



Amaranth Foundation

*Education is not the filling of a pail,
but the lighting of a fire.*

William Butler Yeats

Amaranth Foundation volunteers undertake study to gain their qualification in Cert IV Training & Assessment

This qualification reflects the roles of individuals delivering training and assessment services in the vocational education and training (VET) sector. This qualification, or the skill sets derived from units of competency within it, is also suitable preparation for those engaged in the delivery of training and assessment of competence in a workplace context, as a component of a structured VET program.

(<http://training.gov.au/Training/Details/TAE40110>)

An alliance negotiated by Amaranth with RTO Riverina Community College Wagga Wagga, Integrated Living Skills and Government Skills Australia has resulted in the unique opportunity for Amaranth Volunteers to undertake the TAE training program. This particular experience is unique for all the organisations involved as one of the key outcomes will be collaboration, design and review of an original set of training modules centred around the theme of “psychosocial and supportive care” of people coping with advanced frailty and palliation.

On completion of the training program Amaranth Volunteers with the Cert IV qualification will be approved to present the “Amaranth modules” to a range of clients including Health Care providers; HACC providers; Aged Care providers; Disability Support providers; Allied Health providers; personnel managing or caring for people in residential care; wardens, managers and staff of prisons.

The outcome for participants will be the enhancement of their skills to assess the needs

and develop individualized plans to assist people deal with the psychological, emotional, spiritual and social issues that often affect individuals, and their families, living with an advanced chronic or terminal illness.

The concerns of social work, both broadly and in the field of end of life and palliative care, include issues of individual personality, vulnerability and resilience, family functioning, personal relationships, strengths and stressors, support network, culture, community, class, ethnicity and gender. Additionally, it includes aspects of existential functioning, spirituality and religion. At the macro level, there are concerns with broader social issues of economic well being, employment and housing.

*Julianne Whyte, AASW National Bulletin
Winter 2013: Volume 23, Issue 2 pg 25*

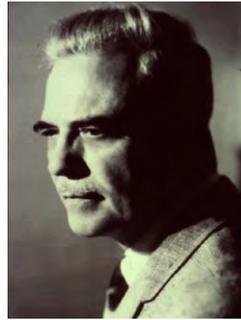


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Who is Milton H. Erickson?

Milton Hyland Erickson was an American psychiatrist who specialized in medical hypnosis and family therapy. He was founding president of the American Society for Clinical Hypnosis and noted for his approach to the unconscious mind as creative and solution-generating.



“Each person is a unique individual. Hence, psychotherapy should be formulated to meet the uniqueness of the individual’s needs, rather than tailoring the person to fit the Procrustean bed of a hypothetical theory of human behavior.” – Milton H. Erickson

The Ericksonian approach departs from traditional hypnosis in a variety of ways. While the process of hypnosis has customarily been conceptualized as a matter of the therapist issuing standardized instructions to a passive patient, Ericksonian hypnosis stresses the importance of the interactive therapeutic relationship and purposeful engagement of the inner resources and experiential life of the subject. Dr. Erickson revolutionized the practice of hypnotherapy

by coalescing numerous original concepts and patterns of communication into the field.

In 1957, he and a number of colleagues founded the American Society of Clinical Hypnosis and Dr. Erickson served as the Inaugural President. He also established the American Journal of Clinical Hypnosis and served as editor for 10 years. When he died on March 25th, 1980, at the age of 78, his seminars were booked through the end of that year and requests exceeded another year’s scheduling. Dr. Erickson left a written legacy of more than 140 scholarly articles and five books on hypnosis which he co-authored.

The novel psychotherapeutic strategies which Dr. Erickson employed in his treatment of individuals, couples, and families derived from his hypnotic orientation. Although he was known as the world’s leading hypnotherapist, Dr. Erickson used formal hypnosis in only one-fifth of his cases in clinical practice.

Dr. Erickson affected a fundamental shift in modern psychotherapy. Many elements of the Ericksonian perspective which were once considered extreme are now incorporated into the mainstream of contemporary practice.

<http://erickson-foundation.org/about/erickson/>

Who is Dr Robert McNeilly?

Dr. Robert McNeilly was in a suburban Melbourne general medical practice for 10 years, had the privilege of learning directly with **Milton Erickson**, was inspired by his human approach to therapy, and created his own interpretation to assist clients in a respectful, dignified way with the human dilemmas that affect individuals, couples and families.

He founded the CET in 1988 to introduce Ericksonian Hypnosis and the Solution Oriented Approach to hypnosis, counselling and coaching in Australia. For more than 30 years, the contribution he brings in his teaching style, writing and unique approaches to learning and therapy allow for a ready application into everyday living and are recognised locally, nationally and internationally, including repeated invited presentations at the Milton H Erickson Foundation’s International Congresses in USA since 1980 and workshops in Singapore and Denmark since 1999.

He is co-author, with Jenny Brown, of "Healing With Words", "Healing the Whole Person" was published by Wiley, republished as "Doing Change" by St Luke’s Innovative Resources, and Crown House have published a series of DVD demonstrations of counselling and hypnosis.

<http://www.cet.net.au/MHEIT/page1/page1.html>

What is the Centre of Effective Therapy?

The *Centre of Effective Therapy* with *The Milton H Erickson Institute of Tasmania* offers programmes bringing a solution approach to family therapy, relationship counselling and hypnosis, leading to solid, experiential learning with the opportunity to join our life-long learning community.

The CET community is based on fundamental principles such as the individual potential of each human being, the innate resourcefulness in everyone, the possibility of simplicity, and the desire to reduce conflict and suffering.

As a learning community, they are concerned to be practitioners who are genuine, bold in making clinical decisions, sensitive to the individual needs of clients, humble in service, and appreciate learning within the shared human condition.

I think you always had to be a little different to learn about hypnosis, and even more different to learn about the Ericksonian, solution oriented approach. I think people who do are the creative spirits in this world. They are the people who are not just out to have a successful practice; they want to contribute to their clients. We create learning experiences for these kinds of people. Dr Robert McNeilly <http://www.cet.net.au/>

What is Ericksonian Hypnotherapy?

When you hear "hypnosis" you might think of the traditional form of Hypnosis where the powerful, authoritative hypnotist implants suggestions in his subject, such as, "you are getting sleeepy. Your eyelids are growing heavier and heavier. You will quit smoking," ...

Hypnotic trance however exists in many different forms in every day life. Sometimes it is recognised and utilised (hypnotherapy, rituals, or dance, for example), but most of the time it goes unnoticed (daydreaming, people's behavior in lifts, or irrational fears, to name a few). In fact, people live most of their lives in one trance or another and the job of the hypnotherapist is generally not to hypnotise them, but to de-hypnotise them. The true hypnotists in life are teachers, religious leaders, and even advertisers.

Hypnotherapy is simply the use of trance for therapeutic purposes. Traditional hypnotherapy uses commanding language, as in the above example, called direct suggestion. This method sometimes works, but not for everybody.

Some people resist these suggestions.

Ericksonian hypnotherapy on the other hand uses more of what it is called indirect suggestions. Indirect suggestions are much harder to resist because they are often not even recognised as suggestions by the conscious mind, since they

usually disguise themselves as stories or metaphors. An example of an indirect suggestion is " and perhaps your eyes will grow tired as you listen to this story, and you will want to close them, because people can, you know, experience a pleasant, deepening sense of comfort as they allow their eyes to close, and they relax deeply."

Think about the following scenario: A child of five years of age is carefully carrying a full glass of milk to the dinner table. The parent of the child warns in a stern voice, "don't drop that!" The child looks up at the parent, stumbles, drops the glass, and spills milk everywhere. The now angry parent shouts, "I told you not to drop that! You're so clumsy. You'll never learn!"

As unintentional as it may be, this is an example of hypnosis. The powerful authoritative voice (the parent), having created through indirect suggestion ("don't drop that!"), an altered state (trance), has issued a direct post-hypnotic suggestion ("You're so clumsy. You'll never learn"). "Post-hypnotic" because, if the child accepts the suggestion (and children often do), he or she will always see themselves as clumsy. This post-hypnotic suggestion by the parent may well adhere to the directive in the future, sabotaging the child's success.

<http://www.theenergytherapycentre.co.uk/hypnotherapy-london-clinics.htm>

Who is Julianne Whyte and how is she connected to Ericksonian hypnotherapy?

Julianne Whyte is the founder and CEO of Amaranth Foundation (www.amaranth.org.au) and an active psychotherapist within the foundation.

Julianne has worked extensively as a Nurse and an accredited Clinical Mental Health Social Worker across the Riverina for the past 30 years. She has worked in a variety of roles including policy development, community development and research projects across rural communities. Julianne founded the Amaranth Foundation in 2009. She has a casual academic role with Charles Sturt University in Wagga Wagga, and is currently working towards obtaining her PhD in developing Competency Standards for Social Workers in Palliative and End of Life Care.

Amaranth Foundation provides five streams of supportive care – improved vitality and quality of life; children's counselling; mental health issues; grief loss & trauma; palliative and end of life care.

Amaranth supports all ages, with a special focus on the young, the elderly and infirmed as well as families in distress.

A range of interventions are utilized within the therapy and counselling sessions associated with the Foundation. These

include Cognitive Behaviour Therapy, Narrative Therapy, Dignity Therapy, Mindfulness, Acceptance and Commitment Therapy and Strengths and Solutions Focused Therapy.

Currently Julianne is studying **Ericksonian Hypnotherapy: Diploma of Solutions in Hypnosis** under the guidance of Dr Robert McNielly. By the end of this year she will be qualified to include this form of therapy in her already extensive stable of therapy resources and tools.

The Amaranth Foundation *Health and Wellness Centre* at 46 Peter St Wagga Wagga, will be the host site for a number of **training courses** to be conducted by Dr McNielly in the future. The first of these will take place over **7th, 8th & 9th August 2014**. This course is open to practitioners of all levels of experience . More information is available at <http://www.cet.net.au/locations/styled-14/styled-28/page74.html>

' Rob McNeilly studied with Milton H. Erickson M.D. ... is one of the most knowledgeable practitioners of Ericksonian methods in Australia. His teaching is clear, entertaining and edifying.'

Jeffrey K. Zeig, Ph.D. Board of Directors, The Milton H. Erickson Foundation, Inc., Phoenix, Arizona

“HOW PEOPLE *Live* MATTERS”

... it really does.

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“Often, it’s not about becoming a new person, but becoming the person you were meant to be, and already are, but don’t know how to be.”

*Heath L. Buckmaster,
Box of Hair: A Fairy Tale*

Hope for Life

Hope for Life is an initiative of the **Salvation Army** in Australia. It is funded by the Commonwealth Department of Health and Ageing—National Suicide Prevention Strategy. It provides information, resources and training for those who support people at risk of suicide or have lost a loved one by suicide. Suicide claims the lives of over 2500 Australians each year. More people die by suicide than in fatal car accidents. For every person who dies there are another 8 people who are directly affected. This means that suicide impacts on the lives of over 20,000 people each year in Australia. <http://suicideprevention.salvos.org.au/>

Living Hope Suicide Bereavement Training hosted by Amaranth Foundation

Over September 8th & 9th Amaranth Foundation is hosting the Salvation Army “Living Hope Suicide Bereavement Training” program free of cost. This two day course covers all aspects of suicide bereavement with the focus being to equip caregivers to support individuals and families through the devastating experience of losing a loved one by suicide.

The content of the course is aimed at developing a caregivers skill in practical matters that need to be attended to following the death of a loved one; the grieving process; aspects of spirituality and the influence and impact of culture on grief. For more information please contact Amaranth Foundation.

*The person who completes suicide dies once.
Those left behind die a thousand deaths,
trying to relive those terrible moments and understand ...Why?
Clark 2001*

Recipe : Gluten-free Rhubarb, Lemon and Almond Cake

Ingredients

4 eggs
150gm (1/3 cup) castor sugar
125gm (9 Tablesp) extra soft butter
300gm (3 cups) almond meal
50gm (1/2 cup) rice flour
1 teasp baking powder
Zest of 1 lemon
4 stalks rhubarb (approx 150gm)
2 teasp castor sugar, extra
Powdered sugar for dusting



Preparation

- 1.preheat oven to 180C
- 2.Grease 25cm/9inch cake tin and line the bottom with baking paper.
- 3.Wash the rhubarb stalks and cut into 1 inch lengths and while still slightly damp place in bowl with the extra 2 tsp of

- sugar; stir to coat and set aside
- 4.Beat the eggs and sugar together till thick and pale in colour
5. Slowly beat in the soft butter; then beat for a few more minutes. A few small lumps of butter will remain.
- 6.Gently fold in the almond meal, rice flour, baking powder and lemon zest
- 7.Spoon the mixture in the cake tin
- 8.Dot the rhubarb pieces on top, gently pushing them down into the batter a little
- 9.Bake for 35—40 minutes until a skewer pushed into the center of the cake comes out clean and the rhubarb is tender
- 10.Cool in the tin
- 11.Dust with icing sugar and whipped cream
- 12.Enjoy!

<http://www.foodista.com/recipe/55XPLL3J/gluten-free-rhubarb-lemon-and-almond-cake>