


HYPNOTHERAPY TODAY

ASSOCIATION FOR SOLUTION FOCUSED HYPNOTHERAPY JOURNAL ISSUE 5

What are
words
worth?



The Hero's Journey
On the radio
Finding your own words
Metaphor Corner

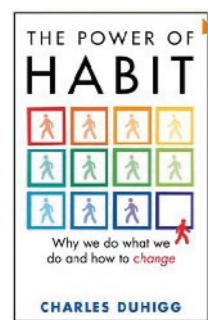
LATEST NEWS, VIEWS AND REVIEWS

The Association has been busy in the last few months with Nicola and Debbie completing more marketing courses, and the party in September being planned. Trevor Eddolls is working with a company which develop postcode look-up software, so watch the website for these updates. It will mean that potential clients will be able to find us easier.

There's more good news from further afield - Susan Rodrigues attended a conference at the Royal Society of Medicine. It was 'said' at the conference that "Hypnotherapy should be the first port of call for childbirth", which is good news for all those who specialise in Hypno birthing.

For those who haven't realised, Su Brampton has taken over from Debbie as the marketing officer (who's now the communications manager focusing on national publicity) and is currently working on awareness days and GP letters for us. So plenty going on behind the scenes which will be announced as each project is completed.

BOOK REVIEW



The Power of Habit
by Charles Duhigg
ISBN: 978-0434020362
★★★★

This is an interesting book and for those who do not know the brain's part in forming habits then part one is all about how habits work, how you create new habits and how to change them. As solution focused hypnotherapists, we know that it's not quite as simple as he makes it out to be, though the chapter on free will shows that having control of our circumstances increases the chance of exerting self discipline and therefore self control.

Part two of the book focuses on the habits of organisations and how we become manipulated by some, and our lives put at risk by others. Having worked in advertising and marketing I fully appreciated how companies create a need for something, and this illustrates the point beautifully.

LATEST RESEARCH

Following on from the snippet of research news in the April edition of Hypnotherapy Today on how lack of sleep effects our choice of food the next day, Scientific American Mind has suggested in their July Issue that we consume a whopping **extra 549 calories** compared to those who are not sleep deprived. Swedish neuroscientists are currently looking at whether restricted sleep alters the way the brain perceives the taste of high calorie food.

AT LAST...

American Journal of Medicine reported in May that 14 previous clinical trials of acupuncture and hypnosis helped people give up smoking. In four trials of hypnosis, smokers had a higher quit rate with the therapy compared to people who had minimal help

They suggested that smokers who want to quit should first try the standard approaches such as medications and nicotine replacement, but some people are not interested in medication, and in many other cases, the standard quit therapies do not work.

More snippets on page 34

LETTER FROM THE EDITOR

You can blame the Evian advert for the theme of this issue - "What are words worth?", I've been singing it for weeks now, but it got me thinking. Our job, is to help people change for the better through talking, thinking and listening to words. As a teenager I sat around with friends reading and talking about Tolkein and Lord of the rings is a classic tale of the underdog, going on a journey, overcoming evil and getting back home in one piece, and our own Roger Stennett, writer and therapist has provided us with more about this theme on page 4.

My own love of Dickens prompted me to read his autobiography in his centenary year and to my surprise found he was a mesmerist. We have more words, some written, some spoken in experience on the radio. So it's another bumper edition which I hope you enjoy.

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Penny Ling, Editor

HYPNOTHERAPY TODAY

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Stuff:

The Journal of the Association for Solution Focused Hypnotherapy established 2011 represents the practice of solution focused hypnotherapists as a distinct profession in its own right. Membership is open to those practitioners who have the appropriate qualifications and experience within the field.

THE HERO'S JOURNEY

Roger Stennett leads us through our story

We are all Travellers. From the moment we are conceived until the moment we die, and maybe even beyond that, we are on a Quest that is particular to us, and to no-one else. There are many common features and goals along the way that unite us, and Jung's Collective Unconscious is there as a bed-rock to it all, but essentially, even if we are on on 'a journey without maps', we're moving to a rhythm that is both intimately personal and at the same time excitingly trans-personal.

Myth is a powerful manifestation of what unites us, rather than what divides us, as a species. And bringing it all back home to the world of the mind, Archetypes have the power to reveal something far greater than the simple word of the single being.

As a Writer and Therapist I find the notions of Myth, Metaphor and Archetype part of my everyday life and work. One of the key world myths that unites the two aspects of my professional life is The Monomyth, as defined by anthropologist Joseph Campbell, and popularized through his book "The Hero With a Thousand Faces". This is a notion of a Quest popularly knows as "The Hero's Journey"

The paradigm of The Hero's Journey can be applied to the structuring of dramatic stories, as is evident in Christopher Vogler's influential book on screenwriting - "The Writers Journey". When I am teaching creative writing and screenwriting to graduate students it is a key metaphor.

But the notion of The Hero's Journey can be applied far more widely and it can make a practical contribution to my other work as a Therapist.

Before I mention the twelve 'stages' of the 'Journey' I should say something about the power of the word, and the challenge of helping individuals find and speak with their own authentic 'Voice'.

When talking of the creative act of Writing it's

probably easy to understand the desirability for an individual to find a personal vision, and for that to evolve into stories told with an individual tone and take on the world. That's why one writer is different from another.

But how do we use the notion of "Voice" as Therapists? How can we look at our clients and find a pathway of change that reveals, and then revels in the concept of speaking out with an authentic and individual tone.

I'm sure most therapists reading this will recognize the sense of disempowerment that is often at the heart of many psychological and emotional reverses and challenges. To put it simply, illness and mental upset can effectively silence us, and deprives us of the power which once fuelled our literal and emotional utterances. At best we talk in tongues that twist and turn, trying to explain meaning and at worst we are made mute, silenced by circumstance, and disempowered by the impact of hard life events colliding with the soft matter that is Mind and Heart.

Regaining our Voice. Speaking up and out. Maybe even learning to sing a different song is a goal much to be desired, and so the therapist becomes a sort of Voice Coach, always careful to help the client find the instrument to communicate with the world, but careful never to select the song.

We may sometimes seem like the Piper, but we must never call the Tune.

Sometimes it's good to remember that the Voice is always there. Often all that is needed is some supportive fellow-travelling to help the client find

what was never truly lost, but only temporarily mislaid. This is the school of thinking that sees us as facilitators rather than healers. This is the school of thinking that has us carrying the sense of 'hope' when it seems too heavy for the client to lift, handing it back when the client eventually heals themselves and is ready to assume, or reassume their place in the world.

This is the time of endings, those tactical terminations and withdrawals which must leave the client knowing, and not just hoping, that they are the Hero in their own story.

So what are we ?

Perhaps now's the time to look at the twelve stages of The Hero's Journey and try to decide just where we fit in? In this I acknowledge the world of both Joseph Campbell and the development on his core work by Christopher Vogler.

Imagine the face of a clock, with twelve numbers. Imagine a journey that starts and ends at twelve, which is both a descent into darkness and an ascent back to light.

And so it begins

1. THE ORDINARY WORLD. The Hero, uneasy, uncomfortable or unaware. Some kind of polarity in the hero's life is pulling in different directions and causing stress.

2. THE CALL TO ADVENTURE. Something shakes up the situation, either from external pressures or from something rising from deep within. So the hero must face the beginnings of change.

3. REFUSAL OF THE CALL. The hero feels the fear of the unknown and tries to turn away from the adventure.

4. MEETING WITH THE MENTOR. The hero comes across a seasoned traveller of the worlds who gives him or her training, equipment, or advice that will help on the journey.

5. CROSSING THE THRESHOLD. The hero commits to leaving the Ordinary World and entering a new region

or condition with unfamiliar rules and values.

6. TESTS, ALLIES AND ENEMIES. The hero is tested and sorts out allegiances in the Special World.

7. APPROACH. The hero and newfound allies prepare for the major challenge in the Special world.

8. THE ORDEAL. Near the middle of the story, the hero enters a central space in the Special World and confronts death or faces his or her greatest fear. Out of the moment of death comes a new life.

9. THE REWARD. The hero takes possession of the treasure won by facing death. There may be celebration, but there is also danger of losing the treasure again.

10. THE ROAD BACK. About three-fourths of the way through the story, the hero is driven to complete the adventure, leaving the Special World to be sure the treasure is brought home. Often a chase scene signals the urgency and danger of the mission.

11. THE RESURRECTION. At the climax, the hero is severely tested once more on the threshold of home. They are purified by a last sacrifice, another moment of death and rebirth. By the hero's action, the polarities that were in conflict at the beginning are finally resolved.

12. RETURN WITH THE ELIXIR. The hero returns home or continues the journey, bearing some element of the treasure that has the power to transform the world, as the hero has been transformed.



I don't think you need to be a creative writer to be able to see how it is possible to take this template, which is distilled from myths from every continent of the world, and find times in the dance and drama of the therapeutic relationship that correspond to some, or even all of the twelve stages of The Hero's Journey.

So who are we, the Therapists, in all of this ?

Perhaps the truth is that we are 'shape-shifters' in the lives of our clients. At times we can be seen as Mentors. Sometimes, in moments of transference, we might be seen as Enemies. Maybe we know where the Treasure is to be found. Perhaps we have to be 'slain' before our client feels that they walk free, back into a world forever changed.

Nothing stands still.

Nothing stays the same.

That's why it's called a Journey.

By virtue of the Journal in which this article is destined to appear, most of its readers will be coming from a therapeutic place that is Solution Focused, with all the strengths and all of the weaknesses that I feel are bound up in that therapeutic modality.

To many, the idea of interpreting the arc of change that is the therapeutic alliance between client and therapist as a primal and myth based Quest will seem unnecessary and too poetic by far.

And they're both right, and wrong, at the same time, for we live in a world of paradoxes.

We all develop our own style as therapists. You could say that we find our own 'Voice' too, and use it to best effect in the best interests of our clients. I am not, and never have been, a great fan of the 'one size fits all' school of therapy, and all of us trained at The Clifton Practice have benefitted from exposure to the knowledge of many different ways of seeing, even if at times emphasis has been placed on one modality over another. Back in the day of my initial training, CBT was 'the new black' and very much the modality of choice. In these last few years SFT seems to be the 'new kid on

the block'. Every week of the year I happily, and hopefully effectively, use both of these approaches in my consulting room, and I am ever grateful to David Newton for helping to lead me into both worlds.

But heretic/awkward bugger that I am, I am never content to leave it at that, and running the risk of being labeled a Jack of All Trades, I continue to read widely, attend a range of CPD courses and put into practice complementary approaches to the mainstream that is SFT and CBT. The only acid test I apply is 'does it help clients?'. If I believe it does, then I will unapologetically integrate it into my 'tool box', for you never know when a left-handed mythological spanner will come in handy.

One of the great values of Myth is that it brings us together and helps us see the trans-personal in all things.

One of the great virtues of finding your own Voice, whether as Client or Therapist is that it celebrates our individuality, and what makes us different.

Both states of being seem essential to me, and although the two statements might appear a paradox, since one pulls us all together, while the other atomizes us into our individual essences, there is a strength in holding two seemingly contradictory thoughts in one mind at the same time.

Hero or not, it's all part of my Journey, and I hope some of the above will prompt you to explore yours, using whatever tools are right for you, on a Quest to find your very own 'Elixir' to bring back and to share with your clients, and to transform the wider world ■

BE BRAVE AND FIND YOUR OWN WORDS

The transition from scripts to improvisation by Nicola Griffiths

In the early days of my hypnotherapy career I would avidly read scripts to my clients, adjusting them to incorporate the client's language of course. Over a period of time that changed though and now I use scripts sparingly. When the client gets on the couch these days, I tend to put my papers down, close my eyes and consider what the client has told me in order to relay it back within metaphor.

I can vividly recall the first time I put the scripts down. It was when I worked with my co-partner in crime Shirley Billson. We have always done reciprocal sessions, but in a brave moment we decided we'd do the session without scripts. Scary stuff when it's a peer who knows what you should be doing rather than a client who's simply happy to relax! That was a few years ago now and I think we both agree that neither of us have looked back from that moment.

These days I'll occasionally peep at my notes to remind myself what the client said, or check the client hasn't fallen off the couch, though I'd have probably heard the thud as they hit the ground so I'm usually feeling quite safe with that one! The client will frequently give me an idea whilst we've been talking that translates into a cracking metaphor. For instance, this week a chap happened

to mention spinning plates. Well, who could resist that one? So before he knew it he was on that couch and watching spinning plates below him, as he'd risen above them, leaving the plate-spinning to the people below whilst focusing on just a few really really valuable plates to spin himself; he had a problem with delegation.

Another client walked in mentioning she'd just seen a beautiful double rainbow on her drive to the clinic. On the couch she found herself walking into the end of a rainbow feeling the energy of that colour as she stood within the rainbow (and no, I didn't mention any pots of gold).

And, the reason for this little ditty? Well, confidence comes through practice. If you don't ever put the piece of paper with the written word down, you won't know what you can achieve. A lifetime ago, when on my HPD course, I never believed I'd be able to make up metaphors as I went along. Now I tend to live in a magical world of metaphor. So it's good to put the papers down, close your eyes (optional) and start considering a little story. You can always have the scripts to hand should you hit a brick wall!

What's that saying, ah yes: "IF you always do what you've always done, then you will always get what you've always got". So be brave! ■

Roger regularly teaches script writing in Universities all over the UK. To find more about his courses go to: <http://web.mac.com/roger.stennett>

WHAT THE DICKENS!

Penny Ling stumbled upon his links with hypnotherapy whilst researching her own family history

This year – 2012 – we see the bicentenary of Charles Dickens’ birth. Coming from humble beginnings, he’s still heralded as one of the best authors this country has ever produced.

The reason many others and I recognise his genius, was his ability to capture the zeitgeist. He wrote about ordinary people; people that his readers recognised around them. My grandfather handed

down my own
love of the
author,

but what really captures my appreciation is that he lived, worked and recorded the streets where my own ancestors lived and worked. I often wonder if the cherry pips he spat out at passers by from the window of the blacking factory where he worked as a 12 year old, ever hit my great, great, great grandmother!

What many people don’t realise though is that Dickens practised mesmerism. We can consider this a very early form of hypnotherapy, as he – like those who broke with the “out there” cosmic ideas of Mesmer – was fascinated by the science of the mind but not all the “fluffy” context of animal magnetism. He was originally taught trance inducing methods by John Elliotson, a leading professor of medicine at London’s University College.

Elliotson was very much the sort of person Dickens was often drawn to; confident, theatrical and highly ambitious. Dickens’ use of mesmerism wasn’t limited to family and friends. Indeed his wife Catherine was far from happy for Charles to practise on women, as he had a habit of becoming obsessed with them, to the detriment of their marriage.

His best known “client” was Madame Augusta De La Rue, who suffered with tics, headaches, insomnia and occasional convulsions – very similar to the clients who later turned up in Vienna to see Freud. Dickens began treatment by placing Augusta in a trance and questioning her. Some trances brought back images of her brother and others included a shady figure who she was very afraid of. One psychotic experience in a church in Rome haunted her for quite some time. As Dickens worked with Augusta, he developed deep anxiety himself and Catherine probably made it considerably worse, as she was fully aware of his infatuation, and Dickens was deeply paranoid about bad reputation – after all he was the epitome of a Victorian Family Man!

Gradually Augusta started to make a recovery; was this the trance work, or the amount of attention Dickens was paying to her? One thing is known, when she was in trance he made up tales of battling the demons together, thus encouraging her to turn it into a story – a dramatic narrative. And isn’t that

what we do by using the resources of our clients - to weave a story they recognise which can help them attain a more positive future? I wouldn’t be at all surprised that his writings changed a lot of people, as shown by his work, *Oliver Twist*. This highlighted the plight of abandoned children, who littered London’s streets and subsequently legislation was set up to help them.

Dickens’ characters are full of insights and sudden flashes of realisation that suddenly put the characters on a new path, just as we might find our clients suddenly make a snap decision to do something positive and more fulfilling. In a Christmas Carol, Dickens is allowing Scrooge to see his future if nothing changes, or if he changes, what the consequences will be – Powerful solution focused ideas here, imagining the perfect future. Scrooge changed his ways and everything changed for the better.

We can use such well known stories as metaphors within our clinic setting, as the characters are so familiar to us. Whenever someone lists reading as one of their hobbies, I always find out what they read as this can help build rapport and be useful in our choices of metaphor. How many metaphors are based upon religious/spiritual stories where wise men are sought? – why not use metaphors that the client can relate to better. If they are not into Buddhist monks, they may prefer characters from books, films or TV.

Dickens was unhappy at times in his own life, but created the changes he wanted; he took chances to ensure he wouldn’t end up in debtors prison like his father. He was a modern man, perhaps frustrated by the restraints of Victorian morals. If divorce had existed, I’m sure he would have taken it. If he was around now I daresay he’d be writing for film and TV, acting, being an A list celebrity and perhaps be a stage hypnotist! ■

PROCRASTINATION!

Nicola Griffiths finally gets round to it

A year last April, a colleague kindly gave me a book for my birthday. It’s fair to say that over a year later I have got some valuable information out of this book, for instance, did you know the word procrastination first appeared in the English dictionary in the 16th Century?

Yes we’ve been procrastinating for that long, in fact probably longer given it would have been around way before then in order to have made it into the dictionary in the first place.

Sometimes, when I have a client in front of me that’s obviously procrastinating, I’ll bring out this word and say “Well, that 7-year old subconscious does like procrastinating. After all, what 7-year old wants to do the equivalent of the washing up when there’s something which is much more fun or easier to do?”

Occasionally the client will look a bit crest fallen, so that’s when I tell them we’re only human and I’ll relay the story of my friend giving me this book which is really interesting. However, when there’s so much else to do I’m still only half way through the said book even though I can glean such wonderful little snippets out of it to use with my clients. A true example of procrastination in my book!

I find it extraordinarily interesting that the subconscious mind can put off doing something, which once done will make it feel better. So I frequently say to the client, “consider how you’ll feel once you’ve done what you’ve been putting off doing” as it encourages the subconscious to do it.

So guess what I’m off to do now? I’m off to read the end of that book, which goes by the name of “The Procrastination Equation” funnily enough! ■



Back in 2009 the BBC broadcast a series of programmes on the subject of mind control, brain washing and hypnosis. For the Hypnosis part of the series Chris Ledgard met up with David Newton at The Clifton Practice - what follows is the original dialogue transcribed by solution focused hypnotherapist Michael Hughes.

Hypnosis, mind-control, brainwashing, using words to control our minds is the subject of this week's programme. Our concept of hypnosis has come a long way in nearly 200 years, from the mysterious person who's magical powers put you into a deep sleep, to the cheerful consulting rooms of today's hypnotherapists. But the central question remains, "How do words control our minds?"

CHRIS: David Newton is an experienced hypnotherapist and a fellow of the Association for Professional Hypnosis and Psychotherapy I went to see him at The Clifton Practice for Natural Health in Bristol. In his small comfortable consulting room, there were pictures on the walls of people playing cricket, green fields and seaside views. For David, these can be useful...

DAVID: We need to interact with the person, right from when we meet them in the waiting room. So if there are daffodils on the counter in reception, we can say something like it's nice to see spring arriving, talking about something nice, it might be topical of course and it might be to do with the weather.

CHRIS: So you are very conscious of the language that you use, right from the first moment that you see somebody.

DAVID: Yes. It will be problem-free language. Problem free is saying something nice. Do you know I come from the BBC. Do you know I've always had a great fondness for the BBC. There we are. And I have of course.

CHRIS: Well, do you have to be careful with sincerity as an issue with your language because you



are often saying things to people but they have to believe that you mean them don't they?

DAVID: Yeah, yeah, indeed, indeed, sometimes it can be playful of course. And people who are poorly, people who suffer from depression and anxiety, if you say something with a smile on your face, they are going to be pleased, they are going to be pleased about that. But they might mention the pictures, then I can tell them story about my wife painting them to see whether she could paint and they might say and that's wonderful, where's that? And I would say and that's a part of Wales, and now we are talking inconsequentially but in the left pre-frontal cortex.

CHRIS: And you've got the language going on there.

DAVID: That's Right!...In modern therapy, we know that if we put them into the left pre-frontal cortex by talking in a nice, positive way then they are going to bring the very best out of themselves anyway.

CHRIS: So this phrase, the left pre-frontal cortex is going to crop up again and again in our conversation?

DAVID: Yes.

CHRIS: Well why is it so important to you? What does it mean, first of all?

DAVID: Well, there's a gentleman called Jonathan Cohen, a neuroscientist, who researched this area, who showed that when we are talking inconsequentially or talking in a positive way that we will be operating and be in our left pre-frontal cortex. The left pre-frontal cortex is part of the intellectual

brain and is the conscious part of the intellectual brain but it will be attached to that enormous intellectual area within the main cortex of the brain. And, when we're in that area, we will come up with a proper assessment of any given situation. So, it will tell you all the good things, the intellectual brain will tell you all the good things, about whatever we are involved in, it won't sweep things under the carpet, er, but it will come up with a proper assessment. If we move into the right pre-frontal cortex, then we will be attached to the primitive parts of the brain, which is headed up by the amygdala, and that part of the brain is invariably negative and it's got to be negative as it's there for our self-preservation.

CHRIS: So although the language you are using, you call inconsequential language, its effect of where it puts your client is absolutely crucial, so if you say to me something about the daffodils on the table and I end up in the left pre-frontal cortex, that's good. If you say to me "What's your deadline for this programme?" Then I might go straight into the other bit.

DAVID: Yes.

CHRIS: And be in the place where you don't really want me at all.

DAVID: Yes, Absolutely. If I said to you, "What could go wrong?"

CHRIS: Yes.

David: Then you are going to have to go into this part, into the primitive parts to come up with the negative things that could accrue. And in our consulting room, we don't want that to happen we

want to bring out the very best of the person, so they can come up with positive solutions.

CHRIS: And language is your tool, for that.

DAVID: And language is the tool for that.

CHRIS: And when would you resort to tools like metaphor or other tools like that?

DAVID: I would use several metaphors in ease session and I might use a metaphor when I meet the person in the waiting room. I might say that somebody

who suffers from severe OCD, that erm: "Did you read about Ellen Macarthur? And it just shows that if we can focus our obsessional nature in things that are important, we get the very best out of ourselves.

CHRIS: Can I say that I am a slight sceptic about the whole process of what I think of as hypnotism but the way you describe it makes it sound quite attractive.

DAVID: (David laughs)

CHRIS: Can we imagine for example that I have come to you and I have said that I have a slight problem sleeping, which I do, which is true.

DAVID: Right. Yes.

CHRIS: Huge problem, I do have a problem sleeping and I worry about it and can you help?

DAVID: OK. Now something like 80% of the people who come to a clinic like ours - and we have 5 full-time Hypnotherapists here - will present with some form of symptom which is associated with depression, that doesn't mean that we are clinically depressed but it is part of the symptomology. So within the symptomology of depression will be insomnia or hyposomnia, or a combination of both.

CHRIS: OK, so say that we have met and you have used inconsequential language with me and you've got me to the right place in my brain.

DAVID: Yes.

CHRIS: And we have had a discussion about things that make me feel happy so I'm operating in that top bit that's the intellectual bit rather than the gloomy frightened bit. Then what do you do with language?
continued over...

DAVID: So, we have explained to you that there is more anxiety in your life, more negativity than is good for you. And I might illicit from you; there we are...You wake up tomorrow morning, and you're less anxious and if you were less anxious, what would you be less anxious about?

And then you would go into a picture formation and you would tell me that you wouldn't be so worried about this, that and the other. And we have a picture now of you being able to cope with that particular situation in a better way. So when I put you on the couch I might say things to you err that whenever you allow your conscious mind to focus on problems, then you drag those problems into the future with you. So, from this landmark moment in your life, focus your thought energy on how you want things to be, let your mind know what you want, because etc. And you can see that I'm saying this with a certain amount of emotion.

CHRIS: Yes

DAVID: Because you know, you even felt that then.

CHRIS: Yes.

DAVID: That I am committed to helping you.

CHRIS: So you're tone of voice is very important.

DAVID: Very important. I've got to be committed and sincere.

CHRIS: So in a way it's the opposite of this cartoon vision we have of the hypnoterapist, hypnotist which is this slightly dreamy way of speaking, you are saying that you speak in a very positive way so that people think that you are absolutely engaged and that you are getting your hands dirty in their brain.

DAVID: Yes

CHRIS: Yes

DAVID: And both of us now know what the brain is doing and we know it's now working harder and its coming up with better solutions in that particular area to get the best out of it and prevent anxiety



creeping in.

CHRIS: So, OK, Crunch time, can I get on the couch then please.

DAVID: Absolutely. Hang On. Come on, let's have you on there. Lie back. Now this is the time that I would be talking to Chris in inconsequential Language and you might come up with anecdotes about that?

CHRIS: Why did you put a blanket on me just out of interest?

DAVID: You feel safer. And also, people who come into our consulting rooms have to follow a discipline. So they do what we suggest that they do, certainly to begin with. Now, while I am switching out the light I will keep up with the conversation.

How long we're you in Cornwall?

CHRIS: I lived in Cornwall for 3 years but I'm from Bristol so not Cornish.

DAVID: You might like to close your eyes Chris and I say that for obvious reasons as it's easier to relax, it's easier to visualise things with our eyes closed, but like anything and everything we do here it's certainly not obligatory. If you ever want to open your eyes, not many people do I might say but if you do that's absolutely fine by me and anything else that helps you to be just as comfortable, as you'd decide you'd like to be.

(David reads sections from 'The Village')

DAVID: And when you leave here today, you'll find it easier and easier to feel good about all the things in your life that you ought to feel good about. You'll find it easier and easier to feel good about all the things that you do. So when you are ready and you are in control, you can once more, open your eyes.

CHRIS: Phew, given that it was being recorded, which I suppose, given that wasn't the most ideal situation, that was must more relaxing than I thought it was going to be. And it was a very powerful performance if performance is what you would call it.

DAVID: You were aware that I meant it?

CHRIS: Yes.

Hypnosis has worked its way into mainstream medicine, some dentists and GPs offer it as complementary therapy, and NICE, The National Institute for Health and Clinical Excellence approved it for the treatment of irritable bowel disease ■

COPYWRITING – HOW TO GENERATE COPY THAT PEOPLE WANT TO READ

Debbie Pearce writing from experience

Whatever you're writing, be it an article, press release, web page or business case, there are a number of factors that are common to everything you produce:

- ◆ Content
- ◆ Structure
- ◆ Style
- ◆ Purpose

And possibly the most challenging of these is content.

Having a scientific background, creative writing didn't come naturally to me. Having Mr Spock as a role model as a teenager might have had something to do with it, and then becoming a computer programmer only served to reinforce my logical if-then-else style of writing.

All that changed when I found myself coordinating the Swindon Branch of Cats Protection (long story) and I had to start writing compelling copy to raise the funds needed to rescue local cats. Up until that point all of my written output resembled a lab report or mathematical derivation from first principles. Somehow "Rescued cats need veterinary treatment, hence it can be shown that we need your donations", didn't cut the mustard.

In the early days a small handful of us did a bit of everything and I found myself writing the branch newsletter. Knowing that I would struggle to write something from scratch I developed a technique that meant that the 32 page newsletter practically wrote itself. I took notes of everything. If someone related a dramatic tale of a volunteer being questioned by the police for breaking into a boarded up building to rescue a trapped kitten (yes that did happen) or another volunteer being escorted out of a shopping precinct by security guards having been found rummaging in the traders' skips for bric-a-brac to sell (yup, that happened too), I made notes.

I still make notes, and even in meetings I make notes of the "inconsequential language"; it really helps to provide a context to what's being said, flesh on the bones, as it were. These real-life asides act as powerful metaphors to help reinforce a message. This was really rammed home to me when I attended Dr Naeem Iqbal's stunning course on Neuroscience at Clifton Practice in April.

I knew a bit about the structure of the nervous system from 'O' level days and the Anatomy and Physiology module of my ITEC massage qualification. I had even taught the

subject to ITEC students. But my learning was from books or teachers who had learned from books – what an amazing difference to hear the subject from someone who not only knew the subject inside out but could also convey it in layman's terms.

And that brings me to the inconsequential language about the cerebellum. How many times have I read about it, and even retained the information long enough to reproduce it in an exam or lecture? But when Naeem quipped "For a long time nobody knew what this part of the brain does. It's responsible for fine motor movements, balance and muscle tone. It provides the fine tuning for our movements, so its purpose wasn't obvious", we all laughed and the fact has stuck.

By making it real and putting a dry fact into context, Naeem brought the subject alive.

So, what are my tips for writing compelling copy?

- ◆ Gather source material by taking notes:
 - When someone asks you to write a piece about a subject, ask for clarification and take notes of their answers (this also provides a starting point for the structure).
 - Any time you come across an interesting snippet about the subject, be it on the radio, TV or in conversation, take notes.
 - If you spot something relevant in a magazine or newspaper, cut out the relevant text and keep it with your notes.
 - Save relevant content from Google searches and add to your notes.
- ◆ Provide a real-life context, adjacent metaphors if you will, to bring the subject alive.
- ◆ If you have the choice, write in a style that's natural for you .

I will be running a copy-writing workshop prior to the AfSFH party on 30th September, so if you'd like to learn more, be sure to book your place. I look forward to seeing you! ■





RADIO BROADCAST EXPERIENCES WITH KERRI FORMOSO

If you've ever wondered how clients feel right before they have a panic attack - appear on a live radio broadcast, it will give you great insight!...Of course, if you've ever also wondered about the pure joy and exhilaration a client feels having successfully achieved a performance or public speech.... a live radio broadcast would also be the way to go!

I've appeared on live radio twice so far, both of them very different.

My first appearance resulted from emailing a local radio DJ and offering a free relaxation session - one of our biggest assets is that we can offer a free sample of our product. The offer was made with no expectation, but a little bit of hope that it may result in some publicity, either public or through word of mouth. I had the added bonus too that having listened to this DJ for many years, I was reasonably confident the offer would be accepted and it was. Following the session I was offered a short slot talking on the show - a great result!

I was given very little information on the content, being told only that they would call me and ask advice about one of the DJ's developing some obsessive behaviours; I already knew it would be quite light-hearted from my years of listening to the show. I was also told what time to expect the call and that was about all the information I was given!

As I waited for the call on the agreed morning, listening along to the show I became aware of my increased heart rate. "I know what this is" my 'hypnotherapist' brain told me; then the tummy started churning, "yes, I know about this too" I thought to myself; then the shakes started and my head started rushing "oh great" I thought "here's the adrenalin flooding my brain". All of a sudden my polar bear arrived in the form of the telephone ringing!

Telephone interviews are difficult! Especially when there are three interviewers and the first question is nothing like you'd expected! There was none of the calm talking I'd prepared for, just a rush of questions coming from different angles and the echoey effect of being on speakerphone. Almost before one question was answered another was fired at me until somehow the subject had progressed from subconscious thought patterns to religion! - how had that happened? - "danger, danger" my mind was screaming, after all everyone knows never to discuss politics or religion in public, never mind on a live radio broadcast!

Here I must thank my subconscious enormously for getting me through! On listening back to the show I became aware I'd done all right with my answers. There are very few DJ's I should imagine whose knowledge comes anywhere near ours when we're talking about matters to do with "How the Mind Works". We talk about this stuff every single

day, several times a day and WE KNOW OUR STUFF! Recognising this allows us the ability to trust in our mind pulling out the right answers to questions when they're asked. Its worth reminding ourselves constantly of this fact - that way we don't need to have a near panic attack at the thought of being asked questions on live radio! And what a thrill it was to hear sound bites of my slot throughout the remainder of the day as the radio station advertised what had happened on that morning's show!

The second experience was much easier. A colleague had been called by a BBC Radio Bristol researcher and asked to appear live on a lunchtime show. Unfortunately he wasn't available when they wanted him - for live shows we are dictated to by the radio station on times and they often don't give much notice so we may not be able to take advantage of an offer even if it's made. Thankfully my colleague knew of my previous experience and gave them my name. I was available at the required time and was invited to the studios this time.

The interview was to be half an hour long, rather than the five minute slot on the previous show - a longer slot is actually easier and also calmer than a short slot. It was to be a one-to-one interview and again, I was given no information beforehand - but that was ok because I now trusted that I had all the knowledge I needed to answer general or specific questions asked by someone who is, in this respect, a member of the general public. Of course, the adrenalin did still make its appearance but I'd learned a trick many anxiety clients before me have learned - don't just identify its presence - do something about it!

This experience was extremely pleasant. The DJ and I sat chatting for half an hour about all the things I love talking about - hypnotherapy and

how the mind works. It was like having coffee with a friend who wants to know more about what you do. The microphones and audience were forgotten completely, it was just the two of us having a chat. There were questions that tested my knowledge and ones where I had to be a little bit more careful about how I answered them, but essentially no more careful than when a client asks a difficult question. And then all too soon it was over, I was thanked for my time and made my exit during a song track.

I'm a bit of a 'show off', so I revelled in my moments in the spotlight on both occasions - the 'high' that followed these broadcasts was fantastic and I'd jump at the chance of doing it again. It's nice to be able to advertise that you've been on the radio; it all adds to the public perception of working with an 'expert' and that always helps in sessions. On neither occasion was I aware of the appearance leading directly to new enquiries. However, my overall profile was raised as was the subject of solution focused hypnotherapy, so who knows how much of an impact it had on a subconscious level with the audience....

Oh, and if you've ever wondered why a client might take drugs after a 'performance' - try going home and getting on with the washing up after you've done a live radio broadcast - it sucks! ■



LISTEN VERY CAREFULLY

with Phil Hammonds special guest - Sarah Mortimer

Back in October, BBC Radio Bristol invited me into their studios to appear as a guest speaker on their Saturday Surgery program hosted by Dr Phil Hammond. The Saturday morning show discusses topical medical issues and I was asked to talk about Seasonal Affective Disorder (SAD) and how it can be helped with hypnotherapy, what with the clocks going back that weekend.

It was a great opportunity for me to promote solution focused hypnotherapy and my practice in general; it would have been silly to have said no! If I had been asked to go on the Radio three years ago, I would have said no, but since training in hypnotherapy, and having learnt about the power of positive thought, I am more confident in my abilities and this is what allowed me to say yes and do it!

I wasn't given a huge amount of time to prepare for it; they only contacted me the day before the show, however this was probably for the best as it meant that I didn't have weeks to wind myself up about it (or change my mind).

With the short preparation time I had, I went away and "did my research" on the presenter who would be interviewing me and also I listened to the previous weeks broadcast to get a feel for what it was like and their approach. I'm so pleased I did as they talked about positive thought and auto-suggestion in the previous show which made me realise that the person interviewing me was open to hypnotherapy and he wasn't going to trip me up. This was a huge relief! My next step in preparing was to research the subject I would be talking about. I made use of the NHS online portal for facts and figures about Seasonal Affective Disorder. I then thought about what I wanted to say about hypnotherapy in general and how it was helpful in treating SAD. I then made a crib sheet with what I wanted to say on it – not

a complete script, just bullet points as reminders. I would recommend that you don't have pages of things to read out; the chances are you won't get through it all and end up missing the key points, plus you want to sound natural and not like you're reading a script word for word! I would recommend that you write down 3 to 5 key points that you definitely want to say while you're on air. The presenter may not ask you the right questions enabling you to give those answers but make sure you get them in there somewhere!

I knew I would be nervous a little bit about going on the radio as it was a new experience for me but I wanted to make sure that I didn't get anxious, panic about it and then make an idiot of myself live on air! So I decided to practice what I preach! The night before I had a nice hot relaxing bath and afterwards I lay down, closed my eyes and visualised how I wanted the radio show to go, what I wanted to say, how I would feel, what I would do afterwards etc. I also made use of the swish technique. Not only was I physically prepared, but I was now mentally prepared too and raring to go!

I arrived at the studio 30 minutes early as I wasn't sure where I had to go. The staff there were very friendly and offered me water and a magazine to read while I waited to go on. I got to hear the guest speakers prior to my slot which was great. It put me at ease hearing other people speak on the radio who also had never done it before. I got to speak to the presenter before going on and he was really encouraging and reassuring and briefed me quickly on what he was going to cover. It was just like having a chat with another person about hypnotherapy really, which is something we all do all the time with our clients and colleagues. I forgot about all the thousands of people who might be listening which allowed me to concentrate on the job at hand. My segment was 30 minutes in total, but I only spoke for about 10 minutes as it was inter-laced with



songs and traffic reports. During these breaks, the presenter and I would chat about what we'd talk about next so I was a step ahead all the time although he did throw a few extra things in the mix and I had to think on my feet. I was also able to tell him some information too so he was then able to include it, for example, I told him about the Royal Society advocating the wider use of hypnotherapy within the NHS (this is something I became aware of by reading one of the AfSFH Press Releases!)

I felt that the show went really well and I was very proud of myself for doing it. A really positive experience! They gave me good feedback and even asked me to go back again, although I haven't taken them up on the offer as yet. I will though! As a result of appearing on the show, I had one lady ring me up to book an initial consultation. I have also had one more client come for sessions after she read a blog post I wrote about my radio appearance. Unfortunately, they don't give out copies of the show but I was able to download the audio file from

the internet which I made into a YouTube video so that I could put it on my website for prospective clients to listen to.

So my advice for those who haven't been on the radio before:

1. Be prepared! Do your research on the show and presenter if you can. Research the subject you will be talking about and decide on 3-5 things you definitely want to say.
2. Practice! Go over in your head and/or out loud what you want to say.
3. Use your skills! Focus on how you want the show to go and not worry about all the things that could go wrong! Listen to the CD you give your clients.
4. Smile! Keep a grin on your face while you're talking, you'll feel much happier and comfortable with the situation and the listeners will "hear" your smile!
5. Keep still! Don't fiddle with your papers or swing on the chair as the microphones are sensitive. Remember your posture too – sitting up straight helps project your voice and makes you feel more relaxed and confident.
6. Enjoy it! You might not get another chance to go on the radio again. It is actually quite fun!

RADIO DAZE!

Being asked to appear as an expert on radio can be the luck of the draw - I was asked to speak about motivation on Radio Somerset. I asked the researcher where he found my details and he said he searched the word "motivation" on Google. My website had the most information on it, so he felt I'd be able to answer the broadcaster's questions. At other times I've used low budget community radio such as Bristol Community FM - [http://](http://bcfm.org.uk/)

bcfm.org.uk/ to publicise an event happening at the Harbourside Clinic on Open Doors day. If you're planning an event this is a really great way to publicise it, without sounding like you're trying to sell them a service. It gives the public the opportunity to listen to your voice as well. If you sound happy, calm and professional (not erming and ahring!) you'll attract a more positive response.

In any event the answer is to prepare, prepare and prepare a bit more. - Penny Ling

THE BOY WHO WOULDN'T SPEAK

Penny Ling gets creative

As a therapist we are sometimes presented with very difficult cases. Not because the client presents a difficult problem, but communication is difficult. One such case is that of Craig, 12, who was brought to me by his mother, because he wet the bed frequently.

That's when I thought up the card game – using words which reflected both positive and negative traits.

At the first session, I asked Craig the miracle question and asked him to go through all the cards and to choose those which he thought summed up how he might feel if the miracle happened. He duly pulled out cards, which read 'happy', 'confident', 'strong', 'positive'. As we went through the "what else" he would sift through and pull out more words, all connected to feelings of self worth and empowerment. The more we worked the more we managed to ascertain that the problem may be linked to fitting in at school – something which his mother was totally unaware of (I must say at this point his mother accompanied him all the way through the sessions at his insistence).

What was interesting was at 12 he had strong opinions as to his self identity. He thought he didn't fit in at school because they all liked football and pop music, he liked computer games, role playing card games and classic rock. His mother was equally frustrated about his lack of talking and when asked why he didn't say an awful lot, he just replied he didn't want to. He thought people who talked a lot were idiots!

It was an interesting exercise in learning to communicate in a different way, but sometimes there's nothing we can do in the clinic room. A lady was brought to see me by her husband, but she was so deaf she couldn't hear a word spoken. Not wanting her to go away too disheartened, I gave her copies of instructions for self hypnosis and mindful meditation to read and take away with her.

It was then I used the Miracle Question on myself – what needs to happen for Craig to communicate, in a way he's comfortable with?

At the initial consultation his mother told me about Craig's problem. When I asked him directly, he just sat and stared at me. His mother had to ask him the question and then play 20 questions as to what the answer might be. It was clear that communication was going to be slow.

As well as the facts about his bedwetting, which was likely due to high anxiety, I also found he spent a great deal of time playing games; role play games which came in the form of cards. I casually asked him about the games and again his mother had to interject with the explanation. I knew if I was going to get anywhere, I was going to have to let Craig answer for himself, otherwise an hour session might take all day.

HAPPY

SAD

CALM

STRONG

CONFIDENT

WRITING YOUR OWN SCRIPTS

Get into the habit of creating your own style and voice by Penny Ling

When a newly certified hypnotherapist starts on their journey, one of the first things they start to do is search the internet for free scripts. We've all done it and all of us end up going back to the basic ones. Why?

Well the more practised you become in the SF part of the session, the more you start using the client's voice within the hypnosis part. Using language by listening carefully is a skill one tends to build with time if you've never had to do it for a living before. Using metaphors especially in the clinic room not just on the couch has been my biggest success. When clients look up and say "You explain it so simply", is a moment in that person's life where there was once mayhem and confusion and now there's a realisation of what needs to be done.

To find these metaphors we use information within the person's life to help us work out ways of trying to explain what they need to do. An example where this worked wonderfully was with a recent client with severe depression. Rosy, let's call her, was in her 60s and had been hospitalised for depression, she was on medication and was having CBT, but she was still suicidal. Rosy was terrified of carrying out her threats. Despite explaining what was happening in her brain at every session, things moved slowly. One of the things that helped her move up the happiness scale was to do the garden. She had loved her garden but had totally lost interest. In a bid to get her to realise what she was doing to herself, I found a metaphor on the internet "A chance to reflect" which had the bare bones of what I was looking for, I just needed to make it Rosy's.

Rosy had a habit of lying in bed allowing the negative thoughts engulf her, the darkest hour for her was before dawn. In the metaphor I talk about pests destroying the plants, no true gardener would put in hours of work without protection. I also talked

about tools, we talked about the tools she was given in CBT, the mindfulness classes she attended, the power of the miracle question and thinking positive. In the garden we talk about having the right tools for the job – you wouldn't dig a garden with a teaspoon. It's reminding the client they have been given the skills to get better and now it's down to use them.

I also used parts of another script about "weeding out weeds and not nurturing them", she realised through this script that the dark thoughts were the weeds.

We can build metaphors with anything the client gives us – They have children? How do they get their children to eat their veg? You can take what they are telling their children and reflect it back to them – especially emphasise the limbic system is a 7 year old. Do they drive a car? We can use metaphors for how the engine works when everything is working in alignment, and how inefficient it is and likely it is to develop a fault if we fill it with the wrong fuels and if we don't maintain it. We can compare ourselves to a mechanic popping the bonnet and tinkering inside.

Below are some examples, if you've created your own metaphors then why not share them by sending them to the journal.

Out of all the metaphor scripts I've used over time these are my favourite top 10.

- 1) The Village – finding resources within us. (Generally available through CP)
- 2) The Watermelon – very useful for phobias. (Generally available through CP)
- 3) Trees – be more flexible in your thinking. (Generally available through CP)
- 4) Dilution of thoughts – speaks for itself (Michael Hughes)
- 5) Carrots, eggs and coffee beans – always amuses me when someone comes out of trance shouting they're a carrot! And yes that has happened. (in general usage)
- 6) Making changes – helping them to realise that their belief systems change over time – do you still believe in Santa? (Adapted by myself from a generally available script)
- 7) Mayonnaise jar – don't sweat the small stuff. (Generally available)
- 8) Pigeons – useful for habits/phobias and weight loss. (Generally available)
- 9) Tiny Frogs – don't listen to other people telling you the things you don't need. (Nick Owen)
- 10) Sparrows – for those who's children have flown the nest or those just left school. (My own)

The Garden – adapted from “A Chance to Reflect”

No matter what we believe in, we all have our own unique “minds” our sense of self, the divine, of beauty, joy and living life to the full.

Think of your mind as a garden and ask...what makes a garden?

You can't buy them – garden centres don't sell them ready-made! You have to grow them.. Everything that grows, whether a huge tree or a fragile flower, starts off as a tiny seed hidden from view.

What seeds have already come to life in you?... (pause)

What seeds remain hidden in you, waiting for the right time?... (pause)

Are the conditions now right for some more seeds to start growing?... (pause)

Gardens need water and sunshine, in the same way minds need nurturing with good nutrients and positive thoughts. These are gifts...you cannot buy or demand them...but you can recognise them, and more importantly recognise the things which stop your garden from flourishing. Caterpillars eating your cabbages, or whitefly destroying your tomatoes. You wouldn't waste your crop of vegetables would you?

Surely if you grow vegetables to nourish you, then what would you do to protect them? Some will spray with insecticide – not very environmentally friendly – some will spray with organic matter, or keep a close vigilance and as soon as a pest lands, swoop to destroy or remove it. The same goes for thoughts. In the way bad thoughts are the pests, being vigilant and using the right tools you can pounce and remove them.

And what provides the water and sunshine for your mind?

the love of a friend?
time in a special place?

Finding the beauty and wonder in nature, even when it's at it's most wild and inhospitable – all of nature has it's beauty, the dark clouds forming wonderful shapes and forms, may appear bad but the rain brings life to all.

Gardens need pollination by insects, birds and the wind if they are to grow... So, with our minds, there must be movement...exchange... How does this happen for you?

By listening to friends and family?

By taking part in a group?

Gardens provide food and shelter to other animals, growing sunflowers and teasels provide food for the birds, stinging nettles provide shelter and food for the most beautiful of butterflies.

Think of the life you nurture in being there for your family and friends.

Gardening involves preventing infection and attack to protect what is growing. This can be hard work and it doesn't always go according to plan.

What might damage the growth in you?

What needs protecting and who can help you?

Gardens need both cultivation and wildness.

A garden which is too wild may not be too hospitable or practical. One which is too cultivated loses its connection with the rawness of nature.

What is the balance for you?

How might you change it for the better?

Gardening involves cutting back and taking out. Sometimes the action seems drastic and we wonder if we've gone too far.

What needs pruning or shaping in you?... (pause)

Or are there things you need to cut out?... (pause)

All gardeners need tools, you can't be expected to nurture a garden with a teaspoon. To turn the soil you need a fork, to keep the weeds down you need a hoe. To keep the lawn healthy you need to aerate it and rake it.

To cut back the dead wood you need secateurs. To water you need a hose and watering can, to pot you need a trowel, to hold up plants you need canes.

So what tools can you use?... (pause)

By changing one small thing – what would you change?... (pause)

Gardens take time to grow, if you cram all the plants in one area and they all grow together, some are going to take over and others will die out. You need to plan by size, by space, by what you want to see – colour all year round? A gardener who only plants flowers that bloom in July will have a garden that's pretty boring the rest of the year – so you plan, you see what each plant needs to grow. When you plant a seed, it can take weeks to germinate, as changing one's mind about things can take weeks, but if you neglect the seed, or feed it the wrong food, the seed will not germinate and start to flourish. When the seed first pushes through, it looks nothing like the final plant, it's small, weak, needs love and attention. Then as it gets bigger, you can pot it on, then after a few months plant it out. Then it may take anything up to a year for the plant to bloom, but isn't the wait worth it?

Putting a Toe in the Water by Kathryn Fletcher

A metaphor for change, even when it seems more comfortable to remain the same

Maybe you can remember summers from years ago, long summer days when the sun seemed to shine all day long, warming the air from morning until night.

...and sometimes there were carefree times, spent on a beach, and maybe there were pebbles, shifting under your feet, or moving with gentle motion of the sea, the water intensifying the colours and patterns, rounded shapes and vibrant colours, and shells too, delicately formed but somehow remaining preserved against the rough and tumble of the ocean. Or perhaps there was sand, golden in the sunlight, soft and warm between your toes, or darker and damp at the edge of the sea, better for making sandcastles and moats that would later be reclaimed by the tide.

I can remember a day when I was small and we were on holiday. Everyone was talking about going to the beach, and they looked happy and excited and so I was too, although not really understanding. When we arrived everything seemed vast. I'd never seen the sea before. The sky and the sea seemed to stretch out forever, and my eyes were wide with excitement.

There were children playing on the sand, running and laughing, and people paddling and splashing in the sea. Further out, others swam and threw balls to each other, and they all seemed to be having fun.

I wanted to join them and ran to the sea, and put a toe into the water...and it was cold, icy cold, and I ran back onto the sand, unsure of what to do. The others encouraged me, but I didn't like the cold water and it was several minutes before I felt brave enough to try again.

When I did, it was still cold but it somehow didn't seem quite as bad as before, and this time I put both feet in before retreating back to the warmth of the sand. It took a long time, and many false starts before I managed to get as far as others. Then the cold was almost instantly forgotten as I splashed and played games with them for the rest of the afternoon.

Of course there were other children who just ran straight in screaming with delight at the shock of the chilly water, but we all have different ways of doing things.

As we made our way back to the beach, the water began to feel warmer and warmer,

and I remember wondering how I could have possibly thought that it was cold....strange how our perceptions can change in such a short space of time.

The next day was as warm as before so we headed to the beach again. The water was still chilly but this time I knew that the cold wouldn't last. My thoughts were on the fun I would have splashing about with the others and somehow I found myself forgetting to be concerned by it. There were far too many other things to be absorbed by on my first beach holiday.

Dilution of Thoughts – by Michael Hughes

Once upon a time there was a wise old man who lived in a peaceful retreat. There was a young man who arrived at the retreat who sought help of the wise man as he wanted to change the way he was thinking, so he travelled a long way to seek the help and he was anticipating change.

So...on the first day...as the young man approached...the old man handed him a small bottle that had a dark coloured concentrated liquid in it. A short time later the wise man asked him to come with him and follow him into the ornate gardens...the old man pointed to a small bowl and asked the young man to empty the contents of the small bottle into the bowl and noticed what happened. The clear liquid in the bowl turned dark. On the second day the old man handed him the same small bottle with the same amount of dark coloured liquid and they approached a small but perfectly formed pool. Again the wise man asked him to empty the liquid contents into the pool and notice what happened. He saw that the pool turned a mid-tone murky colour that got lighter and lighter as he observed what happened.

On the third day the wise old man handed the young man the same bottle, same colour liquid and the same amount as they approached a beautiful lake. Again the wise old man asked the young man to empty all the contents into the lake and see what happened. So the young man poured in all the liquid and watched as the colour dissipated and gradually...cleared...away.

On the fourth day the old man handed him the same bottle, the same colour liquid and the same quantity. By this time they were stood at the edge of the sea... as the wise old man asked the young man to empty the entire contents of the liquid into the vast and deep blue ocean. The young man was amazed as it has no effect or impact at all... nothing whatsoever...

On the fifth and final day as he was packing to leave the retreat, the young man decided to walk up to say goodbye to the wise old man. The old man told the young man that now he understood what to do...and for the first time in a long time...the young man... knew peace... and as the young man was walking back...he realised he had already changed.

PLASTIC BRAINS AND LEARNING STYLES



What makes people so clever, and, sadly, also so stupid is that their brains keep changing depending on what they are doing with them! The technical term is plasticity – neuroplasticity. The brain continually changes throughout a person's life as the neurons (see Figure 1 over) reorganise themselves and form new connections. This occurs when you learn something – whether that's memorising a new song, acquiring a new skill (like driving or playing the piano), or just falling into a new routine or habit. It's also true that, in the event of brain damage, non-damaged areas can take on some of the functionality of the damaged part.

Throughout your life, your brain is able to change with learning; and these changes mostly occur at the level of the connections between neurons. If you form lots of new connections, the habit or learning seems more 'ingrained'. The more of an expert you become on a particular subject, the larger that area of your brain becomes. It seems that 80 percent of signalling in the brain uses two neurotransmitters – glutamate and GABA (Gamma-AminoButyric Acid). When glutamate passes a signal between two neurons that haven't 'spoken' before, it creates this connection:

Another type of chemical is BDNF (Brain-Derived Neurotrophic Factor), which builds and maintains the brain's circuitry of cells. It can make more dendrites (the little finger-like projections at the end of nerve cells that are used to connect between cells). It's well known that London taxi drivers who learn 'the knowledge' (a mental map of all the streets in London) have a larger hippocampus than, say, London bus drivers, and that's because that part

of their brain is used to acquire and use complex spatial information (Maguire, Woollett, & Spiers, 2006). Similarly, professional musicians have larger areas of the brain associated with music than other people (Gaser and Schlaug 2003). According to Dr John Ratey in his book *Spark!*, it's perfectly normal for neurogenesis (making new brain cells) to occur in adults, and it's more likely to occur if you exercise regularly and work hard during the exercise.

So there's plenty of evidence that the brain can grow and change as learning occurs. Our role, as hypnotherapists, is to help our clients to learn new ways of looking at the world and themselves – to help them to make positive changes in the connections between the neurons in their brain. But this begs a very important question: what's the best way for a client to learn? Should we be making them learn by rote (a very popular method in Victorian schools), or should we be making them read lots of

information, or is watching a YouTube video the key to learning?

You'll remember from school that different teachers had different teaching styles, but perhaps what's really important is a person's learning style. Remember, learning is something you do, not something that's done to you. So, is there some way that we therapists can identify the learning style of each client and use that to educate them and help alter the configuration of their brain cells to create positive change? Well, let's have a look at some of these learning styles.

The one that you're perhaps most familiar with is the one that's in all the NLP courses – VAK (Visual, Auditory, Kinaesthetic). Neil Fleming expanded the model to VARK (Visual, Auditory, Read/write, Kinaesthetic). The theory is that visual learners have a preference for seeing (so they like pictures, PowerPoint slides, diagrams, etc). Auditory learners

prefer listening (lectures, radio programmes, etc). Kinaesthetic learners like to learn from experience (hands-on, projects, experiments, etc). You listen to what your client says, and if they say lots of visual words and phrases, eg: "I see what you mean", "you've really illuminated the subject", they're visual. If they say, "that sounds right", they're auditory. And if they "feel your pain", they're kinaesthetic. Each person is meant to have a preferred learning style.

Another popular way of categorising learning comes from David Kolb. He based his work on the Experiential Learning Theory. The ELT model has two related approaches for gaining experience – Concrete Experience and Abstract Conceptualization – plus two related approaches for

transforming experience – Reflective Observation and Active Experimentation. His learning styles are:

■ **Converger** – abstract conceptualisation and active experimentation. These clients will be good at making practical applications of ideas and using deductive reasoning to solve problems.

■ **Diverger** – concrete experience and reflective observation. These clients are imaginative and good at coming up with ideas as well as seeing things from different perspectives.

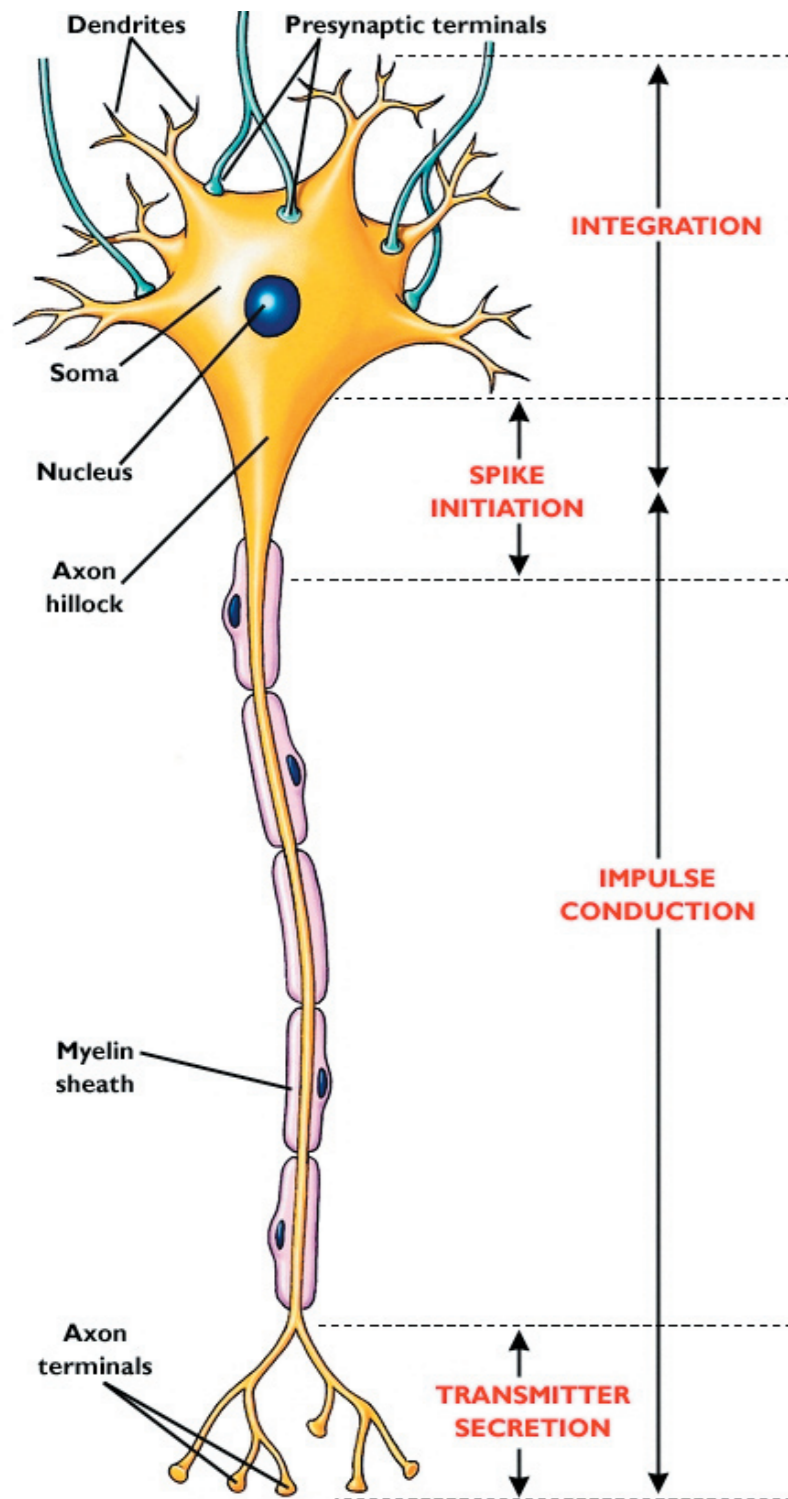
■ **Assimilator** – abstract conceptualisation and reflective observation. These clients can create theoretical models by means of inductive reasoning.

■ **Accommodator** – concrete experience and active experimentation. These clients are good at actively engaging with the world and actually doing things instead of merely reading about and studying them.

Identifying styles of learning can help your clients by Trevor Eddolls

PRINTING OFF!

Some of our members have had problems printing off copies, so here are some tips



The 4 MAT system is an NLP training style that allows the presenter to speak to all the different types of brains in the room at the same time. Bernice McCarthy developed the 4 MAT system based on other models of teaching. Basically, our clients ask four different questions as they go through the learning process:

- Why? Want to know the reason for learning (Divergers).
- What? Want to get the facts and concepts (Assimilators).
- How? Want to practice and do something (Convergers).
- What if? Want to try out variations (Accommodators).

Yet another model is Anthony Gregorc, which is based on a client's evaluation of the world by means of an approach that makes sense to them. There are two perceptual qualities – concrete and abstract – and two ordering abilities – random and sequential. There are four combinations of perceptual qualities and ordering abilities based on dominance.

So, which of these learning models should we apply? Sadly, it seems none of them really work. A report in 2004 by Coffield et al identified 71 different theories of learning style, but found that none of the most popular learning style theories had been adequately validated. Other researchers have tended to agree. Oh dear! So, where does that leave us? Well, right back where we started.

We know that human brains can learn, and change when learning takes place. So we therapists can use a repertoire of teaching methods in a scattergun way, hoping that some of what we say will be accepted by our client, and learning will take place, and that wonderfully plastic brain will arrange its cells appropriately and create more and more beneficial connections.

Remember, it seems people learn most when:

- They're relaxed
- The information is organized and presented in smallish chunks
- They're not tired.
- The information is repeated
- There aren't any distractions
- They're motivated.

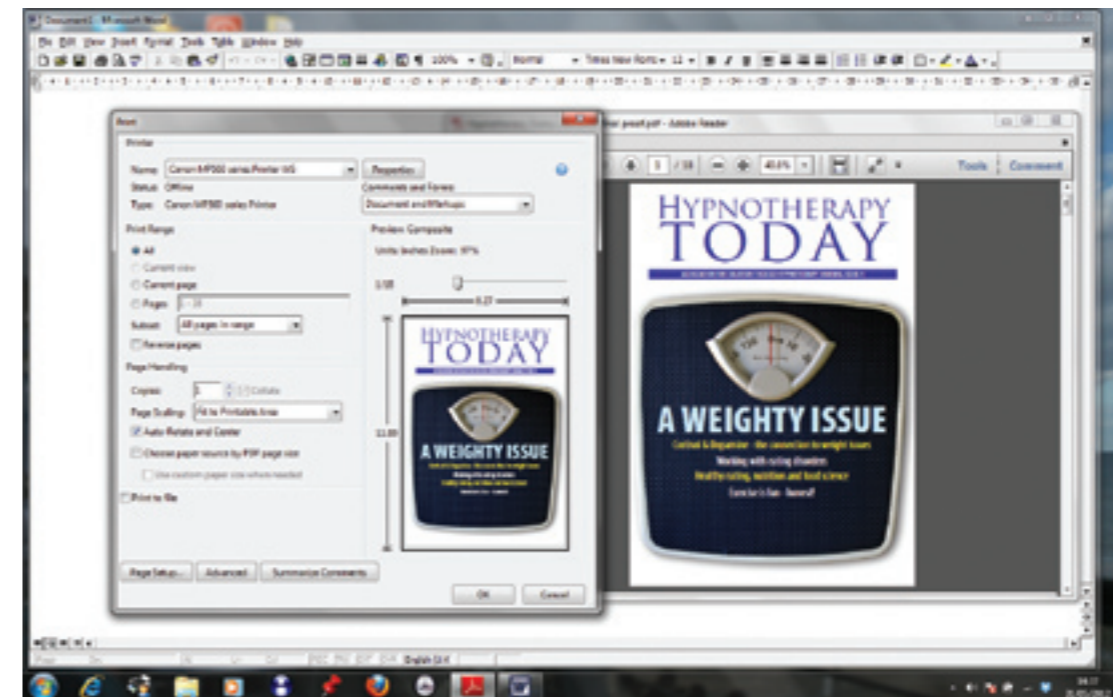
So perhaps that's what we should focus on, and not worry about knowing or trying to identify the client's learning style. The important thing is that no matter how a client learns, given the right situation, learning will take place – and those plastic brains will get themselves into a good shape ■

Continued over...

Then there's Honey and Mumford's model of learning, which has four stages:

1. Having an experience
2. Reviewing the experience
3. Concluding from the experience
4. Planning the next steps.

Their styles were named Activist, Reflector, Theorist, and Pragmatist. There's a Honey & Mumford Learning Styles Questionnaire you could use to find out how your clients learn best!



highlighted, and the image in the top right hand corner will appear single.

If your printer prints on both sides (duplex) then by clicking in the duplex check box means your printer will save paper - however if you do this I highly recommend you print from page 1 otherwise you won't get the effect of spreads. You can bind it or staple it to keep all the pages together.

If you don't want to print off all the pages but just certain articles, then where it says

"Pages" then choose the page numbers you need.

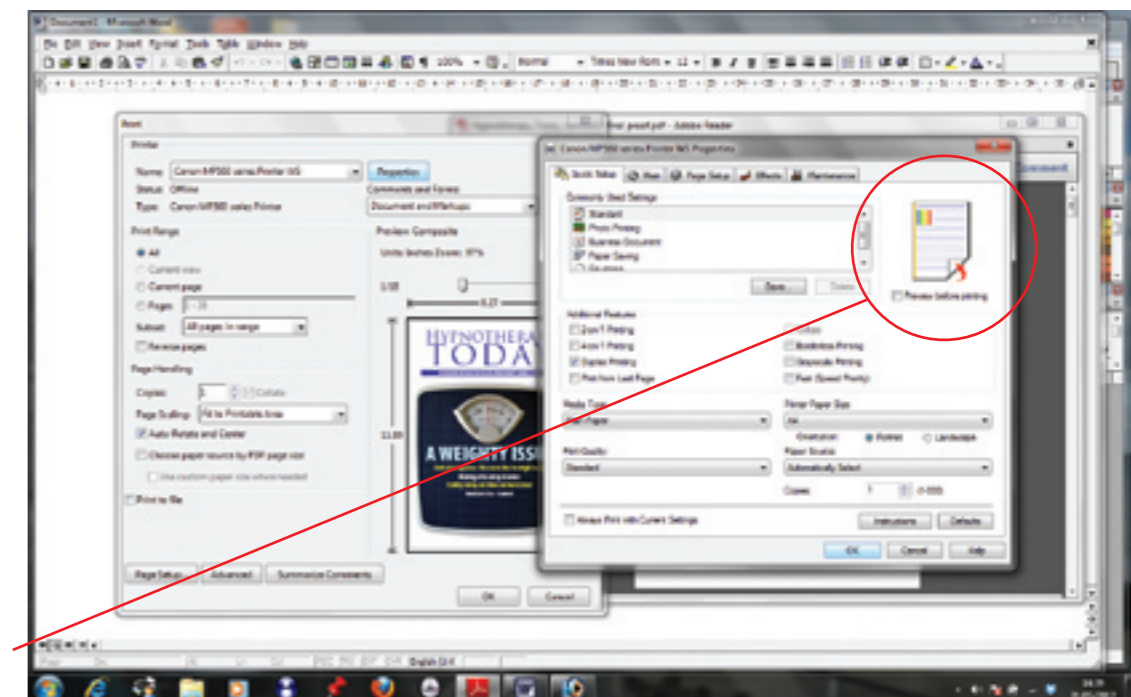
Some prefer to read it on a tablet, so if you require it as single pages instead of double page spread, this can be set up easily. Just email me at afsfhjourn@gmail.com with "single pages please" in the subject box.

It became apparent at the AGM that a number of therapists were having trouble printing off Hypnotherapy Today, so I decided to give some clues as to what might be the problem.

For the moment, we have it as pdf for a number of reasons and it depends on what kind of printer you have, to how you print it off.

For PCs running Adobe Acrobat, as you type CTRL P to print, you will see the button marked "Properties" next to the printer you're sending it to.

If this is marked 2-on-1 printing, it will print both pages on one sheet of A4 - so the type will be very small. If you want to print each page on A4 make sure this check box is not





HOME V CLINIC

Penny Ling enjoys the best of both worlds

There are many reasons to take time in deciding where to work. For many it's an obvious choice to find clinic space, for others the cost may be a factor in using a spare room at home. Both will cost and save you money in different ways. There are also considerations which you may not be aware of such as business rates, home insurance etc that may change your views on what's best for you. I would argue that to start a practice working from both a clinic and home can be greatly beneficial.

REFERENCES:

- www.prsformusic.com - Licensing for music broadcasting
- www.businesslink.gov.uk - business rates
- www.clinicspace.net - rental database on the web.



HOME

- Convenient to use when you want to.
- You can claim use of a room to your accountant, which will reduce your profit but cut your tax bill.
- Some clients prefer the comfortable homely surroundings especially if they don't like clinical settings such as hospitals and GP surgeries.
- Generally quieter, unless you live on a main road or have children and dogs next door.
- The cost of clinic space is usually three to four times as much, compared to that incurred when working from home.
- If you do choose to work full time from home you will have to pay business rates and your insurance will be higher. One way of getting round this is to work from at least one clinic and claim that to be your main business address.
- Are you easy to find and is it easy to park? Working from residential estates can be a little off putting and you won't get any passing trade.
- Make sure you have a clear, clean, straight route from your front door to your therapy room. No clutter, no personal effects and no cooking smells, all could potentially put off a client. Townergate insurance mentioned a case of a therapist being prosecuted by an ex client for trauma – what caused this trauma? A photograph of the therapist with their family.
- You have greater control over the environment.
- Make sure you follow data protection guidelines.
- You may need a license for playing music at home - one hypnotherapist was unlucky enough to have as a client a member of the music union!

CLINIC

- Clinics can be a little austere at times, especially if you work from a doctor's, dentist's or acupuncturist's clinic where cleanliness is vital, but it can leave you feeling cold and uncomfortable. Cleanliness is important; I once worked from a doctor's surgery where there was a drug rehab unit and I used to find fleas in the carpet. Worse still, one once jumped into my glass of water whilst I was talking to my client!
- A more 'professional' space - a client may only recognise this subconsciously, but it could be the difference between them turning up for the next session or not.
- A safer place to work, particularly if you work with many practitioners in the same building. However, the opposite may be true if you're the only one – see issue 2 of Hypnotherapy Today for more details.
- Clinics with receptions can act as a great way to produce referrals, especially if they also house a dental practise or a sports injury therapist. Footfall past a clinic may also be crucial; if you're based on a main road near the shops you're more likely to attract passersby.
- A good clinic should advertise themselves. Those who only advertise for clinic space for practitioners are generally after an income and don't care about the therapy. They may also mix different therapies, sometimes to your advantage, sometimes not. If they don't advertise, it may be beneficial to team up with the other therapists to reduce the advertising costs.
- Clinics who utilise a radio in the reception area should have a license to play music in public. If this is the case you won't need to get a separate license.
- Ensure your clinic has good parking nearby. I have seen people who have stopped going to clinic with no parking just because of the inconvenience.
- Make sure when viewing clinic space it has solid walls. When searching for a place to practice I have come across many places with walls so thin you can hear conversations. This is not only off putting but also breaks confidentiality. One clinic solved this by having two doors leading to a room. This puzzled clients and I used to tell them it was to stop the laughter from interrupting the other practitioners.

SOLUTION FOCUSED HYPNOTHERAPY RESEARCH PROGRAM (SFHRP)

Matthew Cahill explains a bit about the research programme currently being undertaken

It is with much excitement that we have just released the latest research program for solution focused hypnotherapists, the response from the research program has been overwhelming, with a slight delay in the program software modifications we're now well and truly on our way in "real world research". What is real world research

Professor Peter S. Jensen says in a recent article: "Despite important advances in recent years in evidenced-based approaches to prevent and treat mental, behavioral, and emotional disturbances in children and adolescents, the long-standing difficulties of moving research findings from bench to bedside have persisted, even in the face of rising problems in youth. To address these continuing difficulties in translating research results into practice, we suggest that researchers move away from studies that ask what works under optimal, university-based, research conditions to investigations that examine what works that is also palatable, feasible, durable, affordable, and sustainable in real-world settings"

Having used outcome rating scales "ORS" for many years we decided that the time has come to create a research program for solution focused

hypnotherapy and SFHRP was born. This SFHRP can be completed manually or by computer as we now have a bespoke software program which does all the work for you!

The SFHRP program is designed to integrate with the initial consultation, and help monitor seven key areas throughout the therapeutic process.

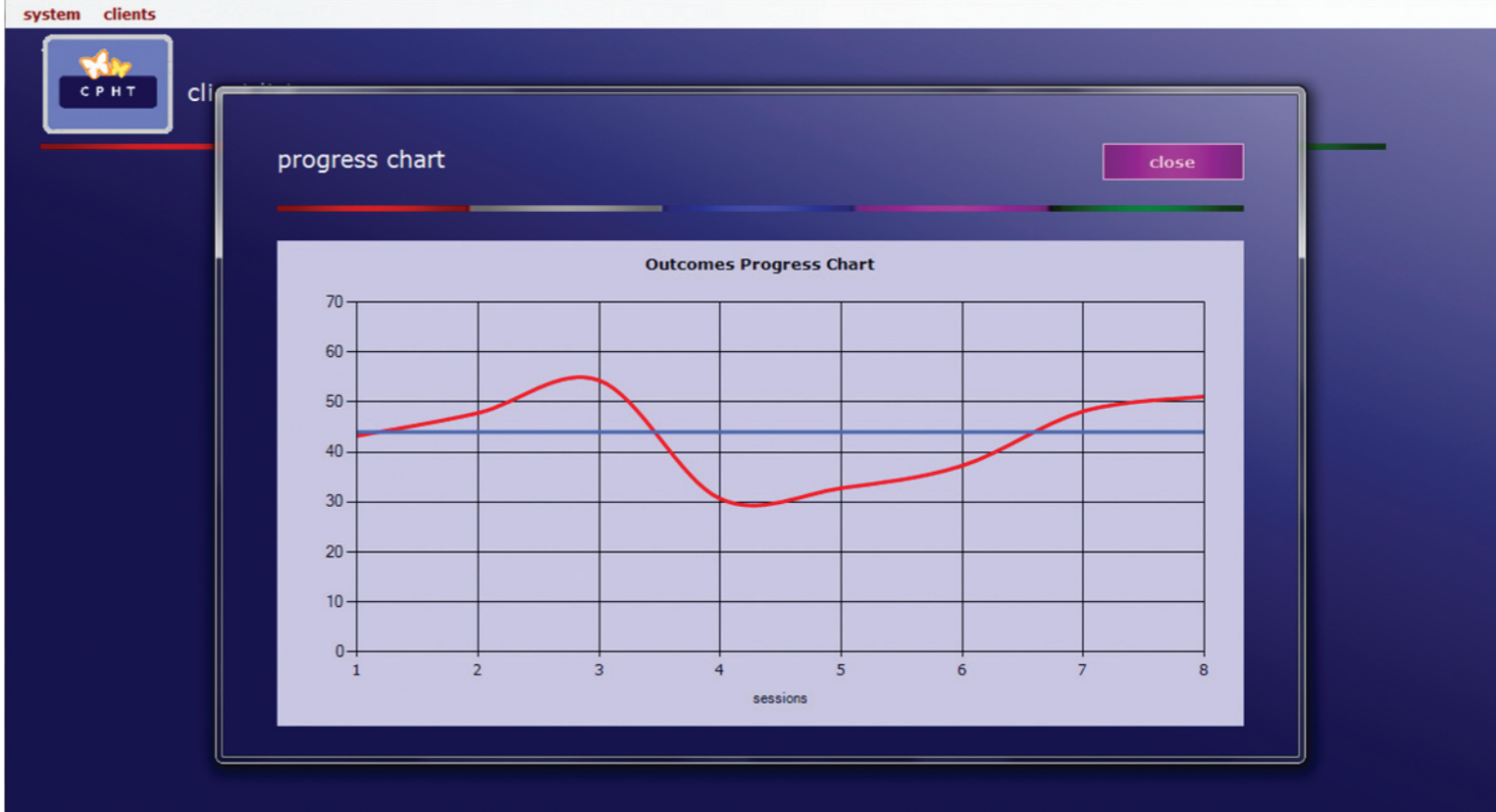
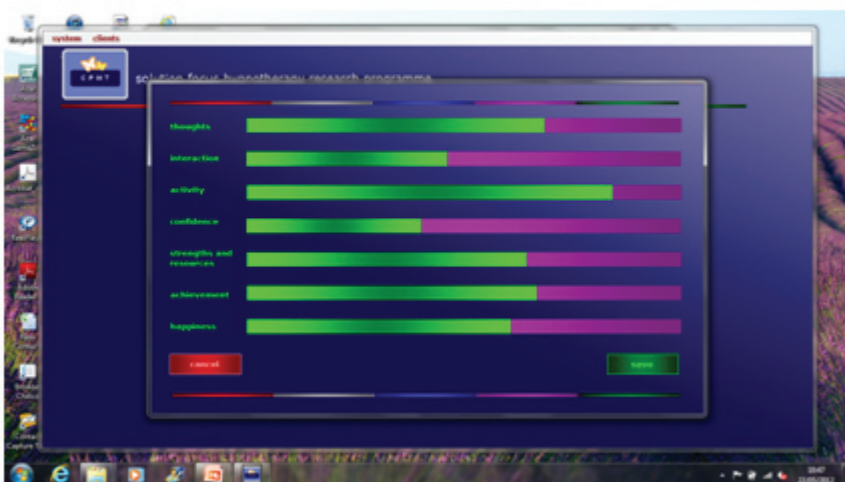
The seven key areas for monitoring are:

- ♦ thoughts
- ♦ interaction
- ♦ activity
- ♦ confidence
- ♦ strengths and resources
- ♦ achievement
- ♦ happiness

This is how the seven key areas are translated to the customer.

- 1) **Thoughts**
 - To be able to reflect in a positive way and recall good happenings
 - To be able to positively forecast
- 2) **Interaction**
 - To be able to interact in areas of choice in a positive and constructive way with family, friends, colleagues etc.
- 3) **Activity**
 - To be able to create activities of choice or renew involvement in activities that were beneficial and enjoyable in the past.
- 4) **Confidence**
 - To have that belief in oneself to achieve what one wants to achieve.
- 5) **Resources and Strengths**
 - An awareness of 'what's good about me' with new resources and strengths and renewing and re-establishing old ones.
- 6) **Achievement**
 - What has been achieved in moving towards the 'preferred future.'
- 7) **Happiness**
 - A reflection of the 'scale.'

The client scores the 7 areas and the save



Not only does the SFHRP help the customer focus on those important areas, but of course it enables us to measure our own performance in the consulting room. One thing I have found over the years is that it allows the customer to physically see the progress on the graph and if its going in the right direction then it certainly helps.

One of the key benefits for using the SFHRP programme is the minimal amount of time needed to record, it takes only a few minutes to get through the seven areas and I have found that once the customer pops off the couch they automatically head over to the computer or paper and measure the seven areas of progress, it seems to fit very nicely into the running and structure of the session.

Measuring outcomes are said to increase customers stickability

within therapy by around 65%, also the latest results from the (IAPT) NHS research programme where the PHQ-9 and GAD-7 outcomes tools were used (plus consulting with G.P's) it is confirmed that one of the lessons from the first year was "Services that provided a larger average number of treatment sessions have higher overall recovery rates" seems obvious from our experience, but it's nice to see others moving inline with CP.

The software is free and available to all CPHT trained practitioners, and all are welcome to attend various lectures throughout the year to learn how to implement the program into your consulting room. For those of you who've already started keep up the great work! please feel free to email matthew.s.cahill@btinternet.com any time for assistance

no	session date	a	b	c	d	e	f	g	total
1	22/05/2012	6.9	4.6	8.4	4.0	6.5	6.7	6.1	43.3
2	22/05/2012	7.5	7.1	6.5	6.4	6.5	6.5	7.4	47.8
3	22/05/2012	5.1	8.0	8.3	8.2	8.2	8.2	8.3	54.4
4	22/05/2012	2.5	3.5	4.3	4.5	5.0	5.3	5.6	30.7
5	22/05/2012	3.4	3.8	4.4	4.6	5.0	5.6	6.0	32.8
6	22/05/2012	4.4	4.6	4.8	5.4	5.7	6.0	6.4	37.3
7	22/05/2012	5.5	6.1	6.5	7.1	7.4	7.6	8.0	48.2
8	22/05/2012	6.4	6.6	7.0	7.5	7.6	7.8	8.0	51.1

COME DINE WITH ME

Last year I asked a number of members some general questions about themselves and their practices, and as this edition is about “words” then what a better place to exchange words than at the dinner table. I invited our therapists to bring 5 people from any time in history and asked them why – the results are quite an eye opener.

Alan Wick is a solution focused hypnotherapist based in Chester and North Wales.

Milton Erickson, NOT.

I would invite Tony Blair, to poison, but not before asking why he chose the Labour Party as the vehicle for his ambitions.

George Bush, to eat Tony’s leftover food.

Next would be the little girl that haunts me (I allow to haunt, lest I ever forget) from early Iraqi post ‘shock and awe’ news footage, on a makeshift hospital trolley amidst chaos, screaming (presumably with shock and awe) and newly without legs or parents, so we could hug while we observed Tony and George dying.

Then, and given the newly made space at the table, we could be joined at the table by Leisha, Edward and Harry (my family) and we could all have fun and make the little girl laugh and feel loved, like a little girl should.

Given the relatively small amount of room taken up by children and the deseased state of the two guests, I think I could be allowed the indulgence of also inviting Tom Waits, to ask if his tongue was all in his cheek when he wrote Kentucky Avenue. I hope not.

Helen Rogers is a solution focused hypnotherapist working in the Henleaze area of Bristol.



Gorbachev – such an interesting and inspiring man.

Margaret Atwood – I love her writing and think she would enliven a conversation.

Henry VIII – would love to know what he was like and the clash between him and Margaret might be interesting.

Ewan McGregor – well, he’s funny and um... if the conversation got boring he’s lovely to look at!

Milton Erickson – a predictable choice, but can’t pass up the opportunity to meet such a legend in the hypnotherapy world.

Penny Ling

is a solution focused hypnotherapist, supervisor and editor based in Oxfordshire.

My great great grandmother Eliza, who survived 2 cholera outbreaks which killed the rest of her family, and a spell in the workhouse, lost children, although one survived long enough to produce my grandfather – I’d love to know how she did it and where she’s buried!

The Dalai Lama, he’s always laughing and says such wise things. He must have quite a few good anecdotes.

Henry Blogg – He was the Coxwain for Cromer lifeboat and has been named one of the bravest men in

Nick Mawer - is a solution focused hypnotherapist and supervisor based in Keynsham.

In no particular order:
Jesus
Mahatma Ghandi
Florence Nightingale
Lance Armstrong
Basil Fawty
To listen and learn!



Sandra Churchill is a solution focused hypnotherapist based in Warminster



Derren Brown (sorry David!) – fascinates me.

Steve Jobs – for the way he changed technology in the world today.

Milton Erickson – to hear from the man himself.

Cher – To teach me the secret of youth!

My Husband – because he would want to meet the others!

Susan Ritson is a solution focused hypnotherapist and supervisor based in Somerset



Samuel Hahnemann – father of homoeopathy – I’d like to know how he would approach things today.

Winston Churchill – I’m interested in WWII history especially the SOE, which Churchill set up.

Arthur Delaney – a contemporary of LS Lowry – I love his paintings and would especially like to know if he did paint the Mill Street Scene which recently fooled the art world and sold for £330,000 as a Lowry, later to be revealed as a fake.

Wallis Simpson – to hear her side of the story.

Florence Nightingale – her take on today’s NHS!

history and to boot I found out last year he was my third cousin three times removed.



Spike Milligan - He’s been an inspiration since a child, and I know he was a pain to live with – but I’d hope he would be in a more entertaining mood.

Oliver Sacks – I was introduced to his book “The man who mistook his wife for a hat” back in my teens and I became fascinated with brain disorders. Sacks comes over as a real sweetie, and the film based on his autobiographical book “Awakenings” with Robin Williams reflects that characteristic perfectly.

One to keep an eye on

A report in the New Scientist in May suggests that preventing obesity may be down to timing when one eats - so far they've only used mice in the experiment but now scientists at the Salk Institute California are working with humans. As far as the mice are concerned, those who could snack at any time of the day increased their weight by 28%, whereas those eating only within an eight hour period did not change, despite having a high fat diet. Satchidanda Panda - one of the researchers - thinks the shortened feeding period allows for the metabolism to perform uninterrupted. So the idea of little and often may not be good for us after all.

Update on eating disorders

June edition of Scientific American Mind suggests that those with anorexia, bulimia and body dysmorphia disorder

may lack in self awareness. It has been found that the individuals are worse at determining internal states, such as heart beat and hunger than healthy individuals. Researchers at the University of North Carolina School of Medicine found that differences in interoceptive skills predict their level of body satisfaction. One way of checking one's interoceptive skills is to count your heart beats over a minute just by feeling your internal heart beat, then take your pulse the normal way. By subtracting your average pulse from the estimated heart beat and dividing it by your average pulse, then subtracting that from 1, if your score is 0.8 or higher you're very good, 0.6 - 0.79 means you're average and below 0.59 is poor. (ignore the fact it may come out a negative number)

$$1 - \frac{\text{estimated heartbeats} - \text{average pulse}}{\text{average pulse}}$$

Instead of Physician heal thyself, perhaps we should say - anorexic feel thyself.

Advertise your event here, contact the AfSFH for more details*.

- August 25**
Psychoneuroimmunology - the impact of hypnotherapy on Disease - Ken Murray @ Clifton Practice Bristol
- August 26**
The relationship between neuroscience and obesity - Claire Brigg @ Clifton Practice Bristol
- September 1**
Do you want more clients? - Nicola Griffiths & Deborah Pearce Building your practise - 10am onwards. Kennaway House Sidmouth.
- September 22/23**
Mindfulness in the clinical setting @ Clifton Practice Bristol
- September 30**
AfSFH Party Bristol
- October 27/28**
Drug Addiction: Biology or Belief - Phil Harris @ Clifton Practice Bristol

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If you have any case studies, scripts, metaphors, book reviews, news, areas you feel we need to investigate, then don't hesitate to get in touch.

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Views expressed in Hypnotherapy Today are those of the contributor. Please only send in articles of a solution focused nature.

Submission deadlines

First day of February, May, August, & November.

Issue Dates

January, April, July & October



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Don't Forget!

If you are a member of the NCH, then you can register your details of your supervisor (If they have been accredited by the NCH) with them - online.
www.hypnotherapists.org

Can You Write?

Calling all budding authors and journalists, we are looking for volunteers to write articles for this journal. We need people with time, talent and the ability to take a given subject and make it understandable and entertaining. Don't worry about what to write, we can give you suggestions on subjects or themes and don't forget it's got to be solution focused. If you'd like to have a go, then please email Penny Ling asfhjournal@gmail.com





Chairman and Trustee: David Newton

David Newton founded the AfSFH and is an avid supporter of getting the word out to the public of what Solution Focused Hypnotherapy is all about. His inspiration brought the Association to life and has allowed us to flourish rapidly in our early days. His support of all that we do is greatly appreciated.



Company Secretary and Trustee: Nicola Griffiths

Nicola chairs and tries to keep control of our Executive meetings! She works closely with the Executive in order to push the Association forward. The bee in her bonnet is to support both newly qualified and experienced Hypnotherapists in their careers, so she comes up with many of the initiatives that help our members improve their businesses.



Trustee: Susan Rodrigues

Susan is our mainstay who oversees our Executive meetings to ensure we're on the right track! Her knowledge ensures that our brainwaves keep to the ideals (and regulations) of the solution focused world.



Assistant Company Secretary: Sharon Dyke

Not content to be Nicola's Deputy, Sharon has taken on the role of Risk Assessor AND taken charge of long term planning for the Association. So we now have a vision for the future – all she needs to do now is keep us focused towards our goal!!



Journal Editor: Penny Ling

Luckily for us, Penny was in publishing before she became a full-time Hypnotherapist. Working with a team of volunteers who submit articles, Penny (amidst occasional tearing out of hair) writes, designs and produces our amazing Journal which has received unprompted and excellent feedback.



Communications manager: Debbie Pearce

Having decades of experience in PR, Debbie is in charge of national publicity. She also works hard behind the scenes establishing relations with publications and organisations that will benefit the AfSFH as we move forward. She also brings a large dose of energy to the Executive which keeps us motivated!



Member Benefits Officer: Andrew Workman

Andy is responsible for obtaining discounts on products and services that you find on the Member Benefits page of our website. He approaches many many companies using his persuasive powers to encourage them to offer these discounts! We don't like to ask how he does it, we just leave him to it.



Research: Claire Brigg

Claire Brigg is our Research Officer. She's newly appointed and is now busy acquainting herself with our needs for research so we can get good solid information out to the public and make them aware of how good solution focused hypnotherapy is.



Social Secretary: Julie Gibbons

Events Manager. Julie's job is to make us all happy, a job she does very well. She's in charge of organising our events such as the AGM and any parties and Conferences we hold, so whilst all serene above the water those feet are paddling away underneath!



Treasurer: Stephanie Betschart

The serious stuff, Stephanie looks after our money! She talks to our bank manager (scary) and has control of our cheque book – a very important role given we're a not-for-profit organisation so every penny is important!



Website Officer: Trevor Eddolls

Trevor, for his sins, is charged with updating the website and inspiring us with ideas to further progress the site. A challenging and key role as we grow bigger!



Administrative Secretary: Claire Rodrigues

Claire Rodrigues is our lovely Administrator who deals with all your queries and those of the public. She's amazing as she has to put up with us lot too, so she has her work cut out and we think she's great!