

HYPNOTHERAPY TODAY

ASSOCIATION FOR SOLUTION FOCUSED HYPNOTHERAPY

Edition 35, Winter 2022

New website: Connecting you in 2022

Also in this issue:

SFH and Chronic Pain

Eat Your Way to Better Sleep

AfSFH Fellowship

AfSFH.com



Association for
SOLUTION FOCUSED HYPNOTHERAPY

SUPERVISORS' DIRECTORY

ST: Supervision type (e.g. Skype, One to One, Group supervision).

For the latest list of Supervisors, please refer to the AfSFH website.

**Tiffany Armitage**

Location: Ivybridge, Devon
M: 07396 209103
E: tiff@tiffanyarmitage.co.uk
W: www.tiffanyarmitage.co.uk/therapists-area
ST: Group, One to One, Online

**Alina Bialek**

Location: London
M: 07725 521804
E: info@alinabialek.co.uk
W: www.alinabialek.co.uk
ST: Group, One to One, Skype, Phone

**Alex Bronger**

Location: Stroud, Gloucestershire
M: 07917415926
E: alex@bronger.co.uk
W: www.abhypnotherapy.co.uk
ST: Group, One to One, Skype, Phone

**Cathy Cartwright**

Location: Rochdale
M: 07716 145 122
E: cathy@freshtinkinghypnotherapy.co.uk
W: www.freshtinkinghypnotherapy.co.uk
ST: Phone, One-to-One, Skype and occasional group sessions.

**Sandra Churchill**

Location: Trowbridge
M: 07515441825
E: sandrachurchill@virginmedia.com
W: www.churchillhypnotherapy.co.uk
ST: Group, One to One, E-mail, Phone, Skype

**Debbie Daltrey**

Location: Manchester & Cheshire
M: 07724 855395
E: hello@greatmindsclinic.co.uk
W: www.greatmindsclinic.co.uk
ST: One to One, Skype, Phone

**Rachel Dimond**

Location: Glasgow
M: 07882 659582
E: rachel@focused-mind.co.uk
W: <http://www.focused-mind.co.uk/>
ST: online/face to face one to one/group

**Karen Dunnet**

Location: Skipton, North Yorkshire
M: 07850 732761
E: karen@kdhypnotherapyskipton.co.uk
W: www.kdhypnotherapyskipton.co.uk
ST: Group, One to One, Zoom

**Jennifer Dunseath**

Location: Belfast
M: 07775 871119
E: info@solutionhypnotherapyNI.co.uk
W: www.solutionhypnotherapyNI.co.uk
ST: Phone, Zoom, Group, One to One

**Kim Dyke**

Location: Trowbridge
M: 07825957013
E: kimdykehypnotherapy@hotmail.co.uk
W: www.kimdykehypnotherapy.co.uk
ST: Group, One to One, Phone, Zoom, E-mail

**Sharon Dyke**

Location: Taunton
M: 07766250113
E: sdhypnotherapy@yahoo.co.uk
W: www.sdykehypnotherapy.co.uk
ST: Group, One to One, Skype

**Trevor Eddolls**

Location: Chippenham
T: 01249 443256
E: trevor@ihypno.biz
W: ihypno.biz
ST: Zoom, Phone, Email, One to one

**Catherine Eland**

Location: Southport / Chorley / Leeds
M: 07825047849
E: Catherine.eland@birkdale-hypnotherapy.co.uk
W: www.birkdale-hypnotherapy.co.uk
ST: Group, One to One, E-mail, Skype, Phone

**Jane Fox**

Location: Stockport, Manchester, Cheshire
M: 07870 882234
E: janefox2012@sky.com
W: janefoxhypnotherapy.co.uk
ST: Group, One to One, Skype, Phone, Email

**Rachel Gillibrand**

Location: North Somerset
M: 07905 527719
E: rachel@seaviewtherapies.com
W: www.seaviewtherapies.com
ST: Phone, Skype/Zoom, Group, One to One

**Lucy Gilroy**

Location: Wantage, Oxfordshire
M: 07811 071342
E: lucy@thechildreypactice.co.uk
W: www.thechildreypactice.co.uk
ST: Group, One to One, phone, Skype

**Nicola Griffiths**

Location: Portugal
M: 0773 855 5172
E: info@nicolagriffithshypnotherapy.co.uk
W: www.nicolagriffithshypnotherapy.co.uk
ST: One to One & Group Online + Phone

**Paul Hancocks**

Location: Hampshire
M: 07534571362
E: info@hancockshypnotherapy.co.uk
W: www.hancockshypnotherapy.co.uk
ST: Phone, One to One, Group, Zoom

**Heidi Hardy**

Location: North Devon
M: 077121 82787
T: 01598 752799
E: heidihypno@gmail.com
W: www.heidihardypnotherapist.co.uk
ST: Online (Group & One to One), Phone

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A Message from the Editor...

I hope you have had a wonderful festive season and wish you the most successful 2022. It's been a busy period for the AfSFH – I'm sure you've already discovered our new website, which contains all the support and information you're used to in a new, fresh format, with an updated and expanded Google-friendly SFH directory. Our Head of Marketing, Andrew Major, takes a tour of its new features in this issue, so be sure to check out his hints and tips. If you've not updated your directory listing yet, make it your New Year resolution!

As this issue goes to press there are rapid changes to government guidelines regarding Covid-19 and the Omicron variant. As ever we'll be keeping the website updated with the latest rules and advice so do keep checking as the situation develops.

The website's not all that's new – this year the Association is introducing a new Fellowship status for members who have made a significant contribution to SFH. Our Head of Professional Standards, Nicola Taylor, explains what it is and how to apply on page 13. We're looking to reduce our carbon footprint, too – aiming to minimise our environmental impact as much as possible over the coming months. As a first step this Journal and its postage envelope will be produced on recycled paper from now on, and we'll be researching other ways we can move forward more sustainably, so watch this space for developments.

Before you dig in to this issue's articles, I'd just like to make a quick apology to anyone who didn't receive a copy of the last issue of *Hypnotherapy Today* – we are aware that some got lost in transit. I've investigated the matter and there's no obvious reason why they didn't arrive, so it may have been something to do with the pingdemic. A downloadable copy is available on the website and hopefully everyone will receive their copy this time around! We'll be adding a list of all the previous articles published in *Hypnotherapy Today* on the website soon, too. There's a wealth of advice, information, support and reviews there so do go and have a browse when it's available; you'll be surprised at the breadth of topics covered.

Happy reading!

Sally

Sally Hare,
AfSFH Head of Communications



Super Support

In this feature we continue to get to know some of our fabulous Supervisors. All quotes printed with kind permission. Details of all our AfSFH Supervisors can be found in the Supervisor Directory at www.afsfh.com.

Super supporter: Trevor Eddolls, AfSFH Supervisor

Q. What do you feel are the greatest benefits of attending Supervision?

I think that one of the most important benefits of Supervision is to normalize whatever it is that's worrying the therapist/supervisee. Too often, therapists are working on their own, on a metaphorical island, separated from other therapists – certainly well away from other Solution Focused therapists. And this can make it hard to share any concerns they may have. There's no-one to say to them the usual things like, 'that often happens,' or 'that's happened to me twice, so far,' or even 'have you tried ...?' So, for that lone therapist, whatever it is that's concerning them can grow and grow until it becomes a keep-you-awake-at-night issue. Regular conversations with a Supervisor can put those concerns in context and, as I said, normalize them. Many Solution Focused Hypnotherapists have faced that problem themselves. It's not the end of the world – and that applies to most things they will come across.

Supervision really gives a therapist the opportunity to talk about what they have been doing with a client. It can reassure them that they have been doing the right things – the way they were trained to do them. It can also remind them of techniques that they may have forgotten from their training. After all, there is a lot of information in the CPHT training course. It's hard to remember it all!

As well as reassurance and reminders, Supervision can be a place where new ideas can be kicked around. Maybe a therapist has had a phone call from someone with a specific diagnosis – should they be working with them, and what might be the best techniques to use? And therapists may have been on training courses – CBT, NLP, Positive Psychology – and they have come away with some ideas that they would like to try with clients. It's an opportunity to talk round those ideas with someone who has more experience and see what they have to say. It's also an opportunity to discuss new facts that the therapist or Supervisor may have read in a book or online, and see whether this new learning can be used to update their practice.

As well as talking about clients and techniques that could be used with clients, it's also a great opportunity to talk about marketing techniques. Drawing more attention to your business might include finding groups to give talks to and soft advertising to them. Or discussing what it's best to have on the first page

of your website, and how many other pages you should have. Or considering social media in general and how to get the best return for your time. Then there's the issue of adverts on Google.

And, of course, the therapist can talk about their plans for their business. Should they be on Zoom? Is working from home the best way forward? Does working from more than one practice in different towns boost your customer base? And, of course, 'should I give up my other job?' Your business development, your personal development, and your clients are the core of what's usefully discussed in a Supervision session.

I still wonder whether Supervision is the right name for it because it sounds like you're not quite fully trained enough to work on your own without someone looking over your shoulder from time to time, to ensure that you're doing it properly. Nothing could be further from the way that Supervision sessions work.

Q. What do you enjoy most in your role as a Supervisor?

I've always enjoyed meeting people and getting to know them, so, I'm always happy when a message comes from a new therapist looking for a Supervisor. Sometimes, people don't really have any issues in a Supervision session and it's good to see them confidently dealing with their clients. Other times, it's good to help a supervisee think their way through an issue, and for them to come up with a solution to the problem that they have brought. I sometimes float ideas and suggest new areas they might think about, but Supervision works best for everyone if careful questioning leads the therapist to come up with their own ideas that they are keen to take forward in their practice. The Supervisor doesn't know everything! So, those moments when a therapist recognizes the best way forward for them are very enjoyable.

Here's what some supervisees have to say:

'I love one-to-one Supervision with Trevor. He has so much knowledge and experience. I blend various other disciplines with SFH, particularly NLP, as Trevor does. Trevor has great clarity about how to maintain the principles of Solution Focused Hypnotherapy while introducing other supporting practices, and how to communicate and differentiate practices to clients without losing SFH's unique impact. Trevor has been able to advise me on complex ethical concerns and helped me ensure my practice is effective and safe. Trevor is both challenging and reassuring, making me think and reflect, while getting concerns and worries in perspective.'

Jane Pendry

'I would definitely recommend Trevor to anyone looking for Supervision support.'



About the writer:

Trevor Eddolls is the Head of IT & Social Media for the AfSFH and is a regular contributor to the Journal. He runs his hypnotherapy practice in Chippenham and offers Supervision via Zoom, phone, email and one-to-one.

How to Get the Best out of Supervision

By Jane Pendry



I understand how important regular Supervision is in helping me become a successful practitioner, and I asked Helen Green, CEO of the AfSFH, to highlight the Association's stance on this important topic:

'Formal Supervision must be held with a qualified Supervisor, and the AfSFH states that all qualified members (irrespective of how long they have been qualified) complete a minimum of six hours of formal supervision per year. This is part of our Membership Agreement and Code of Conduct policies. Given the huge benefits of attending regular Supervision, we are sure that most people would far exceed this minimum amount in a year. Any other 'peer to peer' discussions are not counted as formal Supervision (unless this is part of dedicated group Supervision with a qualified Supervisor) – informal chats with colleagues are helpful and beneficial, of course, but formal Supervision is still required (with a qualified Supervisor and where attendance is recorded). Peer-to-peer discussions not led by a Supervisor are not counted as formal Supervision; they can, however, count towards your continuous professional development (CPD) if these discussions are reflective and can inform your practice. Members can log such activities and other types of CPD, like attending training courses etc, in their CPD log (there's one available on the AfSFH website). Undertaking regular Supervision and developing knowledge via a variety of CPD activities are the hallmarks of best practice – helping to show our clients that we are committed to high levels of professional conduct and demonstrating our commitment to continuous development throughout our careers.'

Three years into my Solution Focused Hypnotherapy career, I have learnt a few things about Supervision.

Early in your career, group Supervision is the obvious option. You stay connected with your cohort. Early challenges are similar. You are all still mastering the technicalities of SFH. The dynamic of group Supervision reassures and enthuses you. As you gain confidence, you begin to niche and position yourself in the market. You start to look for one-to-one Supervision to help you develop your practice.

Having chosen a Supervisor from the AfSFH Directory, or through recommendation, explore what Supervision options are on offer. Before committing to a one-to-one session, see if you can join a group, for example, or share a session with one or two others to get a sense of whether the Supervisor is the right one to help you move forward. Many Supervisors offer a wide range of methods, such as Supervision held online, over the phone or in person.

Prior to your session, always reflect on your practice and prepare yourself. Try not to let one-to-one sessions become a freewheeling discussion or you won't get the best out of them. Stay focused on getting the feedback you need to improve your practice by sharing your 'Best Hopes' and specific questions

with your Supervisor in advance. Allow them sufficient time to reflect on them before you meet.

The following questions might help to guide an exploratory conversation or first session with a new Supervisor. Please don't grill them – it's not an interview. However, I have learnt that understanding the Supervisor's terms & conditions, and discussing expectations from the outset, avoids later misunderstandings and ensures sessions are focused and productive.

- How long have you been in practice; what area(s) do you specialise in now?
- What is your approach to Supervision? A Solution Focused conversation focused on Best Hopes, a more informal discussion, or a structured Q&A?
- What are your prices for Supervision? How and when do I pay?
- Are Supervision sessions one hour; can they be longer, or just half an hour for a specific issue?
- Can I contact you occasionally between sessions with specific queries by phone or email?
- Are there specific prices for email exchanges or conversations in between formal Supervision sessions? If so, how much is this, what's included or how is time accrued?
- Do you have a contract, or T&Cs I can refer to?

Great communication, and a bit of reflection and pre-planning, at any given stage of your practice, will ensure all Supervision sessions are productive and useful. Your Supervisor is there to help and support you, and don't forget they aren't just there to help you with a specific client query – they are there to help you develop your confidence, help you expand your business and to help you generally develop into a confident, professional and successful SFH practitioner. Whoever you choose as your Supervisor, you are guaranteed to learn something new that you can incorporate into your practice, that will benefit you and your clients.

You can find out more about Supervision on the dedicated Supervision page on the AfSFH website:

<https://afsfh.com/supervision>



About the writer:

Jane Pendry trained with CPHF Oxford and works online across the UK, Europe and the USA in unregulated states. She focuses primarily on anxiety and complex phobias, especially emetophobia, and trauma.

How can we help you today?

Select an option

It's here!

Head of Marketing, Andrew Major, introduces our new AfSFH website

You'll already be aware from our update emails and Facebook posts that the Association's been busy of late, developing the new AfSFH website which launched back in November. It's been a considerable undertaking and there have been some teething problems along the way, so thanks to all our members for reporting them, and for your patience and understanding while they were addressed. Most of these issues have now been resolved, so it seems timely to take a look at what's new.

Supporting our members, raising awareness

We had two primary goals in creating the site: to offer the most supportive platform possible to our members, and to continue to raise awareness of Solution Focused Hypnotherapy to the wider world. In the words of Trevor Eddolls, Head of IT:

'The new website is a great step forward for the AfSFH and its members. The site still has all the information that members and the public could want to know about Solution Focused Hypnotherapy, but it also gives individual members the opportunity to really showcase themselves and attract new clients. All this in a modern-looking and attractive format.'

So let's take a look around. Visitors to our Home Page will find an attractively illustrated site (I'm particularly pleased with our new line drawing graphics), giving easily navigable access to information on SFH and our membership, and all our regularly updated articles and blog posts. Most importantly the 'Find a Therapist' button is prominent at the top, giving the public easy access to our updated and expanded Members' Directory. Also at the top of the Home Page is the Member Login button. If you've not already done so you'll have to reset your password via the link sent in the email back when the site launched. If didn't receive it and it's not in your spam folder, just click on 'Forgotten your password?' and you'll be sent a reset link.

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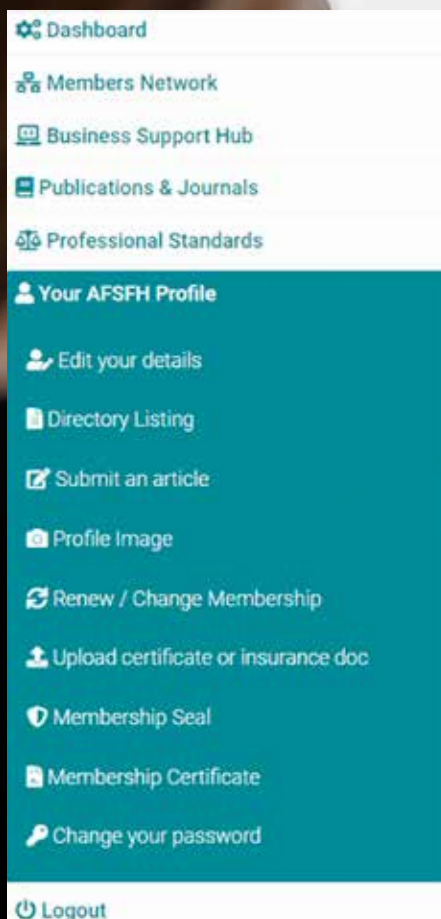
Once you're in you'll find all the features and resources you're used to from the AfSFH: our Members' Network and Business Support Hub, offering a wealth of information for therapists; the publication and journal archive, and our professional standards resource. Nicola Taylor, Head of Professional Standards, says:

'I love the new Standards area of our website; the same important information but clearer and more user-friendly. The layout makes it much easier for members to find the answers to those all-important questions about ethics, safeguarding, GDPR and advertising standards.'

You'll also find your own profile details, and here's where there's been a significant amount of development. There's now much more space for you to make your Directory listing truly personal to you – showing potential clients who you are and why you are the right SFH for them. Importantly your profile and information provided is now visible to search engines, so in time this will be a useful way to attract more visitors to your service.

Search engines now look for content that is meaningful and engaging. To improve the chances of your profile being ranked by Google, be sure to include specific content relating to the questions people are asking Google. Without relevant content, your profile has less chance of being found. Think about the questions your ideal clients are searching for, for example 'Does hypnotherapy work for needle phobia?' Include information on your profile which talks about these issues and your areas of specialism. Remember, this is your chance to stand out and build rapport from the first click, so taking time to create specific content that is relevant to you and your practice will help.

You may like to review and refresh your profile and content regularly – which Google thanks you for! Take time to create articles and blogs about hypnotherapy – it's a great way to



boost your presence on the AfSFH website and across Google. You can now easily submit a new article from your dashboard once logged in. You can also now manage your membership, upload documents such as certificates and proof of insurance, and download membership seals and certificates on demand.

These developments are a good foundation and just the beginning. Over the coming year a schedule of improvements will continue to optimize our ranking and domain authority on the internet, so AfSFH members are more easily found by potential clients searching for support on the major search engines such as Google. We will also continue to create new content to increase our presence and authority on these subjects, whilst working to improve the functionality that powers the site.

We're on this journey together

To reach our goal of increasing awareness of AfSFH and raising visibility of members, we'll need your help too. Here are some ways that will help us improve the visibility of both our website and your practice!

1. Update your profile, including your photo (pictures and some profiles did not carry over from the old website). The new SFH Directory is more advanced and flexible than before, and is your chance to showcase your practice. There is far more scope to include more detail and explain how you work/help clients. You can add a personal introduction, information about yourself, up to three practice locations, external links such as your personal website and social media accounts etc. To date only a small percentage of members have updated their profiles, so if you've yet to do so, invest some time in using this facility to your maximum benefit.

2. Add the seal to your website via the link in the 'Your AfSFH Profile' drop down menu – it demonstrates your commitment to a set of professional standards and development, and will help improve our domain authority.

3. Write and submit an article. This can be, for example, about how hypnotherapy can help certain conditions, or might explain how hypnotherapy actually works. We are all too often asked similar questions by new

"I'm so excited about our new, improved website – it looks and feels so much fresher, still packed with great content and is much easier to navigate your way around."

Sacha Taylor, Head of Finance.

clients about the process, so you can turn these topics into short articles and submit for publication via the 'Submit an Article' link in the 'Your AfSFH Profile' drop down menu. The article will include your practice details and appear on your Directory listing.

4. Certificates – download your professional certificate on demand via the link in the 'Your AfSFH Profile' drop down menu.

AfSFH Articles & Resources

Welcome to the AfSFH Articles & Resources page!

Written by experienced and practicing solution-focused hypnotherapists, our blogs are designed to help explain to members of the public exactly how solution-focused hypnotherapy could help them. They are also intended to raise public awareness about Solution Focused Hypnotherapy and its benefits, and to support our therapists and their clients.

Members of the AfSFH can upload their blogs in their dashboard. Once approved, they will be published and links to the blog will be added to the member's profile.

**Get yourself known
- publish a blog on
the website!**

“
Keep up to date with the latest news and views on solution-focused hypnotherapy and more.
”



The importance of rapport with your therapist

Rapport is defined as a relationship of mutual understanding or trust and agreement between people. Rapport building is achieving mutual trust and understanding between two or more people that leads [...]



My steps towards being a hypnotherapist

Ten years ago, I was a Detective Constable with Essex Police. I thought this was my career set for life. I enjoyed what I was doing with a true sense [...]



Hypnotherapy and Fertility: A Personal Journey

A quick search of the internet will tell you that infertility rates in the UK are rising and about 1 in 7 heterosexual couples will have difficulty or be unable [...]

Looking ahead

As we move ahead, we will continue to develop the website and monitor how its content is used to focus our development of content and functions. We are committed to developing a focused SEO strategy to increase and maintain our ranking, ensuring our membership has the best possible access to potential clients searching online.

So if you've not yet done so, take a look around and update that all-important profile of yours! We'll be seeking your feedback on the new site and its features in an upcoming survey but if you find any glitches we've not yet discovered, please let us know via an email to it@afsfh.com.

“The new site looks great and is so easy to browse – if I was looking for information or a therapist I'd feel confident I was in safe hands.”

Sally Hare, Head of Communications

I'll give the final word to our CEO Helen Green:

'I'm so proud of the AfSFH Executive team for all their hard work in creating our new website. As with our clients, whilst we may see lovely changes on the surface, it is often the changes within that are most important. As well as an improved look and feel on the surface, I'm particularly excited that we've managed to overcome some significant technical challenges on the backend of our site, as it is these unseen changes that are likely to provide significant benefit. As well as helping us with the administrative running of the organisation, the new changes will, crucially, enable us to structure the whole website for improved SEO, meaning that listed members will be found even more readily through search engines, enhancing their profiles and the AfSFH as a whole. This has been a major activity for the team over the past few months and I hope members will be pleased with the results. This is a great step forward for the AfSFH and is a key part in our future plans in continuing to raise the profile of the organisation and the work of our members. I'm proud to be part of such a great Executive team and SFH community, and we will continue to ask “what else?” as we press forward in our work to support members and in getting the SFH message out there.'



About the writer:

Andrew has a professional background in marketing. He is eager to continue the wider promotion and awareness of SFH and the work of the AfSFH and its members.

The Flowing Stream

A Metaphor

By Andy Hill

This metaphor can be used for a wide range of purposes relating to a person's intention to change. It emphasises the power of action, in taking small steps and focusing on what we can do, not what we can't. It can be used to encourage the letting go of emotions arising from the past that are holding us back. It can ignite a little courage and speaks of being open to good advice from others.

Note to storytellers: change characters and pronouns to fit with the listener.

The gentle stream had flowed for a long time. It originated somewhere at the top. Its energy flowed all the way down. The crystal-clear water shared its nutrients freely. It hydrated. It cleansed. It washed away, and even made it possible to play. The dragonflies were numerous there, translucent, and appeared each year.

It was some time later that the change became evident. It was gradual at first but then it became obvious. All of us, even the animals, could see that something had changed. The stream still flowed, but flowed with less energy. The stream still flowed, but with less joy. The water voles and the badgers (who were sturdy) considered moving to another place, and the people wondered what to do. The villagers in the lowlands held a meeting to discuss what had happened. The village elders made predictions, performed rituals or looked up at the sky.

Then that man from the village stood up. You know the one. He. He just stood up there and said, 'I will take a journey to the top and find out what is preventing the flow.' The other villagers were taken aback by his willingness to go and see. No one from the village had ventured that far up in a long time. The next day he set off. But before doing so, his grandmother whispered in his ear, 'when you get there, look for the One Thing.'

After several days of walking, the man met a person from the Middle Village and

asked, 'have you noticed a change in the flow? I am journeying to the top to find out what has changed.' The person said his village had also noticed a change in the flow and thought that it might be blocked at the source. He pointed upwards, up there, and encouraged the man, with hand signals, to continue on.

After two more days, he met a person from the High Village and asked, 'have you noticed a change in the flow? I am journeying to the top to find out what has changed.' The person said that his village had noticed a change in the flow, a change in the energy. The person gestured for the man to go further, just beyond the ridge.

After a few hours, the man could clearly see. It was those storms from before. They had washed large logs and a mass of vegetation into the stream and blocked the flow. The man looked with dismay and wondered how he, with only his bare hands, could move such heavy obstacles. He carefully entered the water and tugged at one of the fallen trunks. He braced himself, he willed himself, he used all his might, but the log felt immovable. He tried to move another and another but still nothing gave. He felt fatigued and despondent, and sat down to rest. In that moment, the words of his grandmother came back to him. 'When you get there, look for the One Thing.' The 'One Thing.'

Although he didn't know exactly what that meant, he started to look differently.

He started to see differently. He noticed the smallest twigs and sticks and thought that moving these would be of no benefit. But something inside him urged him to continue, and with every small leaf and twig he removed, he noticed a small increase in the flow. This gave him a surge of encouragement, excitement and motivation.

One at a time, he pulled out the smallest, then the small, pieces, and all of a sudden, with a sense of wonder and a wave of relief, a space gave way in the middle as one of the larger logs moved to the side, toppled over the edge and floated downstream. This gave rise to more and more momentum and other sticks and logs, pulled by the change in energy, found their own way through, and flowed away. Within a few minutes, the logjam was no longer there. It had completely gone. It was replaced by the right flow, the right level, the right sounds, the right time.

Downstream, the effects were quickly felt all the way to the foot. And in a matter of days, the pink flowers, the red glowing faces and the smiles returned. The blue feathered-birds, the voles and the badgers said they wanted to stay. After all, this was their home. Where they belonged.

That beautiful stream was clear again. Feel the flow. Again. Feel the flow. Flowing.



About the writer: Andy Hill is based in Somerset and qualified as a Solution Focused Hypnotherapist with CPHT in Plymouth in July 2020. He describes the course as 'life-affirming with a miraculous, healing quality,' and has since named his primitive brain Cyril.



Chronic pain

By Karina Blunn

This article will explain pain, chronic pain, and the gate theory, and offer recommendations for Solution Focused Hypnotherapists

Defining pain

The International Association for the Study of Pain's revised definition encompasses a plethora of pain types:

*'An unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage.'*¹

This first new definition in 40 years encompasses pain perception when there is no clear evidence or tissue damage, such as in primary chronic pain.

Pain sensations can be broadly divided into two types. Ad fibres mediate 'fast pain' which is bright, sharp or stabbing. I remember the fibres by thinking of 'Aargh! pain as in A.' The second type is the dull, throbbing, aching type mediated by C-fibres: these signal chronic or 'slow pain', or as I like to think of it, 'Coooooor! pain as in C.'

Nociceptive pain refers to pain that is associated with tissue damage or inflammation. Nociceptors detect a stimulus to the tissue and activate neurons, sending signals to the brain which

enable us to take action, either by removing ourselves from the stimulus or seeking help.² This pain is acute and lasts for a short period of time.

Pain that persists or recurs for more than 3 months is considered to be chronic. The World Health Organisation in 2020 defined chronic pain as:

'Pain in one or more anatomical regions that is characterized by significant emotional distress (anxiety, anger/frustration, or depressed mood) or functional disability (interference in daily life activities and reduced participation in social roles). Multifactorial – biological, psychological, and social factors contribute to the pain syndrome.'

Chronic pain and hypnotherapy – the need for standardised evidence

The reference to the limbic system's responses of anxiety, anger and depressed mood link the very physical sensations with our emotional responses. This therefore allows Solution Focused Hypnotherapists to theorise about their role in managing chronic pain. The National Institute for Care Excellence (NICE)³ notes that there is no substantial evidence for 'hypnotherapy/hypnosis' *per se*. Cognitive Behavioural Therapy (CBT), however, improved quality of life for people with chronic primary

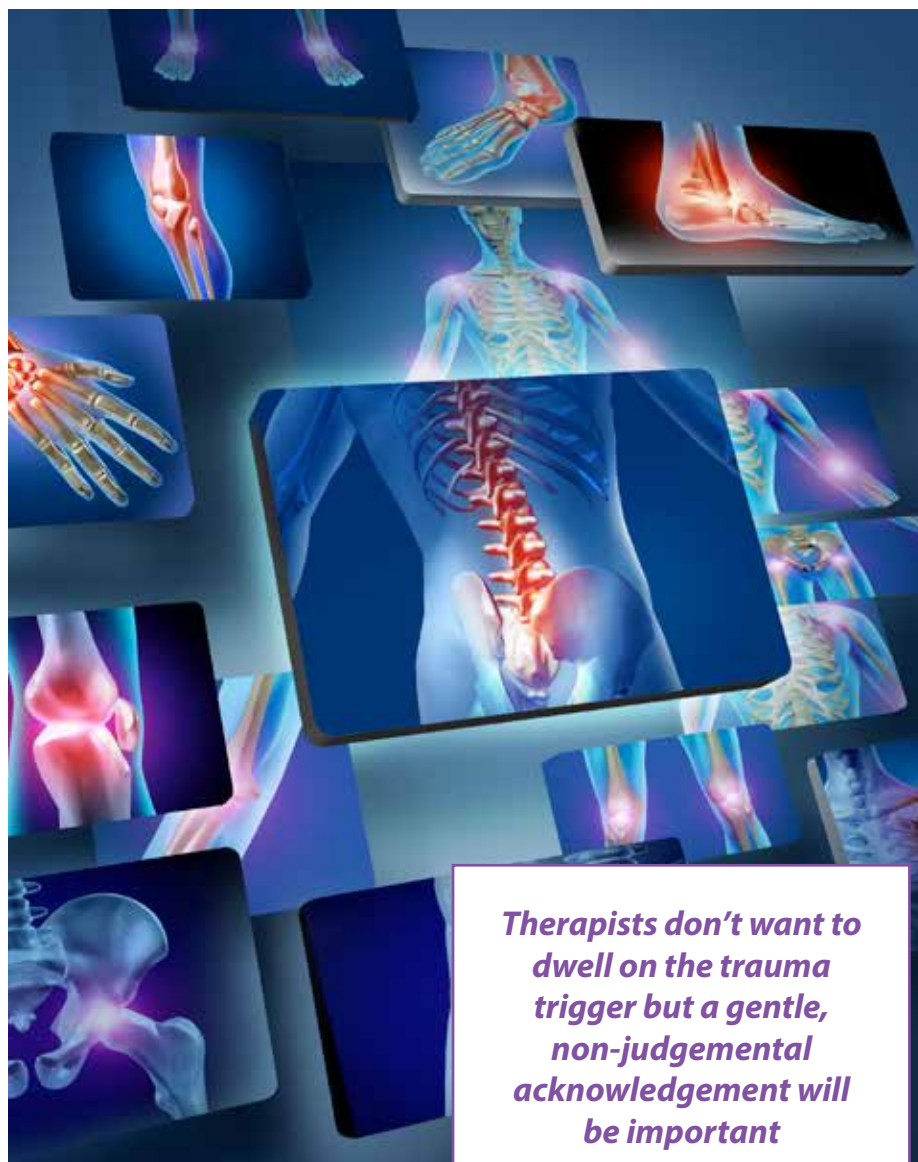
pain but demonstrated less evidence for improving sleep. Now I know you will be wanting to interject with '... but Solution Focused Hypnotherapy helps with sleep and therefore pain!' NICE are appointed to establish the cost benefit of interventions, so evidence for treatment is calculated using a cost benefit formula. Without evidence, of which randomised controlled trials (RCTs) are the preferred measure, they will not recommend an intervention. This does not mean that Solution Focused Hypnotherapy is ineffective, it means that it hasn't been researched alongside an economic evaluation and/or in the format of an RCT. Elkins *et al*⁴ in 2007 reviewed 13 studies and found that 'hypnosis' consistently decreased pain in a variety of chronic pain problems. The 'hypnosis' benefits outweighed other interventions such as physical therapy and education. If we take the review at face value, it sounds positive for 'hypnosis', however there was lack of standardisation of the intervention. The number of participants was also low and lacked long term follow-up, thus reducing its generalisability for chronic pain management in the NHS. Elkins *et al* also did not specify what sort of 'hypnosis' they reviewed.

There is positive news from NICE. There are many interventions which NICE categorically advise against. Hypnotherapy is not within their list.

Being clear about the cause of pain

What can Solution Focused Hypnotherapists do to help people with chronic pain? Firstly, the client must demonstrate that they have had an alternative diagnosis excluded. Many cancers or other conditions can present as persistent pain which in itself may be managed by SFH, however for obvious reasons this should be diagnosed and appropriate medical treatment offered first.

My previous nursing role was a specialist nurse in rheumatology for many years and I now work as an advanced nurse practitioner in primary care as well as being a SF Hypnotherapist. This by default means I see many patients with painful conditions, often chronic. Once a differential diagnosis is excluded I am comfortable to say to a patient that '... it is good that we have excluded anything worrying and it is likely that you have chronic pain that we can work together to manage.' In my nursing career I have learnt that chronic to many people means 'terrible', so it is important for them to understand that chronic pain is persistent, unexplained, but not worrying, pain and that there are non-drug ways of managing it.



Therapists don't want to dwell on the trauma trigger but a gentle, non-judgemental acknowledgement will be important

Helping those living with chronic pain

As Solution Focused Hypnotherapists we won't be focusing on what has gone, but many clients will have had a physical or psycho-social trigger for the pain, which may be disclosed as they establish a rapport with their therapist. It is important to consider how this disclosure may impact on the therapist personally and how they may respond. Therapists don't want to dwell on the trauma trigger but a gentle, non-judgemental acknowledgement will be important, initially to facilitate trust in the therapeutic relationship. The therapist may wish to contact their Supervisor for personal and professional support as they may be the first person that the client has disclosed to; there may be a risk of transference of their emotions onto the therapist whilst disclosing.

As we know, the Initial Consultation (IC) underpins practice in SFH. There is some useful information which may support the information given during the IC. Explaining the pain gate theory

is helpful and may give the client confidence, knowing they have the power to make important changes. In my nursing role pre-hypnotherapy training, my room was opposite a busy road. I would say '... if you had injured yourself, and then a loved one went to walk into the road, you would immediately save them, and for that moment your pain would not be dominant, and it's this overriding that we want to encourage.' This scenario would be the limbic system kicking in appropriately, but we don't want to encourage its involvement in managing pain. It is, however, useful for clients to understand the concept of being able to override pain messages. The pain gate theory can be adapted using what is known about our client, making it relevant to their specific pain for example back pain.

The pain gate theory

The pain gate theory explains how nerves from all over the body connect to the spinal cord, which sends impulses (messages) to the brain identifying a

stimulus ie chronic pain. If we imagine there are physical gates on these impulses' routes to the brain then we can imagine we have the power to open and close these gates in chronic pain, blocking the impulses' journey. If the gates are closed, then the impulses are reduced, which in chronic pain is extremely beneficial in reducing pain. It is unlikely that acute pain such as a burn or finger prick will be significantly blocked by a closed pain gate, therefore closing the gate is safe.

The charity Versus Arthritis offers training in chronic pain which includes the recommendation for understanding pain in five minutes. This is supported by an animated video explaining chronic pain which may help the therapist and the client. It can be found on YouTube, titled *Understanding Pain in less than 5 minutes, and what to do about it!*

Stress, tension, anxiety, worry, anger and depression – states influenced by the primitive mind – are a common way of opening the pain gates and allowing pain messages to get to the brain. Boredom and focusing on the pain also keeps the gate open, as does inactivity. In order to close the gate we need to consider ways to relax, feel content and be generally happy. Being involved in physical activity or distracting actions such as watching TV, reading and taking the right amount of exercise can all assist with helping close the pain gates. SF therapists will have quickly identified the 3 Ps amidst the above NHS⁵-recommended activities, and therefore management of the SF sessions should be intuitive.

Conclusion

In summary, pain is complex and chronic pain is multifactorial. There is useful information in the video mentioned above which will enhance the IC and it is therefore worth doing a little homework! The principle of SFH remains the same when helping someone with chronic pain. SF therapists should avoid being seduced by the problem and continue to facilitate emptying the stress bucket and initiating positive interactions, activities and thoughts.

On a research note, gathering robust, rich and consistent quantitative and qualitative data will facilitate Solution Focused Hypnotherapists being taken seriously by research purists and maybe, one day, even NICE will recommend SFH as a suitable intervention for chronic pain.

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Being involved in physical activity or distracting actions such as watching TV, reading and taking the right amount of exercise can all assist with helping close the pain gates.



About the writer:

Karina qualified as a SFH at CPHT Clifton in 2020. She has been nursing since 1986 and now works as an (advanced) nurse practitioner in primary care in Hereford.



The New AfSFH Fellowship

By Head of Professional Standards,
Nicola Taylor

Do you know a fellow Solution Focused Hypnotherapist who has shown 'significant commitment and contribution to SFH, the AfSFH and the hypnotherapy profession?' If so, you will soon have the opportunity to celebrate this outstanding individual by nominating them for AfSFH Fellowship status.

The AfSFH has been supporting members for over 10 years and we now feel that the time is right for us to recognise members who are not only excellent practitioners in their own right, but who have worked hard to share their expertise, support other Solution Focused Hypnotherapists, and bring credibility to our profession. Our choice of the term 'fellowship' sums this up perfectly as, although definitions vary, words such as 'shared interest,' 'purpose,' and 'companionship' are frequently mentioned. In true solution focused fashion we know that the individuals who immediately spring to mind will be those who are passionate about sharing their knowledge and supporting, not only their clients, but those involved in the wider hypnotherapy community too.

Nominations

If you would like to nominate somebody, please check first that they meet the following criteria:

- The HPD qualification
- Qualified to Level 5; this can be through qualification as a Supervisor or Advanced Hypnotherapy Diploma
- Qualified as SFH for a minimum of 10 years
- Have been a member of the AfSFH for at least the last 5 consecutive years
- Also, if still in practice, they must be able to evidence the professional requirements for Supervision and CPD for the last 12 months

If your nominee meets these requirements, you can tell us all about them in a 500-word written statement highlighting their significant commitment and contribution to SFH, the AfSFH and the wider hypnotherapy profession. It may be that your nominee has made a significant contribution to the training and teaching of fellow SFHs, either by lecturing in one of the CPHT training schools or by delivering CPDs, adding to wider and more in-depth knowledge of SFH. Perhaps the practitioner you have in mind has a history of supporting the AfSFH as a committee member, a speaker at AfSFH events or as a regular blogger or Journal contributor. Your nominee may be someone who has contributed to raising the profile of SFH in the wider community by giving talks at events, or by publishing books and articles, or perhaps making radio or TV appearances. They

may be a SFH who works in schools, hospitals, alongside GPs or in wider care settings, raising awareness of SFH within the community. Research is another area where your nominee may have made a significant contribution. This could include regular use of research tools such as CORP or they may have conducted or taken part in their own research study into SFH or related topics. The person you have in mind may, of course, have contributed on many levels and this list is by no means exhaustive.

Consideration

Each nomination will be considered on its own merit and once you have submitted your statement the Executive Committee will vote to make the final decision as to who will be awarded Fellowship status. All nominees and subsequent awards are subject to final, majority, Executive Committee vote and the Executive Committee also reserve the right independently to nominate an individual that they feel meets the criteria for Fellowship.

Benefits

Being awarded Fellowship of the AfSFH means that, not only does the individual gain the prestige of this award, they also will not have to pay membership fees for the duration of their membership.

The strict criteria against which awards will be made means that only a few Fellowships will be announced each year, so if you know that 'someone' who you think deserves recognition, start putting pen to paper and let's celebrate!

Applications for nominations can be submitted from 01 February 2022 and will close on 28 February 2022. Please send nominations to ceo@afsfh.com.



About the writer:

Nicola has an extensive background in teaching and education. Her goals are to promote high standards and best practice amongst AfSFH members, and to ensure that the Association supports members in achieving these.



Eat Your Way to Better Sleep

By Janet Adams

Have your weight loss clients fully embraced the power of sleep in attaining their goals? Do your sleepless clients often complain about weight gain? Are there some foods that clients with chronic pain can be mindful of? We are not dieticians or nutritionists, but knowing some background can help us determine which questions can be helpful. Because I rarely see weight loss clients, I felt the need of a handy refresher. This is it – with some familiar and some not so familiar points you might want to include for instilling confidence/motivation/building rapport.

How poor sleep can impede weight loss

- Regularly sleeping less than 7 hours a night means we have more of a tendency to put on weight and increase our chances of becoming obese.
- Poor sleep makes it harder to make wise decisions when it comes to food choices. We're more likely to give in to cravings for unhealthy food.
- Lack of sleep increases cortisol levels in our body, leading to weight gain (particularly belly fat) and more cravings.
- The more fat we have, the more appetite-regulating leptin we produce, but it's less effective (I just 'lept in' to say you're full versus it's too much I can't jump, can't speak). This unbalances the relationship between leptin and ghrelin (the 'hunger hormone'), and your appetite increases.

How diet can impact sleep

It may be useful to link these ideas to symptoms a client has mentioned, in a positive way, during a session.

- **Gut Brain Axis** – our stomachs and brains are connected. The more unbalanced our gut brain microorganisms etc are, the harder it is for our central nervous system to cope with stress, and the more difficult it is to sleep. What helps? Fermented foods, olive oil, probiotics and omega 3's (the Mediterranean diet).

- **Carbohydrates** – High amounts of 'carbs' do make us sleepy. But if we eat them late at night chances are that we can wake up more often, and not get enough deep sleep. This restricts our body's time to recharge and re-energise, boost the immune system, recover and repair. A moderate amount of unrefined carbs helps us sleep. They stimulate insulin, which clears the way for tryptophan to reach the brain and help us produce serotonin.

- **Protein** – Too much protein in the evening or at night, because it's hard to digest, stimulates the brain and lowers our ability to sleep – it also reduces the quality of our sleep when we do nod off. Better deep sleep is good for muscle growth, so if, for example, clients are working out, less protein later in the day might actually give them better results as well as aid sleep.

- **Fat, sugar, salt** – Vegetable cooking oils, processed meats, cakes etc can worsen inflammation in the body. Chronic inflammation, for example fibromyalgia, can be too painful to sleep through. We can motivate a client by reminding them that REM also produces pain-relieving endorphins. Less fat, sugar and salt = less pain.

Foods to Aid Sleep

There is a very simple way to break down how some foods aid sleep.

The Five Steps

1. Tryptophan, an amino acid, helps us make serotonin. We can only get tryptophan by eating or drinking certain foods.
2. Calcium helps process tryptophan (and melatonin). Magnesium boosts serotonin and potassium regulates it, helping us stay asleep.
3. We use serotonin to make melatonin.
4. We can also eat foods containing melatonin.
5. Melatonin controls our sleep cycles.

Here's a list of some foods with most or all those vital ingredients in varying degrees

	Tryptophan	Calcium	Magnesium	Potassium	Melatonin
Chicken/turkey	✓	✓	✓	✓	✓
Eggs	✓	✓	✓	✓	✓
Cherries	✓	✓	✓	✓	✓
Milk/yoghurt	✓	✓	✓	✓	✓
Almonds	✓	✓	✓	✓	✓
Kale/ Spinach	✓	✓	✓	✓	
Fish	✓	✓	✓	✓	✓
Bananas	✓	✓	✓	✓	✓
Kiwi Fruit	✓	✓	✓	✓	
Porridge/Oatmeal	✓	✓	✓	✓	✓

It's also worth bearing in mind not to eat a few hours before bed – this will give the body time to get the benefits of sleep-inducing foods and avoid heartburn/acid reflux. Research also suggests that it might be best to have our largest meal in the morning.

The Take Away

Understanding some of the key roles of nutrition can be a useful segue into promoting the benefits of Solution Focused Hypnotherapy for improving:

- Sleep.
- The ability to focus on long term goals, eg weight loss, not short-term rewards.
- The ability to make healthier lifestyle choices.

While it can be useful to have an awareness of how our diets can influence our sleep patterns, as SFH we, of course, should not give dietary advice unless we are qualified, as some people have certain health conditions or take medications that mean certain foods should be avoided. If a client specifically wants to discuss their diet, I'd recommend that they discuss it with their GP or a qualified dietician or nutritionist.

Further reading

I love what Ian Taverner is doing and creating with his *Cookfulness* book and social media posts (you can find him on Facebook and Instagram – search cookfulness). He lives with fibromyalgia and approaches dealing with chronic pain with a mindset of maximizing what you can achieve, boosting your overall wellbeing, and embodying how nutrition, mindset, action and mental health can be optimized (and fun!). I also recommend Laurann O'Reilly's blogs on her *Nutrition by Laurann* website (<https://nutritionbylaurann.ie>).

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About the writer:

Janet qualified as a SFH from CPHT Belfast in 2019. She always intended to focus on online work, and thanks the universe for Zoom.



Photo credit: Colin Moody

Meet the Member:

Getting to know the AfSFH Head of Communications, Sally Hare

How do you see your role as Head of Communications for the AfSFH?

Head of Communications is a new position within the Executive so I'm in the fortunate situation of being able to grow into a developing role. Firstly, I'm responsible for producing *Hypnotherapy Today* and keeping all the information in there up to date. I'm also responsible for implementing the overall communications strategy for the Association, whether that be creating content for our members or the general public. Writing and Solution Focused Hypnotherapy are two great passions of mine, so applying was a bit of a no-brainer.

What attracted you to work as a Solution Focused Hypnotherapist?

I've been interested in meditation, mindfulness, yoga nidra and the like for so many years I can't remember when the fascination started. Hypnotherapy seemed the natural way to turn when I was dealing with a challenging time in my life, and it helped me greatly. I'm very much a people person and dealing with words for hours on end can be rather isolating; chatting and being nosey – um, curious – while helping people feel better about themselves seemed a pretty fantastic career

choice to me, not to mention offering the opportunity to work around my life and caring responsibilities. I'd not come across Solution Focused Hypnotherapy till I was researching available training, and the concept immediately made a lot of sense. That belief was very much reinforced during the Bristol CPHT course.

I'm sure readers have had the experience of hypnotherapy being erroneously considered a hippy-dippy alternative therapy – all sandals and joss sticks – but I'm a total neuro-nerd, more likely to be reading psychology research than wafting around in a tie-dye bandanna.

Why is the AfSFH important?

It's our tribe! There are so many positives to being a member of the Association. For a start, it gives potential clients reassurance that their therapist is committed to a set of professional standards and personal development as a practitioner. It's our rock, too – who wasn't grateful for the guidance and support offered during Covid? The new website's still chock full of information, resources and blogs and our new funk-up 'Find a Therapist' function will, I'm sure, send clients our way. I very much enjoy being a member of the Facebook

group – it's so lively and supportive. There's a real sense of community there and it's great to see all the information-sharing and networking that goes on.

Of course we've also got *Hypnotherapy Today* for articles, the Supervisor directory and the like, and it's good to know that whatever challenges we face as a SFH, the AfSFH 'has our back'.

What is your background?

Having a son with additional needs means my career path hasn't been that smooth; I've had to fit work around my caring responsibilities. I've supported parents of SEND children in a variety of guises and facilitated self-management courses for other carers. In 2005 I took the MA in Creative Writing at Bath Spa University which led to freelance editing, proofreading and book doctor work. I was responsible for Bristol Samba's communications in a voluntary role for several years, and way back in prehistoric times I also taught belly dancing!

What motivates you?

Connection – with family, friends and clients. I'm not one for superficial chit-chat and am curious to find out what makes everyone tick – not just those in my echo chamber. I try to say 'yes' to as many new experiences as possible to broaden my experience of the world and stay open-minded! I've never much been motivated by money or material success – you obviously need to be able to pay the bills, but to me success is the difference you can make, the experiences you have, how you can learn and grow as a person, what you can give back to the world, rather than what you've got parked on the drive.

What do you like to do in your spare time?

Have fun! My three boys are all grown up now so spending proper time with them is the biggest treat. I love music and have been learning the guitar for a while – I never seem to get any better but I don't let that put me off. I've played the drums in Bristol Samba for around thirteen years which is such a source of joy – I get to dress up in any number of silly costumes and have performed at festivals, celebrations, carnivals, a prison ... we were Anarcho Samba at Banksy's Dismaland and I've even played a nudist get-together (I kept my own kit on, before you ask!) I co-facilitate a creative writing group for adults who identify as autistic and occasionally perform at spoken word events – most memorably by candlelight in Redcliffe Caves for the Bristol Festival of Literature. When I'm not making a complete show of myself I'm generally



pottering on my allotment or catching up with friends. I recently acquired a camper van so I'm hoping to instigate some serious shenanigans this spring.

What have been the highlights as a SFH so far?

I only graduated a year ago but it's such a privilege to witness peoples' positive development as you work with them. While I was training I offered to help an individual who had been so affected by anxiety during lockdown they were unable to leave the house and had been self-harming. I won't deny I was daunted, but remembering the adage not to be seduced by the problem I worked with this person for some while. Going out again and developing positive coping mechanisms happened surprisingly quickly, and we continued to work together, exploring challenges like layers of an onion, 'till the day I was met with the brightest smile and 'I really can't think of anything else you can help me with ...!' Oh, and then there was the individual who wanted to be a firefighter but didn't like going up ladders ...

*I try to say
'yes' to as many
new experiences
as possible*

All about you!

This time we asked your opinions on *Hypnotherapy Today* and the results were fascinating. Thanks for all your supportive and helpful comments.

Survey results...

We were pleased to discover that 56% of members read their copy of *Hypnotherapy Today* from cover to cover, and 36% read the articles that particularly interest them. Just 8% of members said their copies gathered dust.

Q. What type of features would you like to see more of in <i>Hypnotherapy Today</i> ?	Response rate (% of all votes)
Neuroscience/mental health articles and research	88
Resources eg metaphors	76
Practical advice for being a SFH, Supervision, safeguarding etc	64
Personal experiences and case studies	56
Practical advice for running a business	44
Book reviews	36
Super supporter profiles	20

Other topics mentioned by respondents were marketing, language patterns, and features on the wider world of hypnotherapy. It turns out our respondents are an interactive bunch – many had submitted an article or more. For the 20% who said they would like to but felt nervous, do get in touch as we can support you to bring your ideas to publication – comms@afsfn.com.

Q. Have you ever contributed to <i>Hypnotherapy Today</i> ?	Response rate (% of all votes)
Just once or twice	40
I have never sent anything for publication	24
I'd like to, but I'm a bit nervous about submitting something	20
I've written several articles	12
I would not consider submitting something	4

We were interested to know your opinions on paper copies of *Hypnotherapy Today*. 56% of respondents said a paper copy was very important to them, 24% said they would prefer not to have a paper copy for environmental/other reasons, and 20% said they like a paper copy, but wouldn't mind if it was just online. We'll bear this in mind moving forward.

Thank you to everyone who took part in the survey – it will help us to plan future issues of *Hypnotherapy Today*. Thanks also to everyone who offered to write articles and be included in our skills bank – your details have been logged.

Help us continue to spread the SFH word!

Join us on Twitter: [@afsfn](https://twitter.com/afsfn)

We are now on Instagram!
Follow us: [@afsfnofficial](https://www.instagram.com/afsfnofficial)

Or follow us on the public-facing Facebook page – we often publish items that you can share on your own FB business pages. Just search for: **Association for Solution Focused Hypnotherapy** on Facebook or scan the barcode here to join:



If you are a Registered member, or a Student in your 8th month of training, you can also join the closed AfSFH Facebook group at: www.facebook.com/groups/Afsfn/. Once we receive your request to join, we will verify your membership and add you to the group!



Thank you to all contributors and people who have helped make this publication possible. The AfSFH was established in 2010 to represent the practice of Solution Focused Hypnotherapy as a distinct profession in its own right. Membership is open to those practitioners who have appropriate qualifications and experience within the field.

Hypnotherapy Today address:
Journal of the Association for
Solution Focused Hypnotherapy,
8-10 Whiteladies Road,
Clifton, Bristol BS8 1PD

Email: comms@afsfn.com Editor: Sally Hare

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SUPERVISORS' DIRECTORY

ST: Supervision type (e.g. Skype, One to One, Group supervision).



Ali Hollands

Location: Online (UK)
M: 07957 573681
E: ali@inspiredtochange.biz
W: www.inspiredtochange.biz
ST: One to One, Online with Email and Phone support



Caron Iley

Location: Bolton, Greater Manchester
M: 07580 041394
E: ci@havishamhypnotherapy.co.uk
W: www.havishamhypnotherapy.co.uk
ST: Zoom, Group, one to one, Phone



Andrew Jamison

Location: Belfast
M: 07846382768
E: binaryhypnotics@googlemail.com
W: www.binaryhypnotics.com
ST: In person. Phone, One to One, Group, Zoom



Alison Jones

Location: Bristol, Oxford and Birmingham
M: 07730747772
E: alison@solutionshypnotherapy.co.uk
W: www.solutionshypnotherapy.co.uk
ST: One to One, Phone



Liane Ulbricht-Kazan

Location: Online
T: 07825286550
E: Liane@changeswelcome.co.uk
W: www.changeswelcome.com
ST: Group, One to One, Phone, Skype, E-mail (English & German)



Penny Ling

Location: Abingdon and Reading
M: 07759820674
E: solutionshypno@yahoo.co.uk
W: www.pennyling.co.uk
ST: Group, Skype, Phone, E-mail



Jon Lowson

Location: Halifax, West Yorkshire
M: 07532 719402
E: john@halifax-hypnotherapy.org
W: www.halifax-hypnotherapy.org
ST: Phone, One to One, Group, Zoom



Julie May

Location: Mid Somerset and Kingston Upon Thames, London
M: 07889777901
E: juliemay.solutionfocused1@gmail.com
W: currently being updated
ST: Group, One to One, Phone



Jenny Mellenchip

Location: Stafford, Staffordshire & Northwich, Cheshire, Leeds, West Yorkshire
M: 07748511841
E: info@jennymellenchip.co.uk
W: www.jennymellenchip.co.uk
ST: Group, One to One, Phone, Skype, E-mail



Deborah Pearce

Location: Sidmouth
M: 07939840788
E: dpearcehypno@gmail.com
W: www.deborahpearce.co.uk
ST: Group



Caroline Prout

Location: Peterborough
M: 07729801247
E: caroline@inspiredtochange.biz
W: www.inspiredtochange.biz
ST: Group, Skype



Georgia Riley

Location: Ainsdale, Southport, North West England
M: 07720574005
E: supervisionwithgeorgia@gmail.com
W: www.thelifeofrileyhypnotherapy.com
ST: One to One, Phone, Zoom, face to face



Susan Rodrigues

Location: Bristol and Yate, South Gloucestershire
M: 07743895513
E: info@susanrodrigueshypnotherapy.co.uk
W: susanrodrigueshypnotherapy.co.uk
ST: Group, One to One, Skype, Phone



Holly Stone

Location: Billingshurst, West Sussex
M: 07909 951338
E: holly@hollystonehypnotherapy.co.uk
W: www.hollystonehypnotherapy.co.uk
ST: phone, skype/zoom, group, one to one



Sacha Taylor

Location: Bath
T: 07957 397291
E: taylor.sacha@gmail.com
W: www.purehypnotherapy.co.uk
ST: Group, One to One, Phone, Skype, Email



Nicola Taylor

Location: Abergavenny, South Wales
M: 07802 286386
E: eclipsesf@gmail.com
W: www.eclipsesf.com
ST: phone, zoom, group, one to one



Stuart Taylor

Location: Horfield, Bristol
M: 07840269555
E: info@taylorhypnotherapy.co.uk
W: www.taylorhypnotherapy.co.uk
ST: Group, E-mail, Phone, One to One



Lisa Williams

Location: Wrington, North Somerset
M: 07920 147101
E: enquiries@lisawilliamstherapy.co.uk
W: www.lisawilliamstherapy.com
ST: One to One, Skype, Phone



Nicole Woodcock

Location: Lincolnshire
M: 07540873928
E: Info@hummingbirdhypnotherapy.co.uk
W: www.hummingbirdhypnotherapy.co.uk
ST: One to one.



Anne Wyatt

Location: Banchory, Aberdeenshire
M: 07584 414715
E: anne@bonaccordhypnotherapy.com
W: www.bonaccordhypnotherapy.com
ST: Group, One to One, Skype, Phone, Email

Committee Members



Chair and Trustee: Susan Rodrigues

Susan is the key interface between CPHT and the AfSFH. As CPHT course co-ordinator, her crucial role allows her to organise key speakers and post-CPHT training to ensure your CPD (Continuous Professional Development) is maintained to the highest standards. She is also a senior lecturer with CPHT and was one of AfSFH's first supervisors!



CEO: Helen Green

Helen has a background in Psychology and clinical research. She is proud to be the CEO for the AfSFH and wants to continue to raise the public profile of the Association and the work of its members.

Contact email: journal@afsfh.com; Ceo@afsfh.com



Head of Finance: Sacha Taylor

Sacha has been a member of AfSFH since 2014 and loves a good spreadsheet, so keeping the finances in order for the Association is an enjoyable challenge for her! She offers administrative support to the Association's CEO as well and is happy to help support all her SF colleagues whenever needed.

Contact email: finance@afsfh.com



Head of Communications: Sally Hare

Sally is a graduate of CPHT Bristol and has a background in writing, editing and proofreading. Training and practice experience have enthused her to spread the Solution Focused message to as wide a public as possible.

Contact email: comms@afsfh.com



Head of IT and Social Media: Trevor Eddolls

Trevor, a regular writer and speaker about solution-focused hypnotherapy, has more than 30 years of IT experience and he looks after our website and associated social media (including our Twitter account @AfSFH). You will probably have seen his posts on Facebook - both the closed group and the public-facing page.

Contact email: it@afsfh.com



Head of Membership: Claire Corbett

Claire oversees all aspects of the renewal and processing of membership applications for the AfSFH. She is passionate about ensuring members are fully supported and in promoting the AfSFH.

Contact email: membership@afsfh.com



Head of Professional Standards: Nicola Taylor

Nicola has an extensive background in teaching and education. Her goals are to promote high standards and best practice amongst AfSFH members, and to ensure that the Association supports members in achieving these.

Contact email: standards@afsfh.com



Head of Marketing: Andrew Major

Andrew has a professional background in marketing. He is eager to continue the wider promotion and awareness of SFH and the work of the AfSFH and its members.

Contact email: marketing@afsfh.com

