



Annual General Meeting

The AGM took place in London during December 2012. Several topics came under discussion including the scheduled increase to the registration fee, long term unregistered members retaining membership, confusion surrounding the structure of bridging courses and BSCH branches overseas. What follows is a summary of the secretary's report.

Membership figures:

The total registered membership at the time of this meeting is 944 up from 865 in 2011, an increase of 79 registered members and an improvement of over 9%. This seems quite good and hopefully ends the 4 year decline of registered numbers.

Total Affiliate members	= 193 (106 in 2011, an improvement of 82%)
Total Associate member	= 244 (213 in 2011, an improvement of 14%)
Total Full members	= 507 (546 in 2011, a reduction of 7%)

This last line of numbers is of interest and we must watch to see if it represents a trend. Perhaps since the referendum in 2009 allowing associate members an unlimited time to progress to full membership (it was previously limited to 4 years), more are choosing to remain at the associate grade for longer and are not replacing the full members who naturally leave over time. It may also be the case that we have more retirement from this category as our full members are typically longer in the business.

It is something to be aware of over the coming years. We can be happy that numbers are increasing overall but perhaps a little concerned if the society continues to regularly see a decrease in its better qualified or more experienced members. However, last year we were 68 full members less but only 39 less this year so from that statistical point of view it is still an overall improvement.

Our mandatory CPD system is now under way. The referendum last year was in favour of this registration requirement and change to our constitution. The general feedback is that most seem confident they can meet 16 hours of CPD without great difficulty. The scheme officially commenced on the 1st April 2012 and members should be keeping their CPD logged in case it's required for inspection at registration time in the spring of 2013.

Our advertising has continued as it has over the past few years with most of it spent on 'pay-per-click' advertising with the Google search engine and there has been some experimentation with key word changes and varying monthly emphasis to get the best results.

I'm pleased to report there have been no serious complaints from the general public about any of our members. We can be proud that we maintain such a good record.

There have been a few changes to the committee this year including our new treasurer Richard Spencer-Nitsche. Stepping down from the committee are Karine Solloway, Maggie Chapman and Amanda Benbelaid and we thank them for the service they have given to the society over the years.

Professional Standards Authority by Peter Mabbutt



In February the Professional Standards Authority for Health and Social Care (PSAHSC) launched the Accredited Voluntary Registers (AVR) scheme. Myself and fellow committee member Charles Caruana were invited to represent the BSCH at their presentation in the House of Commons.

The PSAHSC oversees statutory bodies that regulate health and social care professionals in the UK, such as the General Medical Council and the Health and Care Professions Council. They assess their performance, conduct audits, scrutinise their decisions and report to Parliament.

The aim of the Government-backed AVR is to promote quality for those healthcare professions not regulated by statute. Accredited registers can encompass a wide range of occupations and organisations and the PSAHSC may accredit more than one register in any particular field.



Accredited Voluntary Registration is different from statutory professional registration. It is voluntary, not compulsory. Whilst practitioners can work in unregulated occupations without being on a register, the Authority's Accreditation Scheme now offers people the option of seeking practitioners on a register that has been vetted and approved by them. The PSAHSC standards encompass a registers governance, standard-setting, education and training, management, complaints and information.

Care and Support Minister Norman Lamb said: "Good care comes from good people. You need to be able to find people who are committed to the highest professional standards. The AVR scheme is an excellent way of doing that. The scheme will be a benchmark of high professional standards and good practice and because of that, it will give people faith in the staff they employ, enhance the reputation of practitioners and, crucially, raise standards across the board."



Harry Cayton, Chief Executive of the Professional Standards Authority said: "The scheme offers enhanced protection to anyone looking for health and care services. With lots of different regulators supervising different parts of healthcare, this scheme works by bringing more professionals into the fold. It gives practitioners the opportunity to demonstrate their commitment by joining a register dedicated to improving standards."

Amongst others, we had the opportunity to talk to members of the UKCP and the British Acupuncture Council (who have both been accepted onto the AVR), along with Baroness Pitkeathley, Chair of the PSAHSC and a Deputy Speaker of the House of Lords. Their overall impression was that the scheme does hold merit and looks to be more than a simple "rubber-stamping" of organisations.

In a room full of MPs, Members of the House of Lords, and voluntary registering bodies, the general consensus of opinion was that this is the closest that we will get to legislation in the lifetime of this government and probably the next. As a result, both the LCCH and BSCH will be actively investigating the AVR scheme in greater detail with a view to estimating the value of accreditation.

More information about the PSAHSC at: <http://www.professionalstandards.org.uk/>

Continued Professional Development & BSCH Registration

Mandatory CPD began in March 2012 and we have now completed our first year of the system and a number of members have already volunteered their records. I think most have been surprised at how quickly the needed 16 hours can be achieved and some records have exceeded this by a good margin.

There have been a few questions about the system such as, 'I have only just qualified so my previous year was taken up with diploma / PG Cert course work, do I have to show records of CPD in addition to this?' The answer is no, CPD is for members who have been in practice for at least a year since qualification.

'I am just returning to practice after a long break,' again the answer is no. CPD as its name suggests is for professionals in practice who seek ongoing improvement. In this case CPD begins when the member registers as being in practice and if this is part way through a year this will be taken into account.

There has already been some helpful feedback and the system will improve and develop with time. I'm sure members will embrace the CPD ethic, not only for its obvious professional advantages but also as an aid to memory and a bolster to confidence. It can be surprising just how much additional study we make each year, often incidentally, which if unrecorded is easily forgotten.

If you have any questions about CPD please contact the secretary. There is a template sheet for the recording of CPD hours available from: <http://www.bsch.org.uk/pdfs/CPDlog.pdf> and a PDF introducing CPD from here: <http://www.bsch.org.uk/pdfs/cpd.pdf>

Benefits of BSCH registration

At the recent AGM an attendee (I believe it was John Pullen) mentioned that it may be a good idea to remind people of the benefits gained from membership of the BSCH. The point was well made and though one would hope the main advantages to be self evident I will attempt to list some of them here.

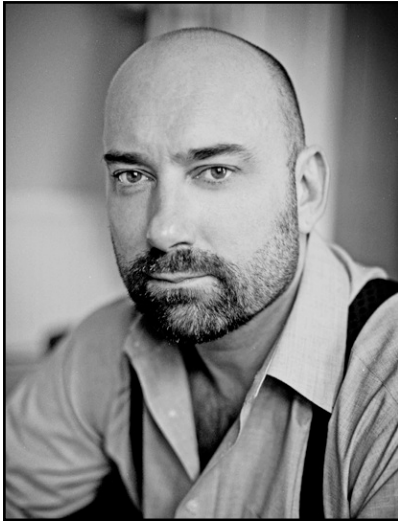
First must be the confidence engendered in the public by the fact that you are an accepted part of an established and respectable organisation - one that has a verifiable standard, an ethical constitution, a process of mediation for complaint and a disciplinary procedure. A body that will ensure that its members have good training, continue to train and have passed the required examinations. The BSCH certificate is a document of authenticity and helps to provide the prestige necessary for effective practice. It is also a body that seeks to protect and provide for your professional interests.



There are other more prosaic benefits too, in no special order: the use of an established logo, a telephone helpline for public enquiry and referral, discounted insurance, a corporate advertising scheme, a searchable Internet database, a marketing budget, practitioner database software, stationery templates, a registration certificate and code of conduct, a private web messaging board, regular email bulletins, newsletters, subscription to online journals, availability of supervision, membership cards, a range of leaflets at cost, etc.

A society is a grouping of like minded people gathering to organise things in a collective way, to make things easier, to offer protection to each other, to offer help and advice and to do those things that require community and cooperation. To achieve things that are difficult to do alone.

The Royal Brompton Hospital - a placement, by Daniel Fryer



In 2008, whilst supervising on a certificate course for the LCCH, one of the other supervisors present mentioned a series of voluntary placements she was organising, one of which was at the Royal Brompton Hospital. I put myself forward for it, not for entirely altruistic purposes as I thought doing work in a hospital would look good on my CV when marketing my services to GP's and NHS trusts.

The placement turned out to be in the cardiology department using hypnotherapy for pain control in the treatment of Cardiac Syndrome X (CSX), which is chest pain similar to angina, but in the absence of any coronary abnormalities.

I knew little about pain control, other than what I had been taught at the LCCH and so I immersed myself in the works of Hilgard and Barber and linked that to what I had learned from my diploma in cognitive behavioural hypnotherapy and got to work.

I held a clinic one day a week, seeing long-term CSX sufferers, especially those for whom medications (typically nitrates and calcium channel blockers) had failed - a very tired and dejected bunch of patients.

Helping long-term pain sufferers (sometimes months, often years, occasionally decades) quickly became one of the most rewarding strings to my therapeutic bow.

CSX sufferers are typically (but not exclusively) post-menopausal women with a tendency towards stress and anxiety. However, I have also seen middle-aged men, men and women in their early twenties and have helped people manage other factors influencing or prolonging their pain (such as anger and depression). The wonders that both CBT and hypnotherapy can work on pain and the happiness and hope these treatments can instil never ceases to amaze me. After six months as a volunteer, having produced startling results, I was hired as a specialist and am working there still.

Typically, the NHS holds a dim view of hypnotherapy but thanks to Professor Peter Collins, the consultant cardiologist who had the bright idea of 'trying' hypnotherapy as a last resort - many, many people are now leading happier lives, lives less governed by pain. In fact, taking a cognitive behavioural and hypnotherapeutic approach has been so successful that the work I do there is now being turned into a two-year study. On top of that a recent interview in the Daily Mail with one of my patients showed both the Royal Brompton Hospital and hypnotherapy in a very positive light.

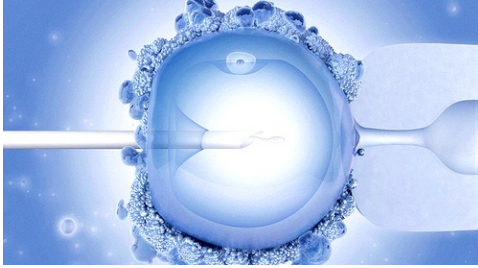
I've also written and delivered a workshop on cognitive behavioural hypnotherapy for pain control at the College of Cognitive Behavioural Hypnotherapy (CCBH) and recently began receiving referrals from a physiotherapy clinic, seeing patients whom the therapists think have psychological factors influencing their pain.

All this reminded me of something from my LCCH diploma course years ago. One of the tutors there was asked why she chose to specialise in the area she worked in - "I didn't choose it," she said, "it chose me."

<http://www.danielfryer.com>

A Case History by Sjanie Hugo Wurlitzer

The one thing I keep learning over and over again is to keep coming back to basics. In my own life it often catches me by surprise and humours me when I realise, yet again, that the solution to my complex, complicated, messy situation is something as simple and fundamental as breathing. In my one-to-one work with fertility patients remembering this has been, I believe, central to success.



A 32 year old woman, who came to see me last year, had been trying for a baby for 2 years. Her and her husband had been diagnosed with unexplained infertility. She had been through 3 cycles with Clomid and 1 cycle of IVF, all unsuccessful. When she came to see me they were planning their next round of IVF. She was very anxious and worrying excessively, so much so that she had been experiencing heart palpitations and spells of dizziness.

We began as I usually do by setting the goal for therapy. Her goal was clear, she wanted to feel relaxed and calm about her situation and able to cope with the IVF treatment. However her story was very complicated and there were a whole number of things that she brought to my attention. She seemed overwhelmed by it all. And it was tempting to join her!
Breathe...

So we came back to basics. Her IVF session was due within a couple of weeks and she wanted to feel calm, relaxed and able to cope with it. We worked with the basic skills of relaxation and managing worrying. I taught her two self help techniques; the 7:11 Breathing and the Quick Body Scan. The first to regulate her autonomic nervous system and reduce emotional arousal in the limbic system and the second to increase mindfulness, release physical tension and increase serotonin.

In our second session we looked at what lifestyle changes would help her to feel better. She knew she wanted to reconnect with friends and get back to doing the things she loves doing like painting. Things she had stopped doing when they had problems trying to conceive. We also looked at what beliefs were underlying her fear.

Two days after she had the fertilised embryo transferred back into her uterus we had our 3rd session together. She arrived at the session looking serene and peaceful. A different person! When I looked back at our sessions together, there was one simple moment that I think really turned everything around for her. After she told me about how anxious and fearful she was feeling I asked her what it was she was so afraid of. The question stopped her in her tracks and she looked surprised at what I had asked. She thought it through for a while and then said with a shrug of relief 'nothing, whatever happens it will be okay, really...'
Exhale...

In that moment, anxiety left her and she has been as cool as a cucumber ever since. And becoming cooler by the day! And just in case you were looking for a happy ending... she did get pregnant!

Sjanie is doing a talk and demo at the up coming **Hypnosis Conference**, Sunday, 26th May
'Learn how hypnosis and mind-body approaches can help woman to prepare for and cope with IVF (In-vitro fertilisation). Sjanie will present evidence of how psychological and emotional preparation for IVF increases the chances of a successful outcome and will demonstrate key skills for working someone who is experiencing fertility problems.'

Hypnotherapy in Schools Programme (HISP) by Caroline Dyson



Education is an ever changing field but one thing seems to remain constant - the increasing pressure on schools and the staff who work within them. Raising standards wouldn't be such a difficult task if all pupils were the same, learned in the same way and had the same upbringing.

The work would perhaps be boring but raising attainment would certainly be easier.

The obvious reality is that children and young people arrive at school with their own personal experiences, influences, knowledge and learning styles, not forgetting fundamental aspects of personality and temperament (and these are only a few of the relevant factors), all of which affect learning. Some children arrive pre-programmed and ready to learn but many bring suitcases of complex social and emotional luggage or medical/health issues which cannot easily be left in the school foyer to be collected at home time. As the screws of scrutiny and accountability tighten for teachers, so too do the unwritten expectations on them to be social workers and counsellors. Especially as the number of children and young people with social, emotional, behavioural and medical issues that affect learning continue to be identified.

In 2004 I was employed as a Behaviour Support Teacher for Coventry Local Authority whilst continuing to run a private hypnotherapy practice. I quickly began to see the potential for hypnotherapy for many of the pupils I worked with in my Support Teacher role and after some discussions and consideration, in early 2011 Coventry agreed to offer hypnotherapy to all pupils within its education system. I set up processes and protocols as well as training people in what hypnotherapy was and possibly more importantly, what it was not!

I was adamant (against plenty of advice to the contrary) to include the word 'hypnotherapy' and not omit or disguise it behind more familiar and acceptable terms such as 'relaxation', 'guided imagery' and 'counselling'. Hypnotherapy has unfounded stigma, fear, misconceptions and controversy surrounding it and I believed that if this is ever going to be overcome, people have to start using the term and stop giving other approaches the credit that hypnotherapy rightly deserves.

I began the Hypnotherapy in Schools Programme (HISP) in early 2011 and it has taken off with great success. Education professionals displayed an open-minded attitude to this 'unusual' approach and though some parents initially proved a little harder to convince, this is rapidly changing as word spreads that hypnotherapy can help and will not turn their child into clucking chickens! I am personally delighted to hear the term 'hypnotherapy' being used so readily and positively within Coventry schools and services as the controversy and weariness steadily fades. As it currently stands, I've trained many staff and professionals in understanding how hypnotherapy can help and as schools realise its potential to support their pupils I am receiving more and more referrals from staff, parents and even from pupils themselves who hear about it through their friends! There is even a colleague who has been so inspired he has begun training as a hypnotherapist himself.

I have used it with many pupils aged between 5-19 years old for a variety of issues that have an impact on that individual's ability to learn effectively, e.g. developing concentration, increasing self-esteem/confidence, reducing anxiety (exam, social, specific), dealing with feelings (stress, anger, grief) and managing pain due to specific medical conditions. To my own personal

surprise it has also been incredibly successful so far with pupils diagnosed with autism for whom I believed (wrongly it seems) it would be less effective. This positive effect has been so well received that a special school for pupils with autism is now accessing hypnotherapy for several of its pupils.

It has also been used with school staff to help them be most effective in their ability to teach and support the pupils in their care. While there is still some surprise at how well hypnotherapy works within the education system, I personally (like all hypnotherapists I'm sure) am not that surprised at all. Hypnotherapy is highly effective, quick, simple and fun for the client and in this current climate of cost-effectiveness it seems a perfect approach for education to embrace. I'm not claiming it's a solution for everything or everyone and indeed it doesn't replace other valued professionals and expertise in education and medical fields but when added to the vast range of approaches that schools now offer their pupils, it certainly fits very well.

My hope is that other authorities will take note so that we will ultimately reach a point where not only is hypnotherapy a 'mainstream' approach (much like its close relation - counselling) but that there will come a time where every pupil in every school will be able to access hypnotherapy to support their learning, if and when needed.

For further information please contact **Caroline Dyson**: carolinedyson@hotmail.co.uk
web pages: <http://www.suttoncoldfieldhypnotherapy.co.uk>

Interview with a Hypnotherapist...

This issue we interview Sjanie Hugo Wurlitzer BA, D.Hyp, PDCHyp, MBSCH

Where is your home / practice based?

After 12 years of living in London I have taken the leap and moved myself and my family down to so called 'Sunny Worthing' on the West Sussex coast. Sunny is a very relative term and being South African born I can't help but argue. Although I have to say, when the sun does shine here, it does seem to shine brighter. Until I set up my practice locally I am running all my sessions online, using Skype. Now there is a controversial idea!



What are your interests and hobbies?

Well my all time love and passion, the thing that I always turn to for fun, nourishment, exercise, creative expression, healing and just about everything is... DANCING. I have been dancing since I could walk and have always found a way for dance to be a part of my world. I like to think that I have danced my way through life. A bit like these two in this fabulous music video at:

<http://www.youtube.com/watch?v=nUDXUeI6KF8>

Dancing is no longer just a hobby or an interest; I've recently trained as a Movement Medicine Teacher and am integrating conscious movement practice into my one to one and group work.

Can you remember the first time you came across the idea of hypnosis?

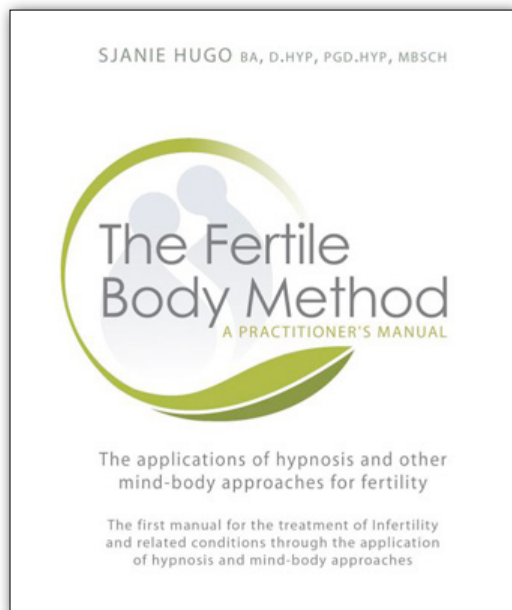
Oh yes! It's burnt into my mind. As a kid my lovely granny would take all of her grandchildren (11 of us!) to the Max Collie Show every year. And afterwards we would go for Ice creams on the sea front. Max Collie was a good old fashioned South African Stage Hypnotist who performed the most mesmerising captivating and top notch shows. As a youngster it blew my mind!

Do you use self-hypnosis very often?

Yes, everyday, in one form or another. It's a part of how I live!

Have you had any material published?

In September 2009 Crown House published my book '**The Fertile Body Method: a practitioner's manual**'.



Keep eyes out for my new article coming out in the The Australian Journal of Hypnotherapy and Hypnosis. The article is about how psychological and emotional preparation for IVF increases the chances of a successful outcome. It's packed with supporting research and case examples. I will be presenting this research as well as a live demo at this year's Evidence Based Practice in Clinical Hypnotherapy Conference 2013.

Do you do any teaching or supervision?

Teaching is a big part of my work. After lecturing at the LCCH for 5 years I started teaching therapists about how to use hypnosis and mind-body approaches for Fertility. I offer this training twice year now and the course is also available online. Throughout the year I teach a variety of webinars which cover topics relating to Fertility.

Most of the supervision I do is with qualified Fertile Body Therapists as part of their ongoing learning.

Aside from professional training I also facilitate workshops with groups of woman. We explore the psychological and emotional dynamic of the menstrual cycle and how to work with the different phases of the cycle to create positive changes in various areas life—health/fertility and wellbeing, life and work management, creative and spiritual life. It's a very exciting part of my work that is still considered somewhat of a taboo. However I do think the tide is turning, curiosity and interest in this work is really growing. The press have cottoned onto it too and we (my colleague Alexandra Pope and I) have had articles in main stream Irish newspapers and UK magazines like Psychologies. I think more and more women want to truly understand it as it's so central to our emotional health and who we are. If this grabs your attention you can find out more here <http://www.womensquest.org>

Do you use background music in your hypnotherapy sessions?

No, not in the sessions but I do use background music in all my hypnosis recordings.

Is clothing important? What do you typically wear for a hypnotherapy session?

Yes I think we communicate so much by how we look and for me it is important to dress in a way that is professional but at the same time reflects who I am. Suits are not for me so I go for a smart casual look, often skirts or nice trousers. And accessories!

Have you come to use one hypnotherapy technique more than others?

Yes I definitely have my favourites. And mostly the techniques I love are the ones that I have personally had good experiences with. I'm also more likely to use techniques that I have somehow made my own, reworked, changed or adapted in some way. I've noticed that the approaches that I'm comfortable with and really 'believe in' are also the ones that get the best responses from my clients.

A firm staple is Vogt's Fractionation, or a variation thereof. Can anyone remember that one? Well it was the technique that really got me into hypnosis for the first time.

Do you make recordings of your therapy sessions, for your own security or for your patient's benefit?

Yes I often record the trance part of the session so that they can take it away and listen to it again and again. With some things I find the repetition is very helpful.

Have you had a humorous incident / outcome from therapy?

Triplets!?!

What is your most remarkable success?

See above. That's 3 times more than what they were hoping for...

Do you use any of the new digital technology?

I use a pretty snazzy high tech recording device to record my sessions. It's called a Zoom.

How about EFT, or EMDR?

I'm a big fan of both. Do I have to choose sides?

Do you have any heroes from the world of hypnosis, either past or present?

Stephen Gilligan. I would happily say he is my hero. He inspired me to a whole new understanding of hypnosis and utterly transformed the way I worked. If you ever get an opportunity to go and study with him, go for it.

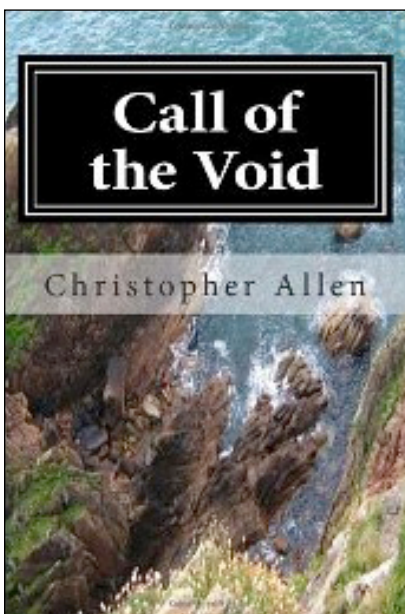
If you could recommend just one book what would it be?

Generative Trance: The Experience of Creative Flow - see:www.stephengilligan.com

Members in Print

Call of the Void: The Strange Life and Times of a Confused Person by Chris Allen

From the author: 'the nefarious use of hypnosis does figure prominently in the book but I have made a point of stressing in the narrative that, whereas hypnosis is not dangerous in itself, it is just as open to abuse by unscrupulous people as anything else; regulation and proper training are therefore needed to safeguard the public'. A description of the book follows:



Call of the Void is a mystery thriller which charts the journey of a young man, Gideon Peters, in search of an answer to one of life's most intriguing questions: what is the point and purpose of my existence? The story is set in pre-digital age Britain and spans the 22 years of Gideon's life from 1961 to 1983 as his quest takes him to London. At the request of his father, he enlists in a campaign to expose the political agenda of a secret cult within the capital. Gideon is taken to the limit of his physical endurance and moral courage in a traumatic encounter with its leader - the mysterious Magus - a man who will stop at nothing to protect his technology of hypnotic persuasion and the power it bequeaths to commit the perfect murder. No one is as they appear to be as Gideon is forced to confront his inner demons and his deepest fear: a compelling impulse to self destruction.

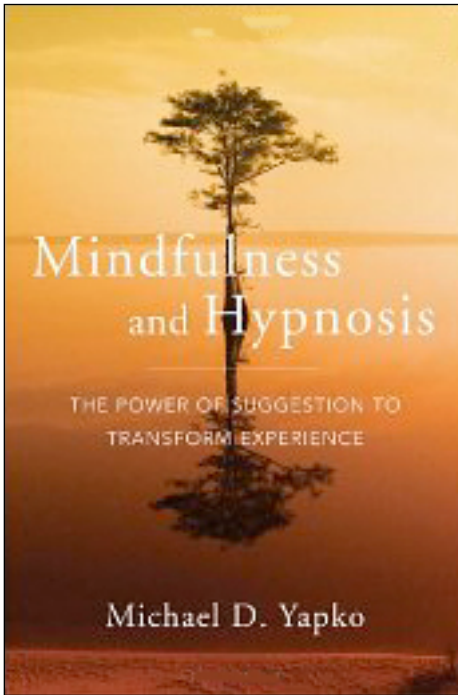
Call of the Void has a strong philosophical, religious and spiritual theme with an emphasis on hypnosis. It is an exploration of the

unconscious powers of the human mind. Through Gideon's eyes we are invited to challenge conventional ideas on the nature of reality, good versus evil, free will against determinism as he struggles to unravel the enigma of the baffling but commonplace urge to leap from high places: the Call of the Void. Set in an alternate world, great care has been taken to mirror historical accuracy as the story reaches its dramatic conclusion against the backdrop of the General Election in the United Kingdom in June 1983. It's available in paperback and kindle format.

Book Reviews

Mindfulness and Hypnosis by Michael D. Yapko

Review by **Ronald Shone** BSc (Psych), MA, D.Hyp, MBSCH



Mindfulness has become one of the latest fads in therapy. Practitioners of mindfulness are quick to point out that it is not simply the idea of being in the present and non-judgemental; nor does it require an involvement in Buddhist meditation.

Hypnotherapists who read or investigate mindfulness cannot help but be struck by many similarities between techniques used in hypnosis and techniques now being utilised in modern mindfulness. Yapko, a leading American psychologist and hypnotherapist, discusses this overlap in his most recent book.

The thrust of the book is what each has to offer the other. So for hypnotherapists the book highlights what we can learn and utilise from the practices of mindfulness. But it is also what mindfulness can learn from hypnosis.

Mindfulness and hypnosis are different: different in their underlying philosophy as well as their stated intentions. However, they have a lot in common in terms of methodology and practical foundations. But what intrigues Yapko is the now wide acceptance of mindfulness when only a few years ago it

would have been dismissed. Also, why this has not occurred to the same extent with hypnosis? As he puts it, 'Mindfulness good, hypnosis bad?' His main attention is to the role of suggestion in both hypnosis and guided mindfulness meditation. Of course, suggestion is at the very foundation of hypnosis, especially in bringing about therapeutic change.

The book is well researched and well written. As one reads the book, much more is covered in passing – some relating to new ideas in neuroscience. Even so, attention is on the practical aspects of both mindfulness and hypnosis in bringing about change. Is change easier to bring about by pursuing acceptance and non-attachment than the type of suggestions in Ericksonian hypnosis? What has a bearing on this is the fact that mindfulness is connected to a specific religion or philosophy while hypnosis is not. Yapko argues that this is one reason why mindfulness has been more readily taken up while hypnosis has had to work hard at proving its relevance.

He spends a great deal of time discussing types of suggestions comparing how they occur in mindfulness and how they occur in hypnosis. He also takes up the debate about whether mindfulness (as with hypnosis) is a special state distinct from other states of mind. This debate inevitably leads to a discussion of the self.

Although a comparison of mindfulness and hypnosis, the reader will find much about hypnosis itself in this book. However, while one's understanding of hypnosis and mindfulness will be

increased as a result of this reading there is little on actual technique – but it was not meant to be manual of this kind. In the concluding chapter he raises the question, 'If hypnosis is so great, why isn't everyone using it?'

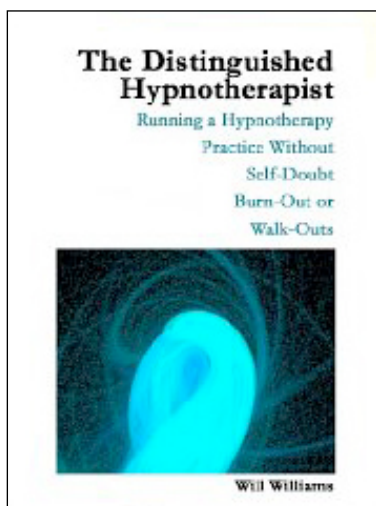
Published by W.W. Norton & Company, 2011, 256 pages in hardback. Digital version available.

The Distinguished Hypnotherapist: Running a Hypnotherapy Practice Without Self-Doubt, Burn-Out or Walk-Outs by Will Williams

This is a slightly unusual choice because the book in question is only available via the Internet in ebook or PDF format.

The author claims 3 main aims for his book:

1. to raise awareness about the hypnotherapy industry, the challenges and conflicts it poses, and how to navigate through all the mess to remain relatively content and confident about what to do.
2. to help stimulate you, inspire you and snap you out of any defensive ignorance, conflicts and barriers you may have felt were there but couldn't quite get to grips with.
3. to teach some useful frameworks and practical ideas to help you be more confident about hypnosis and hypnotherapy.



The author offers a critique of the thought processes and selective belief systems of both therapist and patient and challenges readers to examine their own accepted doctrines. He also criticises some of the teachers, teachings and books on the subject of hypnotherapy - mainly for concentrating on methodology at the expense therapeutic understanding. He goes on to claim a difference between the 'relaxo-therapist' and a hypnotist, suggesting that the majority of UK practitioners fall into the former category. Quote; "The spectrum of ability in the industry is in fact so vast that the profession should definitely have different names. You could find a 'hypnotherapist' and receive powerful psychotherapy, uncovering childhood events of negative programming, expressing emotional blockages of anger or guilt towards significant others, achieved through effective hypnotic training and efficient development of enhanced self-awareness. You could also find a 'hypnotherapist' who reads a script about walking

through a meadow whilst your subconscious 'takes care of your problems for you', a sense of confidence developing as the river shimmers, butterflies and anxiety flapping away into the distance. It is surely time that hypnotherapy was divided into the psychotherapists offering hypnosis and the practitioners of relaxation." (I should point out that author does not go onto explain of how the proper hypnosis he alludes to is to be achieved).

I have heard various criticisms of the hypnotherapy industry over the years so it's interesting that someone has taken the time to gather much of it together into one place. Ideally it should be read by someone thinking of starting up in the business. However objective criticism is valuable to the seasoned therapist too even where it does not directly apply and if the reader is willing to use it for self-reflection there is some value here. It raises a few questions that may make you nervous about your unchallenged hypnotherapy assumptions.

The second part of the book is given to ways in which a hypnotherapist can arrive at the 'congruent self-confidence' needed to be effective in both practice and self-marketing. Here it's not so much about what you can do right but it highlights the many ways that you may be going wrong.

The author goes on to cover a range of topics including setting the patient up for successful hypnosis, hypnosis training, marketing flaws, answering telephone enquiries, etc. He recounts some of his own experiences with patients and gives general advice to the practitioner. He finishes the book with a selection of answers he's posted in web forums, which seems a bit like a space filler and for some reason the typeface became quite small in this section (at least on my Kindle).


The language used is uncomplicated (with some unnecessary swearing - which is odd given his criticism of the professional conduct of others) and use is made of analogy and example. You may not agree with some of the opinions expressed but overall this is a book about making a living in our business and as such it may be worth a read.


There is also some humour to be had as inevitably one finds echoes in ones own experience. The book is only available in ebook format (my copy was from Amazon for the Kindle) or as a PDF from the authors web site. The price is £7.20. The question must be, is it worth it? Well, If I had to buy a hypnotherapist a couple of pints to get a distillation of his years in practice I would count it cheap - on the other hand it's a book you are likely to read only once.


Released through Amazon 2012, 156 pages.


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Bits and Bobs...


 **Specialisms:** about 3 years ago I asked members to let me know if they had developed any particular specialisms in their work that I could record with their details. For example some of those already recorded are: drug addiction, infertility, ME / CFS, alcohol addiction, working with children, clinical depression, palliative care, cancer care, severe eating disorders, ADHD, tinnitus, to name just a few. Anything which - while it may have be on the training curriculum - you have made a deeper study of and have gained good practical experience in its treatment. Also if you can speak in an alternative language (to English), such as: French, German, Punjabi, Hindi or Australian, please let the secretary know.

 **Exam results:** Please inform the secretary when you have received written confirmation of exam successes at Diploma / PGCert levels and above, to expedite your membership upgrade.

 **Conference:** Those of you who receive our email bulletins will be aware that Matt Krouwel has organised a conference titled, '**Evidence Based Practice in Clinical Hypnotherapy**', to be held 25 & 26th May 2013, University of West London (UWL), Ealing campus – London W5 5RF Tel: 0121 477 6446 / 0778 909 7741 or email: matthew@birmingham-hypnotherapy.com
More information at the web site: <http://www.hypnosisconference.co.uk>

 **Clinical Supervisors:** we currently have around 130 full members who are willing to offer clinical supervision to others and this is a good time to check to ensure that you still want to be on the list and that the fee you require is correct. The list can be accessed from this link <http://www.bsch.org.uk/wwwboard/supervisor.htm>

 **Our thanks** to all members who have contributed to this newsletter. Please consider sharing some of your experiences and knowledge with us in the next one which will be ready for autumn. We are always interested in your stories, case histories, scripts, book reviews, books published and anything to do with our work. Please contact the secretary.

 **Contact the secretary:** T. Connelly, 125 Queensgate, Bridlington, East Yorkshire YO16 7JQ email: sec@bsch.org.uk tel: 01262 403103