

# hypnoversity

The Journal for Hypnotherapy, Coaching and NLP



central england college

Issue 20 Winter 2012/13

## In this issue

**Addictions – substances and gambling**

**Boosting your business profile – video, audio, local SEO & social media**

**Eating Disorders**

**Adventures in Smoking Cessation**

**Good Practice – managing risks**

CONTENTS:

Editorial

Is there an Addictive Personality?

Boost your profile - improve your ranking

Identifying normal dieting and abnormal eating disorders

Focus on Linda Savill – addictions counsellor

From the desk of the Principal  
Adventures in Smoking Cessation  
Some Well-Proven Ideas for  
Increasing Your Success Rate

The Crack Cocaine of Gambling

Making the Extraordinary Ordinary  
Good practice in assessing and  
managing risk

Continuing Professional  
Development (CPD) 2013

LINKS

Editor:

Lorraine McReight (LM)  
editor@hypnoversity.org  
Twitter: @hypnoversity\_ed

Publisher

Nick Cooke (NC)  
publisher@hypnoversity.org

Front Cover Credit:

Igor Stevanovic



## Is there an Addictive Personality?

By John Castleton

The terms 'addictive personality' and 'addiction' have found their way into everyday speech. Unfortunately, these terms are sometimes used to describe a strong liking for something or even to explain over-indulgence, for example, "I can't resist chocolate. I must have an addictive personality." In my opinion, this does not help our understanding of addictive behaviour and, while I appreciate that our use of language evolves, as a Chartered Psychologist and Hypnotherapist, I think it is very important that we appreciate the powerful way in which words can create or support counter-productive beliefs and behaviour: if someone talks about being "an addict", this is an indication of an underlying belief system.. I think this everyday use of the terms could also be seen as trivializing the difficulties encountered by people who experience addictions, and their families. This could also be said for many other terms, for example, when describing feeling anxious as 'having a panic attack'. Sorry if I seem pedantic, but after more 30 years of working in the field of substance misuse, I'm as passionate as ever about what I do. So, moving on then...

Many people I meet tell me they can't understand why someone would feel the need to take drugs (and many of my clients tell me they can't understand why they do, either!), but substance-enabled intoxication goes back to the ancient history of our species. As hypnotherapists, we understand the importance of techniques to change consciousness and that the desire to change our psychological state is a fundamental human quality. So, while the focus of my training courses is on 'problematic' substance use, I feel it is important to realise that substance use is a very powerful way of changing our consciousness, whether as part of rituals or ceremonies, or as a 'recreational' activity, or as something to 'help' us to cope with or escape from our difficulties. When we put that information into context, we can look at how to help.

My approach to training in this area is to try to demystify it first, because there is still a lot of misunderstanding or misinformation. For example, about the range of different substances (or 'drugs', including our favourite, alcohol) used today, how they affect psychological (and physical) functioning and the common pattern of poly-substance use (which some refer to as a 'pick and mix' approach to intoxication). Clearly, there are risks involved with substance use and we will look at the adverse consequences; for the individual, their family and beyond. In my CPD training we look at various models of addiction and diagnostic systems, to see how they can provide a framework for understanding this behaviour (but trying to avoid them becoming a therapeutic strait-jacket). This will highlight the personality traits that are common among substance misusers, such as impulsivity and a low tolerance of frustration (whether they came before, or as a result of, the substance use).

A person's presentation will be influenced by their substance use, so we need to be able to assess the nature and extent of it. We will also look at issues such as managing withdrawal, current pharmacological and psycho-social

approaches to treatment. As a person's involvement with substance use progresses (or deteriorates), they may need specialist assistance, so we also need to be aware of the wider treatment systems that our clients may interact with and where hypnotherapy can contribute to the process of changing behaviour to promote recovery.

In my experience, as therapists in private practice, we are more likely to see people whose substance use is still manageable (albeit barely, in some cases), or who have made significant progress in recovery and want additional support. This could involve using our skills to help clients identify triggers for substance use, to enhance the client's motivation to make changes and to help them to address the maladaptive patterns that have become established in their thinking and behaviour. We can enable clients to find alternative ways to manage difficulties that are linked to their substance use, such as cravings or sleep disturbance when they become abstinent, but also emotional states that they have tried to cope with by using substances (such as anxiety, stress, low mood, irritability, etc). These responses may be viewed 'objectively' as counter-productive, which leads us to looking at the secondary gains that may result from drug use.

Another aim of my training is to enable participants to start to appreciate that their personal perspective (experience, beliefs, etc) will influence how they view their own and other people's substance use (and/or misuse; that is, the behaviour along this continuum). For example, if you have a stereotypical view of "addicts" or "alcoholics", you will see things quite differently to someone who feels that substance use is a normal (or even important) part of existence. Because drug use is not a black-and-white area, and to be able to empathise and build rapport) with our clients, we need to be aware of our own values on this subject.

John Castleton is a Chartered Psychologist and Hypnotherapist with 30 years experience in the arena of drug and alcohol misuse. He has been a practitioner, manager and commissioner in this field, and has been instrumental in developing a number of new services. John's training and experience in the areas of psychology and hypnotherapy are also extremely valuable in the field of therapy, personal coaching and mentoring. He has experience working with a range of client groups, including all ages (12-70) and people of different cultures and disabilities. He has worked in community-based, residential, in-patient and custodial settings, as well as the commercial world. He takes on legal work, and is often appointed in cases that require an expert witness. He has also published many research papers and worked with the media (TV, radio and press).

John Castleton is presenting a CPD training day at CEC on the topic of 'Working with Substance Misusers' on Sunday 17th March 2013. The attendance fee is £90. See CPD listing below.



Nick Rink



John Merriman



Robin Adams

## Boost your profile – improve your ranking

The internet has changed life for most of us. We can get answers to questions, find out about things, source things, buy things... and we can do it instantly. We have become impatient - we want things now. And so do our clients and prospective clients. If you are not personally available, a client will still want to access answers to their questions or to see how you look or sound. They'll often have looked at your website, before they've called you. They want to be able to research you or get a feel for how you work or what you offer before contacting you, so a website is essential. But how do they find your website? By picking up a leaflet or card with your web address on it? By finding you (and many other therapists) on the Hypnotherapy Directory or other register or listing sites? What will get your website up there on page 1 of Google? If you're not on page 1, or at least page 2, you won't get found very often. It's not as difficult as you might think and the world wide web presents, if not a level playing field, a more level one.

In the days of print advertising and TV and radio, small businesses or the 'one-man-bands' had no opportunity to compete with the 'big boys', but it's different now. Much can be done by an individual – even a non-techie one – to make their website work. If you'd like to boost your profile and improve your ranking on Google and the other search engines – yes, there are others – why not book onto some weekend of training to seriously improve your online visibility? This is a course like no other... it's a 'how to' course with seriously helpful content and you don't need to be a geek...

Day one is about the power of video and why we need to include video in our marketing and website. So why do we need video? Well, it's that instant thing again. We can learn so much in a few minutes, we believe what we see and trust it... and that's what we want from our customers; belief, trust and instant communication. Video is preferred to text and it keeps people on our website. Statistically I'm told that a website with video is 53 times more likely to get on page 1 of Google. Recording a video has never been

easier, especially with smart phones and small devices. But what works on video? Could you give altogether the wrong impression? What do you say, and how? Do you want to educate or entertain and where do you want it – just on your website or uploaded to YouTube? If you're feeling overwhelmed, this course is for you.

Robin Adams, a marketing expert, and video veteran, will talk in easy to understand language about how to do it – using a professional or DIY, the style, e.g. talking heads, interview style or demonstrations, and if you're camera shy Robin will explain how you can still benefit from videos without appearing on film yourself. You'll learn how long a video should be, what needs to be included (and left out) and how to write a video script. As with anything, preparation is the key, and by the end of the course, you'll have all that you need to move forward with video. As a bonus, the day will conclude with a session on how to use your audio recordings to promote sales, bookings and awareness. This is a fantastic full day course that will enthuse, entertain and educate. This is a unique event that is tailored to the specific needs of therapists.

**Day Two** on Local SEO (Search Engine Optimisation) and Social Media, offers a great opportunity to discover what you need on your website including online SEO and offline SEO including links and reviews. You'll also learn what you can do, to improve your local search ranking and also the basics of social media. Apart from the theory, you will learn practical steps and get advice on how to set up your social media profile, where to focus your social media efforts and activities, and tools to help you connect with potential clients. Therapists usually look for clients in their vicinity, so getting 'found' by people in your area is crucial. Online visibility expert Nicholas Rink will explain in layman's language how to do this. Each attendee will discover where their site ranks and what could be done to improve its visibility. Unlike courses that offer general advice on SEO, every attendee (by submitting their web address in advance) will receive a 24 page report on their website to take home and act on. These reports normally cost £47 each, but are included in the cost of this one day course. The training is aimed at self-employed therapists, rather than large corporations and promises to be invaluable for those who haven't yet got to grips with SEO and social media.

**Day three** will take place 'on location' at Crown Lane Studios. This is for those who want to experience recording in a professional studio. Attendees will record their own promotional CD in the studio and watch their recording being edited. Sound engineer and studio owner John Merriman will teach you how to make audio recordings at home (including information and advice on microphones, software etc) and therapists will leave with a master copy

of their audio recording. But that's not all! You will also be filmed (interview style or 'talking head') for a video for your website and/or YouTube. There are limited spaces for this course, so book early for this unique opportunity to work in a professional studio.

Days one and two cost £125 per day and Day three costs £195. For further information, including dates and venues, see CPD listing below.

LM

## Identifying normal dieting and abnormal eating disorders

by Kim Manning

### APHP Conference Follow up

Kicking off the APHP conference on Saturday 27<sup>th</sup> October was Kim Manning from the U.S. Specialising in eating disorders, Kim described how constant and obsessive dieting can lead to eating disorders. Naked pictures of anorexic women were shown and as you might expect, were pretty shocking. But anorexia isn't the only serious eating disorder, though it is the most likely to be fatal and is the most visually obvious. In our therapy rooms, we are more likely to see clients who binge, purge, starve or have other maladaptive eating patterns, or are simply trying to find a 'magic' diet (hypnotherapy) that will help them to change how they look.

Of course what they really want is to change how they feel and believe changing their size or shape will do that. There are a range of drivers behind disordered eating, with a positive intent such as soothing, numbing, anger, self-destruction or discharge of tension operating at a deeper level. Some common characteristics can be identified in clients who develop restrictive eating patterns and these are helpful to consider when working with such issues. Therapists need to be mindful of their client's need to be in control, when selecting or creating scripts and also their impatience and desire for instant change.

Kim's presentation was fascinating and the topic increasingly relevant in our image obsessed society. Kim, president of the Academy for Continued Hypnosis Education (ACHE) works closely with Dr David Kato who also delivers training in Eating Disorders in the U.S. and UK.

David Kato is presenting a 2 day Diploma course in Anorexia, Bulimia and OCD at Central England College on Wednesday and Thursday 23<sup>rd</sup> and 24<sup>th</sup> January 2013. The attendance fee is £220 including the assessment of a multiple choice paper. See CPD section below.



## Focus on Linda Savill – addictions counsellor

Linda Savill trained as an addictions counsellor when the prison where she worked opened a rehab unit alongside the charity Addaction. Working with 1<sup>st</sup> stage 'lifers' (inmates in the first stage of their life sentence) at HMP Bullwood Hall she delivered group training to 18-21 year olds whilst attending 'week release' training over 2 years at the University of Kent, where she gained her diploma in addiction counselling. Linda's work and achievements were recognised in 2005 when she and her team were awarded the Butler Trust Award for services to young people. Later Linda moved to Cookham Wood in Kent where she worked with 15-17 year olds who were on drugs. Linda left the prison service in January 2009 and has worked ever since for a drug action team in Essex where she facilitates groups and works one-to-one, sometimes with clients who have agreed to drug rehabilitation rather than go to prison. In this post Linda has written programmes to help illicit drug users and for relapse prevention.

Linda believes that there is almost always an underlying issue that leads people to 'self-medicate' with drugs and other substances and as therapists we may not find this too surprising. Anger and anxiety, she told me are often 'managed' through drug use. Although help with the root cause is important, Linda always starts with work to change the drug pattern before working on the deeper issues, and uses motivational techniques and ego strengthening to help her clients change their behaviour. Offering auricular acupuncture as well as relaxation and meditation techniques, Linda doesn't use hypnosis in her current role but believes that it could be useful for dealing with underlying issues, once an individual is no longer substance dependent.

When working with drug users Linda looks at all the mood altering substances they may be using and finds that whilst users may be concerned about Class A drugs, they are often heavy alcohol users too, which they often don't see as a big deal, possibly because it's legal. A common problem, Linda says, is 'layering', where people take several different substances, often without realising the dangers, particularly of overdosing. Poly drug use, where two or more substances are used simultaneously, is problematic too, for instance where alcohol and cocaine are combined, known as co-ethanol addiction.

"Addiction can be like a love affair" Linda sometimes tells clients who are in relationships, and explains that it's like being unfaithful, where an addict is constantly thinking of someone (something) else, planning what they'll do next time they're together, neglecting their relationships etc. This is then followed by desolation, loss and despair if they are separated. Whilst non-users may consider becoming 'clean' as offering freedom, there will be a huge gap left in the person's life and there may be cross addiction to other drugs or negative behaviour, for instance a stimulant user may also gamble, as they enjoy the 'rush' experienced by both practises.

Substituting one addiction for another is common and getting a client off an addiction is just the start of a journey – new ways need to be found to fill their life and time. The 12 step programme on which NA (Narcotics Anonymous) AA (alcoholics Anonymous), and GA (Gamblers Anonymous) is based, does, in Linda's view, work for many people and she neither knocks it nor praises it. She does caution however that attendance of meetings can become an addiction in itself. Linda believes that some people do have addictive traits, and says "When you're pre-disposed to addiction you will always be addicted to something, so it's a case of finding the least dangerous addiction". She illustrates her point by describing the case of identical twins – one hooked on drugs and the other into extreme sports. "If they have the thrill-seeking gene" Linda continues, "they want instant gratification".

Drug addiction is clearly a complex issue where knowledge, experience and training are vital and it is clear that a long term approach is essential for successful rehabilitation. Once clients have overcome their addiction however and are ready to 'face their demons' and work through underlying emotional problems, hypnotherapy could have a lot to offer.

Linda is employed full time as an addictions counsellor and has her own part-time hypnotherapy practice in Benfleet, Essex.

LM

## From the desk of the Principal



Nick Cooke receiving the APHP Training School of the Year Award

At the APHP awards ceremony in London after the first day of the 2012 conference, Nick Cooke was presented by Terence Watts with the prestigious APHP Training School of The Year 2012 award. Each year one of the 19 accredited schools worldwide is honoured with this award.

## Adventures in Smoking Cessation

### Some Well-Proven Ideas for Increasing Your Success Rate

Let's begin with a true story. I like to keep my car clean and at least once a week I go to a hand carwash round the corner from Central England College. One of the guys who works there is called (for the sake of this article) Tom. They all know in there that I'm a hypnotherapist and Tom came to see me for hypnotherapy to help him to quit smoking, in which he seemed to have succeeded.

A few weeks ago at the carwash Tom came up to me and said 'Nick, don't take this the wrong way but do you know anyone who does the real deep hypnotism. Not the stuff you did with me, 'cause I'm back smoking again and I really need to quit 'cause I'm running a race soon!' I did my best to reassure Tom that I do offer the real thing, hypnosis-wise and offered him a repeat session at no cost. The guys there do refer clients to me and I thought it would be nice to keep friendly. I was however a bit concerned that I might be setting myself up for further lack of success with Tom. I knew that somehow in order to achieve success I needed to understand and match his expectations.

What it takes to succeed in hypnotherapy to quit smoking can be summed up in four simple words – *Desire, Belief, Expectation and Commitment*.

All are absolutely important so a great question to ask your client is, how much do you want to quit, on a scale of 0 to 10? –with 0 being that you can't be bothered and 10 being, you absolutely must quit! My advice to you if you want to have amazing levels of success as a therapist is – only work with clients who are 10 out of 10 on the desire scale. The ones who must quit!

However life is not always that simple and we may be able to help our clients to build their level of desire (motivation) by using the 'benefits' approach. Some clients may be 'away from' motivated. In other words they move away from pain more readily than they move towards pleasure. In this

instance we may have success if we adopt an approach designed to make cigarettes taste unpleasant to them – perhaps mapping across NLP sub-modalities or using a psychotherapeutic aversion process.

Another brilliant question to ask is 'how much do you believe that you can succeed in quitting?'

This can be linked to another great question 'what is your expectation of hypnotherapy to help you to quit?'

Clients will inevitably be conditioned by their beliefs and expectations. Maybe they have been recommended to us by another client who has succeeded in quitting with our help. In this case their belief may be high. If it's not high we need to reassure them to help raise their level of belief. However we also need to help manage their expectations so we need to understand what they expect to happen and also we need to make sure that they have a realistic expectation of how the session will work and how it will feel to be in a state of hypnosis.

If we fail to do this then our clients may be working from a completely unrealistic expectation, like Tom in my story above! For example they may expect to be unconscious and not to hear what we are saying to them! If we don't match this expectation, and of course we are likely not to, then we will not succeed.

Finally, for a high success rate we need to address the vital issue of client commitment. Clients often expect us to do the job for them – waving the magic wand, as it were – and that they have to do nothing at all! I think we all know, but some clients don't that this just will not work. The client has their own role to play and they have to quit. We can't make them do it. However what we can do is to help them to feel great about quitting, help them to address faulty thinking patterns about their smoking habit and help them to interrupt the pattern that all smokers have – often a ritual that symbolises their pattern of smoking.

Here's to your continued success

Nick

Nick Cooke is presenting a CPD training day on the Quit 4 Life smoking cessation method on Sunday 28<sup>th</sup> April 2013 at HNHC in South West London. The attendance fee is £125. Early booking fee £99. See details in the CPD section below.

## The Crack Cocaine of Gambling

Marijuana, Heroin and Cocaine regularly make the news and we've probably all seen someone who we suspected of being 'out of it' on some substance or another, but how often have you seen someone high on FOBT? Well, it's not one of those new legal highs or party drugs, FOBT stands for Fixed Odds Betting Terminal. Described by some as

the crack cocaine of gambling, these machines where punters can stake up to £100 every 15 seconds could be responsible for a huge upsurge in gambling addiction in the UK. 'Gambling Nation' a Panorama programme shown on BBC1 recently, showed undercover footage of aggression and violent behaviour towards staff and terminals following significant losses by gamblers. Whilst much of this behaviour appears to go unreported to the police, there is still evidence of an increase in criminal damage within these establishments. Unlike bets placed in bookmakers on football games or horse racing for instance, there is no 'cool down' for gamblers playing roulette or blackjack on FOBT machines and they can experience an adrenalin rush every 10-15 seconds. This can be highly addictive. Alarmingly, the documentary revealed that some betting shop staff given training on how to play the games on FOBT machines went on to develop a gambling addiction and were offered counselling by their employers!

Advertising and celebrity endorsement for internet betting sites can tempt some into a new way of getting an adrenalin fix, although naturally not all gamers will develop an addiction. However, just as whipping out a plastic card in a shop feels less 'real' than counting out a wad of banknotes, placing bets online can lower the psychological value of money. Internet gaming allows individuals to gamble away large amounts of money in the privacy of their own room and to keep their habit secret. Of course modern technology means that it is possible for the operators of these sites to become aware of their customers betting patterns and losses.

Sadly, the next British Gambling Prevalence Survey has been cancelled, so statistics about gambling behaviour in the UK will not be recorded and any continuing increase in problem gambling such as the dramatic increase noted in the last survey in 2009 will not be available to the government or support agencies. For those who seek help with their addiction from their GP, services are limited. Currently there is (according to Panorama) only one NHS Problem Gambling Clinic in the UK. There are 200+ Gamblers Anonymous groups and Gamcare has received 50,000 calls from gamblers seeking help. The programme reveals that the government has no funding for research, education or treatment and any help comes from the industry. Unsurprisingly, the contribution made by the gaming industry is very small compared with the staggering amount of cash taken annually from problem gamblers.

This is an enormous social problem and seems set to get bigger. Any kind of addiction can be costly and destructive for the addict and their families, but the amount of money that a gambling addict can lose in a very short space of time is staggering. The mental health issues that can result from problem gambling as well as the breakdown of relationships and family life and the potential criminalisation of previously law-abiding citizens, who steal

to fund their addiction, are not well documented, but I think we can expect to see a massive problem in the years ahead.

Working with Gambling CPD, presented by Hilary Norris-Evans is in London at HNHC on Sunday 17<sup>th</sup> February 2013. The attendance fee is £125. Early booking fee £99. See CPD section below.

LM



## Making the Extraordinary Ordinary

Good practice in assessing and managing risk

By Jill Tonks

Risky situations with hypnotherapy clients don't happen very often. When they do, they can be unexpected and as a therapist, you can find yourself overwhelmed by your own emotions and under or overestimate the nature and level of risk involved. This is the so called 'halo' or 'horns' effect which is well documented in the literature on risk.

So risk scenarios are an 'Extraordinary event' and the more we can manage risk as an 'ordinary', day to day concern, the more that we will be equipped to avoid these tricky situations developing in the first place. So, if the worst does happen, having a really solid grounding in how to manage the situation appropriately, safely and professionally can make a big difference. You can never eliminate risk but there is a lot you can do to minimise it and manage it effectively. Risk assessment is not the sexiest topic in the world; it's not about scripts or techniques. It's about having a structured approach to assessing and managing risk based on best practice principles. One participant on the recent training commented, 'It's hard to know what you don't know'. Good practice in assessing and managing risk is a bit like having a fire drill or First Aid Training in place, you can do without it until something happens!

There are several aspects of risk:

- Risk of harm to the client- for example risk of suicide or self harm.
- Risk of harm to others, if a client discloses information that indicates others may be at risk- for example children or partners or when a crime maybe committed.
- Physical risks- drug and alcohol misuse and domestic abuse.
- Risk to yourself as a therapist and what to do about it.

The Munro report (May 2011) was a review of social work practice after the high profile cases of Victoria Climbié and

Baby P. It outlines a 'risk sensible' and balanced approach to practice. This combines the use of questionnaires, processes and structure with the skill of practitioners and their professional judgment. We can learn from this as hypnotherapy practitioners.

The most important aspect of assessing and managing risk is how you can best identify the scope and limits of your ability to practice safely as a therapist and when and how to get support from your supervisor, liaise with other agencies e.g a GP, the Police, Social Services or mental health specialists.

The one day CPD event 'Making the Extraordinary Ordinary' offers a flexible structure for the assessment and

management of risk underpinned by good practice principles. The major part of the day is exploring scenarios and participants' practice issues so you can put your learning into practice. So, rather than just relying on your wits in the moment, you can learn from the experiences of others who have faced their own challenges so as to be more alert to and manage risk – that can only serve to enhance your competence, self-belief and confidence in your practice.

Jill is the Training and Accreditation Officer of the National Council for Hypnotherapy and is presenting this one-day CPD training at CEC on Friday 10<sup>th</sup> May 2013. The attendance fee is £90. See CPD section below.

## Continuing Professional Development (CPD) 2013

Hypnotherapists are required to maintain their Continuing Professional Development (CPD) to uphold professional learning standards and to meet the requirements of whichever professional association they belong to. Normally this is a minimum of 15 hours, or two days of CPD during each twelve month period. The list below shows CPD and other training events for hypnotherapists currently scheduled for 2013 but new events are being added all the time. Follow us on Twitter @hypnoversity\_ed for the latest news on training events.

**CPD Training at  
Central England College – 2013**  
Bookings on 0121 444 1110 or email  
info@cecch.com

### Wednesday and Thursday 23rd and 24th January 2013

**Dr David Kato**

**Anorexia, Bulimia, Eating Disorders and OCD – Diploma Course**

The attendance fee is £220

### Sunday 24th February 2013

**Ann Finnemore**

**Transactional Analysis (TA) for hypnotherapists**

The attendance fee is £90

### Sunday 17th March 2013

**John Castleton**

**Working with Substance Misusers**

(see article earlier in this issue)

The attendance fee is £90

### Sunday 7th April 2013

**Robert Perkins**

**Mastery of Communication and Developing Deep Rapport**

The attendance fee is £90

### Friday 10th May 2013

**Jill Tonks**

**Risk Management for a safe practice (see article earlier in this issue)**

The attendance fee is £90

### Sunday 30th June 2013

**Terence Watts**

**Warriors, Settlers and Nomads**

The attendance fee is £90

### Sunday 7th July 2013

**Hilary Norris-Evans**

**Creative Hypnotic Inductions**

The attendance fee is £90

## CPD Training at HNHC – SW London 2013 -

Bookings on 020 8947 3338 or email  
info@therapycpdtraining.co.uk

### Sunday 24th February 2013

**Hilary Norris-Evans**

**Working with problem gambling London**

The attendance fee is £125\* early booking fee £99

### Saturday 16th March 2013

**Robin Adams**

**Video for marketing & website London**

(see article in this issue)

The attendance fee is £125

### Sunday 17th March 2013

**Nicholas Rink**

**Local SEO & Social Media + analysis of your website London**

(see article in this issue)

The attendance fee is £125

### Saturday 23rd March 2013

**John Merriman**

**Record a professional video & audio CD**

Crown Lane Studios, Morden (see article in this issue)

The attendance fee is £195

### Sunday 28th April 2013

**Nick Cooke**

**Quit 4 Life Smoking Cessation London**

The attendance fee is £125\* early booking fee £99

### Booking information

All courses are certified and training notes are provided. The courses are open to practitioners of hypnotherapy, NLP, coaching, counselling and related fields. Numbers are strictly limited and places can be booked by calling:

Central England College for Birmingham courses on  
0121 444 1110  
info@cecch.com

Hypnotherapy Centre for London courses 020 8947 3338  
info@therapycpdtraining.co.uk  
www.therapycpdtraining.co.uk

### To come in future issues:

- Top tips for constructing your own hypnotherapy scripts
- Warriors, Settlers and Nomads – which are you and why does it matter?
- Delivering wellbeing programmes in the workplace
- Why emotional intelligence (EQ) may be more important than intelligence quota (IQ) and how we can help clients boost their emotional resilience
- It's all in the eyes! How Eye Movement Desensitisation and Reprocessing (EMDR) techniques can help treat post traumatic stress disorder (PTSD)