell at 72nd Aum
- 6 A list of Switchwords from A to Z - http://blueiris.biz/switch/combined_switchwords.pdf
- 7 Edward Lorenz and the Butterfly Effect. <http://scihi.org/edward-lorenz-chaos-theory/>
- 8 Research - 'Sacred' Word Repetition May improve PTSD Symptoms, Insomnia https://www.medscape.com/viewarticle/898693?src=wnl_edit_tpal&uac=169508EV&impID=1672325&faf=1



Bruni Brewin JP - Dip Hypnosis. Dip Counselling, Cert Mental Health Practitioner, Cert Complementary Medicine, Cert TIR, Cert NLP, Cert TA, Cert EFT, LMAHA, CMAHA/SUPERVISOR. (Member since 1992.) President Emeritus – Australian Hypnotherapists Association (Honorary Title) Note: all thoughts in this article are those of the author and do not reflect the thinking of the current National Executive. Co-Author "The Art of Spiritual Hypnosis: Accessing Divine Wisdom" <http://amzn.to/1WozWNW> email: bruni.brewin@bbbbenefits.com.au website: www.bbbbenefits.com.au

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AHA State Workshop Reports Queensland Workshop 25.11.2018

Helping YOU and your Clients to Performance Success!

Workshop summarised by Chereyl Jackman – including handouts by Julie Robinson

Julie Robinson is a Trainer for The Australian Government accredited qualification 'The Diploma of Modern Psychology' incorporating Clinical Hypnosis and NLP (The Mind Academy). She has a mission with those she meets to enthuse, motivate and influence.

Julie specialises in working with some of Australia's most successful performers. She prepares athletes from rookie to the elite with a winning mind set and self-belief that produces 'magic'. Her passion for sport is well known within her industry. She has the honour of working with swimmers on the Australian Swim Team including Olympic Gold medallists and World Record Holders.



She uses her direct skills of communication and connection to assist children, teenagers, young adults and parents to prepare them for life's challenges. She develops confidence, mental health and a more beneficial family environment.

Knowing nothing about NLP and Hypnosis, she became curious after her daughter experienced an amazing recovery from an illness. She went on to learn and implement these skills both in private practice and as a coach to elite sports people, parents and business entrepreneurs.

Julie's clinic focuses on Stress, Anxiety, Depression, Sport, Parents and Workshops for Children, and Children. Her methods include Virginia Satir's Family Counselling, NLP and Metaphors. For example, in her therapeutic approach with athletes, Julie reframes negative implications associated with nervousness.

Nerves presuppose a good performance / Nerves show that you care about others.

The 5 Components of Success Based upon Dr Stephen Kraus

1. **Goal/Vision – What do you want to have?** If they can't feel it, they can't achieve it. If they can't vision it, they haven't learnt to visualize. To sense it is another way of doing it. The more elite the athlete, the more the goal is sacred. The less elite the athlete, the more likely they are to give it away.
2. **Strategy – Your plans/tasks to move towards your goal.** A goal without action is delusion. How to do it? Where to get the information? How to put it in place? Coach – Training – Practice. If they want to improve by practice, they need a strategy – How! Where to get information – clear action!
3. **Belief – Knowing you can do it – knowing you can learn to do it.** Coaches will tell athletes "You need to believe in yourself." They don't teach them how to believe in themselves. This frees them up to become decision makers.
4. **Persistence – Giving yourself time to learn.** Trying implies failure. They need time to learn how to do it – videogame it. It is an ongoing process.

Feedback Loop – Adjustments and modifications to above components if required. The Unconscious Mind's primary focus is to protect the Body and Mind. An elite athlete threatened by pain is rarely fearful of pain. The threat is to the Ego/Mind. The more elite the athlete, the more they need the 5 Components to protect the mind and ego. If you are doing all five, you're doing well. Do not encourage co-dependency. Train – Teach – Learn. Hypnosis creates dependence.

A swimming coach will tell the swimmer everything they've done wrong ... but keep trying! They need UNC learning to take on new info and put it in place. They may need to adjust their goal, use a stepping stone or change their strategy.

A common practitioner misinterpretation concerns **Mental Dialogue**: Generally we have 60,000 thoughts daily and 95% of those are negative. Marshallists provide bins for vomiting brought on by uncontrollable

internal dialogue. How does a person know they're nervous? Feeling! Rate the feeling from 0 – 10. Nerves presuppose a great performance. What feeling do they need to succeed? 4 – Nerve-cited. NLP. Have them be present with the feeling i.e. stomach coming into solar plexus. Grade it. If things go well, if things go bad – check internal chat, use the sub-modalities. What thinking produces the feeling? Is it fast or slow? How loud? Where is it located?

If a client says that achieving the desired outcome would be nice – Julie stops immediately. The client must be passionate. It must feel awesome! Change the sub-modalities to find the feeling. They could imagine they have a remote control to vary the speed, the volume, etc. Grade it. If they could close their eyes and get a sensation of where their thinking was located, where would it be in the body? Change the sub-modalities again, check the feeling and grade it.

We're looking for drivers. Teach the client how to control their feelings. If they get a lot of relief from a certain position, check it out for the learning experience. Put everything into place – speed it up, louder, direction, eyes closed. Anchor the new neurological pathway.

Negative Thinking / Worry / Internal Dialogue

- Elicit the 'k' attached to the ID / worry / negative thinking.
- Check for metaphors.
- Grade the intensity out of 10.
- Get leverage: What would happen if you learnt how to control this ID / worry / negative thinking?
- Elicit sub-modality 'drivers' of ID: Speed, Location, Volume.
- Change the sub-modality 'drivers' of ID to notice the difference – if possible intensify first to obtain movement.
- Test with all sub-modality drivers.
- Install change work with trance/hypnosis using drivers, metaphors and future pacing.

Dealing with Disappointment

- Be aware of a performance, client session, event that you remember and are still disappointed/ frustrated/sad about.
- Be aware of the level of emotion you feel when remembering this event 0–10. 0 being no emotion and 10 being an ultimate intense level of that emotion.
- Get a sense of seeing yourself, from afar, out there doing the event from your mind's eye. Sense yourself as it you are a spectator, or as an observer.
- Watch yourself as the movie progresses. Change sub-modalities if required.
- Notice as you do this your level of emotion might have lessened. Write down your level emotion between 0 – 10 now.
- As the observer/spectator, sense seeing yourself again in the event and observe, explore and investigate 3 important and valuable lessons and learnings from the event that you can use for the future. They say that hindsight is a wonderful thing and your sub-conscious will hang onto a memory from the past if you have not yet learnt from it.
- Write those 3 lessons and learnings down in a positive way i.e. what you allow yourself to have or now behaviours to implement.
- Having sensed that memory event, and realised the lessons and learnings now it's time to let your unconscious processes do its job.
- Sense the movie out there and be aware of your 3 lessons and learnings. Pull out those 3 lessons and learnings from that memory in a way that works best for you. Use a metaphor for these 3 learnings: golden nuggets of information, gems, diamonds, jewels, etc.
- On the inside of your mind create a new, future event in front of you, where you can sense yourself putting into place those 3 lessons and learnings one after the other.
- See what you see as you implement those changes, one after the other, into your future. See how you are looking, your expression on your face; the look in your eyes. Hear what you hear as you imagine those changes happening now. And more importantly, feel what you feel as you see yourself make those changes.
- Now it's time to dive into your body, in the movie of you using the 3 lessons and learnings, and notice what you see with your own eyes as you make those 3 changes one after the other.
- Notice what you see, what you hear and what you feel inside as you use those 3 lessons and learnings.
- And now it's time to dispose and get rid of that original movie that used to give you a bad feeling.

- Some people imagine putting it in a bin, some people even imagine burning it. Some people like to use the ‘delete’ button of their mind. You can do it either in one of those ways or check out a way that works best for you. Investigate and explore which way works!
- Repeat steps to adjust and change anything you might need and then you can know those lessons and learnings are ready to experience now.
- Our final step is to now notice what level of emotion you have out of 10. Chances are that it will be a whole lot less than it was before!

Internal Anchor of Natural Confidence

When something really good is at the end of the road we get excited. We may return to the default but it can never be the same.

- Collect Anchor of resource state – gain leverage by asking: What would happen if you could access this state whenever you wanted? What would this control allow you to do? How would this change the way you work/your life, etc.? If there is no leverage abort process. Test anchor and repeat above step with adjustments if required.
- Create an internal stimulus for Natural Confidence. You may like to give examples i.e. button, level, switch.
- Fire off anchor as client implements internal stimulus – add client’s keywords and feelings with great intention.
- Repeat above 2 times.
- Repeat with less verbal involvement.
- Repeat without firing physical anchor.
- Test with eyes open and standing.
- Future Pace using this Internal Anchor.



Julie at Queensland Workshop working with Evonne Fisher

How are All These Beliefs Formed?

- Beliefs are most often formed in early childhood. They are learned. They are interpretations based on one’s awareness at that time.
- These beliefs then generate pre-conceived emotional reactions.
- The real time event/stimulus does not produce the emotion. It has nothing to do with the emotion as the current event/stimulus just got conditioned to produce the negative emotion because it is associated with the real original cause (belief interpretation) in some way.
- Your current beliefs are only a truth. Your current beliefs are NOT the actual truth. Your current beliefs are not a fact. The beliefs do not actually exist in the thing that you are fearful about!

Common Practitioner Mis-interpretations

- | | |
|---|--|
| • I need to fix them. | • I should already know everything I know. |
| • I’m not Capable. | • I simply cannot be myself. |
| • I’m not competent. | • People will judge and criticize what I say and/or me. |
| • I’m not Good Enough. | • If what I do is not perfect then it’s not good enough. |
| • I don’t like being put on the spot. | • I need to be liked by everybody. |
| • I’m not important. | • I need to be accepted by everybody. |
| • What I have to say is not important | • I will let people down. |
| • If I make a mistake I will be rejected. | • I’m scared of becoming too successful. |

There are many interpretations to a created experience. The client has an infinite number of possibilities and can learn to make decision for themselves. Bandler said to suspend your beliefs when working with a client. “It is what it is!”

Julie concluded with a **Final Hypnotic Belief Script** which she uses with her clients as part of the therapeutic process.



Narrative Therapy

AHA Seminar presented by David Newman – Sydney 25th November 2018

Starting after lunch - typically the snooziest time of day – and yet I was totally immersed in this lively, thoughtful three hours. David is a very likeable presenter, fielding our questions with great respect and good humour.

As you might expect, Narrative Therapy (NT) works with stories and, from that starting point, shares much in common with hypnotherapy. It was surprising, then, to hear David say up front that, “we do not address the subconscious”, adding that he hoped that did not mean we would all switch off! With any other presenter I probably would.

David explained that the key theme to NT was a double story, the story that depicts the old problem and a new story that seeks to re-frame life in a more positive, enhancing way. I’m on board with that. He went on: *“Stories shape our identities and actions – I am interested in people’s stories that involve actions taken to reduce suffering, or numb out and where actions indicate values.”*

As with hypnotherapy, words are important. NT takes what David called ‘a non-pathologising stance’, avoiding language that takes away from the issues (an example he particularly disliked was ‘dysfunctional coping strategies’). I’m good with that, too. In NT, one way of telling a story is by writing letters to the problem...

To illustrate this David shared a case study – a young Asian lady he called Catherine - who talked of *‘wanting to go to sleep and not wake up’*. He played us a video from a session he had with her. She had survived a particularly brutal and cruel childhood. In the video she talked about the “little girl in constant pain – emotional pain, I can’t imagine how she could survive...I want to go to help her...” Then a realisation, “if I help her I’m actually helping myself”. There was some group discussion after the video. Some of the group saw this interchange as inner child work. It seemed that way to me. Then David shared his next stage in the therapy, which was to write a letter to Catherine’s younger self. It was a beautiful letter and captured much of what I imagine the little girl must have suffered. I felt moved just reading it. David sent the letter to Catherine by email.

The point of sharing this with the group was to illustrate how NT tells a new story. The letter gently suggests the little girl not only survives, but in fact does so by deploying a ‘kind of skill’. It was hard for Catherine to accept her younger self as skilful at all – her old story was showing herself as worthless, pitiful. David went on to say that Catherine brought the letter into subsequent sessions and, I presume, that had played a part in her recovery.

I thought this was an example of skilful therapy by any name. There was no trance induction, but I’m fairly certain there was subconscious work done. The deep, tender hurts of the little girl were so beautifully and compassionately captured in David’s letter that somehow there was the possibility they could be processed, be de-fused, and given passage in following sessions, after being locked-down for so many years. I could see a lot in common here between hypnotherapy and NT.

I found it a stimulating afternoon, but it was not all sweet harmony. We had robust discussion at the end concerning a slogan of NT, ‘the problem is the problem’. I took this to mean there is nothing deeper, no hidden meanings, no causes, only effects. It felt like the ultimate denial of the subconscious and its processes. It also seemed to contradict David’s earlier comment about ‘actions taken to reduce suffering, or numb out.’

Milton Erickson was the master story teller and his legacy reminds us how important story is in our therapy. Erickson also believed that change begins in the subconscious and this is where he parts company from Narrative Therapy. Me too.

Our differences were aired with respect and I was grateful to David for his presentation. My drive home to Canberra was unusually energised - full of thoughts and ideas about my practice. A day well spent.

Michael Masani runs a full time clinic in Canberra specialising in areas of anxiety and depression. He is a clinical hypnotherapist and a P.S.H. therapist. In addition, he teaches and practices meditation.

‘Some people want it to happen, some wish it would happen, others make it happen.’ Michael Jordan



AHA Information and Updates

Workshops for 2019

<http://www.ahahypnotherapy.org.au/hypnotherapy-training/aha-events-calendar/>

AHA workshop information

AHA workshops are suitable for hypnotherapists, NLP practitioners, Counsellors and psychotherapists etc. They are aimed at areas such as skill development, personal development, business, health, and overall wellbeing.

We encourage all members to take advantage of these workshops as you are not only able to continue your learning, you are also networking and involving yourself in both the association and the profession.



AHA State Workshop Reports

AHA NEW SOUTH WALES – Summer State Report 2019

AHA NSW State Report: Summer 2019

The November workshop for members was well attended and was presented in two parts. It was very encouraging to receive a broad range of positive feedback from members with one of our more vocal members (you know who you are :) telling me that this was one of the best workshops he has attended.

Dean Wooding (Mindfulness and Hypnotherapy) Dean has devoted most of his working life to the practice of mindfulness. He loves the gentle art and his presentation showed his passion. He involved all members in different tasks, inviting attendees to incorporate new learnings into their hypnotherapy practice.

David Newman (Narrative Therapy) I love David's sensitive and respectful approach to therapy. He follows the maxim "the problem is the problem, the person is not the problem". Through a practice of allowing the client to develop their story (even though that story might be from someone else's story), the client begins a healing process.

Next workshop March 10: Maggie Wilde: CPR Brain training – How to grow you and your practice.

Brett Cameron
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AHA QUEENSLAND - Summer State Report

Happy New Year and Welcome to 2019

For the final quarter of 2018 we had Julie Robinson present at our Queensland workshop. Julie specialises in sports hypnosis and has helped many swimmers on the Australian team, including Gold medallists on the 2012 Olympics team. As well as this, Julie is also passionate about assisting children and young adults to prepare for the challenges they need to face in life. She is a trainer at the 'Mind Academy' in the Sunshine Coast and has many years of experience in Hypnosis, NLP and personal growth.

Julie has a very relaxed manner and is able to articulate herself in a very down to earth way. She delivered 2 presentations, one of which we were the first to see.

The first half of the day we learnt various hypnotic and NLP tools that can be used for performance and motivation as well as dealing with failure or anxiety. We discussed the mindset of success and delved into sub-modalities in a more expanded way than many of us had done before.

For the second half of the day Julie spoke about the structure of belief. How they are formed (with her left handed reversed timeline). Explained how we all do the best we can with whatever information or beliefs we have at the time, then demonstrated how to elicit the unlimited possibilities that could have been taken from that moment, thus shaking up the belief and freeing the subject/client from the emotional effect of whatever happened.

There were numerous people who commented that it was the best presentation the AHA has had in ages.

Also, as I'm sure mentioned elsewhere in the journal, Queensland will be holding the 'World Conference' this year. Exciting! If you would like to present or know someone you would like to see present, please get in touch soon because applications are closing.

Have a wonderful 'right now.'

Greg Thompson
State Executive Officer, QLD
Australian Hypnotherapists' Association
Mobile: 0422 741 041
Email: qld@ahahypnotherapy.org.au



AHA VICTORIA - Summer State Report

On November 25th, a Workshop at our new venue was presented by Tess Graham. The topic was Enhancing Hypnotherapy through Better (Not Deep) Breathing. Tess has studied with Dr Buteyko, and her amazing comprehension of the role of breathing was well communicated to us.

Our upcoming GM and Workshop will be on Sunday 17 Feb, presented by Dr Steve Carey.

Our current membership stands at 164 a baker's dozen more than my last report, comprising 62 Clinical, 61 Professional, 9 Affiliates, 1 Associate and 31 Students; have just learned how to interrogate the database, instead of printing the lot and counting!

Tony Ahearne
State Executive Officer,
AHA Victoria
Mobile: 0419 190 542



AHA SOUTH AUSTRALIA - Summer State Report

The committee continues its focus on three main areas. Quality workshops aided and abetted by our capable workshop co-ordinator., developing supervision in SA, establishing a community for hypnotherapists in SA through a Facebook presence. Getting a grip on the supervision situation is proving to be challenging, but our supervision co-ordinator is continuing to work on the issues and benefits are beginning to accrue. The Facebook presence is in the early stages at this point and will hopefully become fully active during the first half of the new year.

Our most recent workshop was on Eating Disorders presented by Joy Anasta, an experienced counsellor with many years working with challenging cases. The workshop looked at a number of facets of the issue as well as approaches to working with clients. Feedback from attendees was very positive, to the extent that she has been invited to give another workshop later this year. The next workshop will be held on Sat 16th Feb, the topic will be Mirroring Hands and presented by Richard Hill. Richard comes with a reputation for presenting engaging and informative workshops and so we are anticipating another excellent workshop.

Kind regards,
Colin Darcey
AHA SEO



AHA WEST AUSTRALIA - Summer State Report

Our workshop with Rona Spicer was so very well received. Rona spoke of the Hero's Journey, The Wisdom of the Hero Within An integrated, psychotherapeutic structure towards enlightenment.

This was the first workshop at the new venue, The State Tennis Centre is centrally located in Burswood. With so much parking everyone was very happy. We look forward to returning in February for our Workshop with Maggie Wilde - C P R Brain Training and How to Use Facebook to Support & Grow Your Business on February 10th.

We currently have:

Affiliate	2	Professional II	22
Clinical	22	Student	24
Fellow	1	TOTAL	71

Upcoming Meeting and Training Days:

- Sunday 10th February 2019: Maggie Wilde – CPR Brain Training
- Saturday 18th May 2019: Katina Gleeson – Neuro Counselling
- Sunday 17th November 2019: Gail Rogerson – Our 3 brains (MBIT) introduction.

Kind Regards,
Hope Wesley
State Executive Officer, WA
Mobile: 0430 224 130



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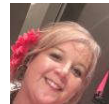
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AHA Journal – Benefits of Submitting Quality Articles

The Australian Hypnotherapy Journal Benefits

Getting published in the journal, especially now that it is recognised and stored at the National Library, boosts your credibility and begins the trust cycle with your readers, as well as:

- **Boosts Your Personal and Business Credibility:**

For many authors, being published in the Journal is an excellent way to get started. Having your articles in The Australian Hypnotherapy Journal allows them to pre-sell your ideas without you having to make any cold calls or face-to-face sales appointments to advertise your services.

- **Builds and Markets the Brand Called 'You':** Having your articles published in the Journal builds 'you' as a brand name, builds your business, and advertises your expertise. It begins or reinforces in your colleagues and prospective clients' minds what you can do for them.

- **More Effective than Regular Advertising:** Publishing your article in the Journal means you become known as the expert by the reader and this encourages trust by potential clients, before they even visit your website. There is no better way to "pre-sell" you, as the expert, than by article marketing.

- **Exposure to the Hundreds of Readers:** Your articles may be viewed by the hundreds of AHA members and other associations' members as well as the public that visit the AHA website every month! We work very hard to deliver a positive, fast and reader friendly experience that keeps readers returning for more.

- **Receive Quality and Relevant Leads to Your Website:**

People who read your articles and then click on your website link at the end of each of your articles, for further information; are highly-motivated prospects by the very nature of how they initially found your website.

- **Increases Traffic to Your Website:**

This is caused by the various e-zine publishers who regularly scrutinise the latest copy of the Australian Journal throughout the year to pick up quality articles for their email newsletter or website in addition to our hundreds of members who are looking to immediately benefit from your expertise. When your articles get picked up for reprints, you will often get a surge of traffic to your website, as your articles are introduced to other associations' email list members, etc.

- **You May Receive Free Ads in other E-zines:**

When other e-zine publishers come to the Journal to pick up and reprint your articles to their newsletter base, this is essentially a free ad in their newsletter. The better quality you put in your article, the higher your chances are of increased distribution by other e-zine publishers who use the Journal to find quality content to send to their readers.

- **Optimise Your Existing Article Archive:**

If you have already produced a series of quality articles, why not submit them to get even more readers and promotional mileage for your efforts? After all every article you submit to the Journal will reach new readers that would have never found your articles or website before.

- **Get Continual Traffic to Your Website for Many Years to come for Free:**

Your articles will be stored in the Journal archives on the AHA website for many years. They will also be stored at the National Library of Canberra digital archiving section:

<http://pandora.nla.gov.au/tep/114491>

- It is also the case that many e-zine publishers will pick up your articles for reprints and this could mean continual traffic over the next decade or more.

The Australian Hypnotherapy Journal

Advertising Guidelines

Submissions - News and Articles

We welcome your feedback and input in the form of news, views, poetry, letters, articles etc. Please forward these to the editor, Chereyl Jackman at:

ecs_nt@bigpond.com by the date/s noted below.

Schedule of Issues

Spring: Submissions received by **20th September** for publication beginning **October**.

Summer: Submissions received by **10th January** for publication at end of **January**.

Autumn: Submissions received by **20th March** for publication early **April**.

Winter: Submissions received by **20th June** for publication early **July**.

Advertising Guidelines

1. The Journal will refuse an advertisement if we do not consider it suitable.
2. The inclusion of an advertisement in the Journal does not imply endorsement of the product, the company advertising the product or the service being advertised.
3. It is the responsibility of the advertiser to ensure they don't offer products and/or services that are unsafe or defective.
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5. Advertisers are responsible for ensuring that all claims about your goods and services are accurate. Do not claim that your goods and/or services have any special sponsorship or affiliation that it does not have.
6. When advertising the price of goods or services, the total cash price, including GST, must be provided. You must show the full price, including any commissions, charges, or postage and handling.
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10. If you follow a link from an advertisement you may be taken to a third party website. The Journal does not review or control the content of third party websites and is not responsible for the accuracy of the information contained, or the views expressed, in those sites. If you supply information to those sites, or access their products and service you do so at your own risk.
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13. When the disclosure of qualifying information is necessary to prevent an ad from being deceptive, the information should be presented clearly and conspicuously so that consumers can actually notice and understand it. The Journal Advertising Policy may be revised periodically.

Artwork

Artwork is the responsibility of the advertiser and needs to be sent to the editor as an email attachment. Preferred document type is **Word**. Graphics should be submitted as **JPEGs (300 dpi resolution)**. Graphics can be resized to full page or as required. Entire article including graphics should not exceed **2,000 words** or **5 MB**.

Bookings and Payment

Please provide your advertisement together with your payment to ecs_nt@bigpond.com before the submission date as the AHA only accepts a limited amount of advertising for inclusion in each issue of The Australian Journal of Hypnotherapy.

Please note advertising will not be accepted without the accompanying payment. Payment details are listed below.

Direct Deposit

The Australian Hypnotherapists Association,
CBA, Paddington, NSW
BSB: 062 220
A/C: 10012818

Advertising Rates

Full Page	\$75.00
Half Page	\$45.00
Quarter Page	\$25.00

Benefits of AHA Membership

Once you are a member, the AHA offers you a unique combination of benefits.

These benefits include:

Professional Opportunities:

- The prestige of being part of the oldest and largest professional hypnotherapy association in Australia recognised nationally and internationally
- The opportunity to attend international and national hypnosis conferences at reduced registration
- The circulation of details of forthcoming AHA workshops and seminars giving you access to advanced specialist hypnotherapy training
- The opportunity to be published in the Australian Hypnotherapy Journal
- Free subscription to 4 issues per year of the Australian Hypnotherapy Journal – this journal is subscribed to by universities and libraries around Australia
- Free publication and distribution of regular *News Bulletins*
- Upgrading to higher membership levels as soon as you qualify.

Promotional Opportunities:

- Free listings on the National Hypnotherapists Register of Australia™ which includes:
 - “find a Hypnotherapist” search by postcode, suburb or name
 - Free active link to your own email address and website(s)
 - Personalised description of your qualifications and specialities
 - Able to update any time for no cost
- Use of *AHA Logo*
- Free inclusion (where applicable) in the *Foreign Language Speaking Register*
- Free dedicated referral facilities from the AHA National Advisory Line by an experienced, specialist hypnotherapist to all professional and clinical members (our 1300 55 22 54 number is available to members and the public between 9:00 am to 12:00 pm Monday to Friday)

Professional Support:

- Strong support network – access to professional supervision with trained AHA supervisors willing to support your career progress
- The publication (within the AHA website) of regional information to Registrants seeking peer group or personal supervision arrangements
- Access to AHA administration support willing to assist with clinical and administrative information / support
- Receive all membership mail outs
- The Forum – online case discussion where you can ask questions of other members about any issues you may encounter
- As a member of the AHA you have the opportunity to establish professional relationships with hypnotherapists throughout the world

Professional Security / Credibility:

- Access to **discounted Professional Indemnity & Public Liability Insurance**
- Health fund provider numbers allowing rebates for your clients (the list of health funds can be found here: http://ahahypnotherapy.org.au/aha_members_area/)

- Advice with regard to obtaining *Criminal records bureau disclosures* (WWC and Police checks)
- Ongoing updates with regard to government legislation concerning the hypnotherapy field
- Opportunity to create positive change in the industry by becoming a committee member
- Representation to and dissemination of relevant information from the Department of Health and Aging and other relevant agencies
- The provision of relevant information on all aspects of the profession to registrants, the media and public

International reciprocal alliances:

- Automatic acceptance under an *international reciprocal alliance* into either the General Hypnotherapy Standards Council (GHSC UK), the Association of Registered Clinical Hypnotherapists (ARCH Canada) or the New Zealand Association of Professional Hypnotherapy (NZAPH) if relocating to those countries. Please also note that the application process and standards apply if you are entering Australia. Please call 1300 55 22 54 for further information.
 - [The General Hypnotherapy Standards Council \(UK\)](#)
 - [Association of Registered Clinical Hypnotherapists \(Canada\)](#)
 - [New Zealand Association of Professional Hypnotherapists \(New Zealand\)](#)

Access to the above benefits in individual cases is always at the discretion of the AHA Executive Member Associations:

- The AHA is a member association of the Hypnotherapy Council of Australia (HCA)

For details on how to become an AHA member go to:

<http://www.ahahypnotherapy.org.au/join-the-aha/join-the-aha/>

and download the prospectus and application forms.



The AHA a Facebook page!

Please visit and 'Like' the AHA Facebook Page

<https://facebook.com/Australian-Hypnotherapists-Association-1831236970460290/>

NOTE: Some internet links may not be accessible from this journal and will have to be manually entered if you require more information.