

AN ENHANCED EBOOK

Clinical applications of Ericksonian hypnosis #1

after trauma

by Rob McNeilly



dedication

*This book is offered as a humble gesture of appreciation of the continuation of
Milton Erickson's heritage into the future.*

RM

after trauma

This woman was still having disturbing flashbacks to her experience, some years previously, when her son nearly died from meningococcal meningitis.

In this session, she spoke about her garden, and the way she managed its evolution.

She was able to access the way she dealt so well with her garden, and transfer this to her having the preferred experience of seeing her son, and knowing that “He has made it” rather than “Will he make it” resulting in her experiencing calmness.

The language she used about her garden was utilised to create a connection with her desired outcome [her solution] respectfully and immediately.

A natural doubt about coping with the dimension of her new experience was noticed and taken care of.

You are invited to view this session, with or without the transcript, and explore your experience.

There may be some aspects that appeal and that you can readily include in your own work.

There may be others that don't appeal that can clarify what different approach you may prefer.

The session is offered as an experience, not in any way as a claim for how a session should be.

after trauma - a session



To watch this demonstration

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after trauma - a transcript

Rob: So what have you been doing that's been pleasant, apart from providing a test with people that take three hours, what have you been doing that has been enjoyable?

Client: Oh well, I did actually finish that garden just this week. So it's been a long, drawn-out procedure, but it's done. So, all plants went in. It's all there. Everything's been great so that was good.

Rob: And it's looking good?

Client: Looking good, looking good. It's unbelievable because the delay between it finishing and the whole thing of starting is because there were so many setbacks and obstacles along the way. And then we finally got there and now I sit back and say, I actually got exactly what I had envisaged. And at there were times where I couldn't believe that it was

ever going to happen. So I've been in the depths of depression in my last few weeks because I've been seeing that it's not happening and then it came back and it happened.

Rob: What happened to the depression then?

Client: Oh, that went. I knew that would go once the garden came good, but...

Rob: Yeah, yeah. Yeah, it's hard to have too big a problem with being depressed, knowing that it's only temporary.

Client: I didn't even worry about it. There were other people worried about it. And they thought that I was taking it really badly. And when I looked, the garden was not good and people were saying, it's all right, it looks great. And I was going, no it doesn't. It looks shocking. And it was quite funny, but I didn't stress about it. I just knew I had to keep going and it had to get fixed and it got fixed. It's perfect, finished.

Rob: And you are feeling, what, satisfied now? Are you feeling [inaudible 01:52]? What do you feel? What's the feeling about it?

Client: Incredulous is a large part of it, that it actually came together.

Rob: Yeah, well, just because it happened, you don't have to believe it.

Client: Yeah, well. Okay, but that's another element because I can't believe it.

Rob: Yeah, it does take a little while sometimes, just like a jet-lag. You see it, but it takes a little while to really, really accept it.

Client: Yeah, I think that's true.

Rob: It's not a bad thing. I quite like that I can't believe this because it keeps it a little bit special. It keeps it a little bit sort of novel.

Client: In that magical...

Rob: Exactly.

Client: Yeah, sort of it is a bit dream-like. I keep looking at it and I was thinking, how on earth did it swing from when it was going off the tracks to when I had workmen who couldn't do what I seemed to be communicating. And then I lost the plot and then it veered so badly. And then it came back bit by bit and then boom, it slotted straight back in. And that's the incredulous journey of how it happened. But, and it is -- I'm just standing there in the morning, just going ah.

Rob: You're still enjoying the shock of it.

Client: Oh, yeah, the shock. The shock is huge. Yeah. So that will be fun.

Rob: It's good to know what the shock is like. And it wouldn't it be terrible if you look at that, oh yeah, ho hum, what's next?

Client: Yeah, I'd be bored to tears, probably, yeah. I do like that. I do like that it's exciting. And then of course, I was think-

ing, what will I do next to add fine touches so that there will always be something to discover.

Rob: Okay. So then you'll never get really bored by it. You'll never get really -- there will always be that kind of edge.

Client: Yeah. There's something coming up here, there's this thing there.

Rob: If I remember, you said that you had planned it that there were going to be different colours, different things coming at different times of the year that there's always going to be something.

Client: Yip. And then there has also been planned that as the canopy grows higher, the next canopy's planted to grow up underneath it so that there's going to be -- there's sort of like the 10-year plan and the five-year plan and the plan as it is now. And you can actually -- it is just so exciting just to have it already planted in there and know that this is how it will evolve or maybe this is how it will evolve.

Rob: Yeah, in that general direction.

Client: Yeah, yeah.

Rob: It's definitely going to evolve.

Client: Yeah, definitely will do that.

Rob: Then you probably would find out afterwards just how it evolved.

Client: I wouldn't know beforehand.

Rob: And that's part of the excitement, part of the joy of it.

Client: It's waiting to see.

Rob: Waiting to see. And getting through that feeling like it's never going to happen. It's just too much, too many things have gone wrong; it's just too much damage here, too much trauma here. Now you said there was something that you were interested to explore, to make a difference to, something that had happened.

Client: Yeah. When my son was six, Peter is his name, he got meningococcal septicaemia and he got very, very ill, very rapidly. He had sort of what looked like a cold and a fever. And that day, I was meant to go out and -- all day. I actually had a babysitter booked. And he came in to me at 7 o'clock and he was just burning up. And I gave him a drink of water and he just vomited it up everywhere. And I saw how hot he was and I took him and put him in a tepid bath to bring his temperature down. And he just looked so ill that I just reached -- it was very weird. It was like I'd gone into a different mode. I reached for the phone, called the babysitter and said I'm just cancelling today, I've got to stay. And I just put him to bed and it was very uncharacteristic of him that he went to bed and stayed in bed. And that got me more and more worried because with a cold, he'd never ever responded that way before. And as the...

Rob: Yeah, there's nothing, nothing more worrying than a well-behaved child.

Client: Exactly. And staying in his bed and sleeping. And anyway, I would go in every so often and take him drinks be-

cause it was very hard to keep his temperature down. And I was giving him, you know, four-hourly Panadol and this, that and the other. And I went in at one stage and made him actually get up to sit in front of the TV for a bit because I was getting so worried about the way he was just lying there. And he then said, could you help me go the toilet? I think I'm too weak to walk. So I did and then half an hour later he said, I think I need to go again.

And when I pulled his pants down, in his groin was the beginning of the petechial rash, the first one. And then I checked all over his body and I found another two little pin-points just around his ankle, on that bone there that sticks out. And I thought, well maybe it's just small little blood droplets have landed there, but I wiped my finger over it because it looked so transparent that I thought it was actually little blood bits coming out. And I wiped it and it didn't go away and then I had that moment where I thought the floor's opening up and I'm going to fall down. This is my son. He has a really bad illness.

So I rang my husband, who is a doctor and he was at work. And he said, well, call the GP because the GP had known us for 10 years. And I rang there and they said -- I explained everything and said he's got -- I said I think he's got neck stiffness, I think he is photophobic, he's got the petechial rash, I think it's meningococcus. And they said, well, the waiting room's booked out and we've got people here for two hours. You'll have to just wait. I said, no, I can't wait. If I'm right, he could be dead in two hours. And I then thought, well, I'll just take him into the children's, that's what I should do. And then I thought that's amazing, I just gave a textbook an-

swer for what is wrong with this child. That should have brought a really big emergency sort of thoughts in that doctor.

So I rang back and I said, I'm getting a little flustered here. Maybe I didn't make myself clear. And I repeated it. Petechial rash, the high temperatures, photophobia and by then I'd checked, he did have neck stiffness as well. And I was talking to the GP, who knew I was a microbiologist who taught med-students about microbiology and he said, I still can't see you for two hours. And I just said, right, well I'm driving to the children's. And he just said, well, you do that. And I hung up and just got in the car.

I had to get my autistic daughter, of course, and get her to get in the car. And it used to always be the sort of thing that she couldn't easily be moved in a rush, but I said to her, Pete is sick, get in the car and she just got up and walked out and got in the car.

Rob: Very interesting.

Client And she then -- we were driving along, she turned around and said to him -- he was lying down in the back seat, by now. He couldn't actually sit up. He had started to get -- the fluid was releasing out of his blood vessels and it was like he was a sack full of water. If I carried him, the fluid was going from one end to the other. And I just had to lay him down. She leant over him and said, Peter, we're going to get you to the hospital in no time.

And I was just driving along thinking she's just made the first novel sentence of her life and I went, this is a truly weird day. I know something special is happening here and it's not

good. But anyway, I drove like the devil and got him there and got held up by a really horrible nurse in triage, who wouldn't see him even though I begged people. And in the end, after waiting 20 minutes, I stacked a little tanty and said that you've got to see him now. He can't wait another minute because kids were going through with broken arms and getting seen first and I was saying, you know, its now time.

And I tried to be good in the whole 20 minutes. And then they saw him and they just scrambled to intensive care and it was okay. But then he nearly died so it was really, really awful. He was, in 45 minutes, he was on a ventilator and he was in a coma in an hour. They sent me out to go and buy Rifampicin for my husband and I to take, the antibiotic to clear the carrier [stain]. And I went before he went to intensive care and the whole time I was out, buying this down in City Road, Brunswick, I was thinking, I may never see my son alive again. And it seemed really cruel that they'd sent me out of the hospital to go and buy that, rather than call in a pharmacist.

Rob: Yeah. Yes, that is cruel.

Client: And I got back and he was in a coma.

Rob: Inhuman, actually.

Client: Yeah.

Rob: More than cruel.

Client: And I got back and he was in a coma and for the rest of the night, he was really just hanging on. And it got to

about three in the morning or two in the morning and I had been dozing and I woke up and went to see the team. It was just a team working around him. They had a doctor at his bedside all the time and about five nurses and technicians. Everything was being done. And they turned around and they all looked at me and they said, we just have to say that fatality is a definite moment here, that we're doing everything for him, but everything we do, it just reverses and we go to the crisis in the opposite extreme.

And I went and woke my husband up, who'd fallen asleep. But he just walked in, saw all the readouts and just put his head down and that was it. He just tuned out. And in fact, I had just started to talk to Peter about all the things that he loved and all the good things that -- because they were saying his heart was probably going to give out because his body was full of fluid and was no longer within blood vessels and things. It was just swishing around and his heart just wouldn't be able to pump it around.

So I thought, if I can talk to him until get that heart to hang in there just for another 24 hours. They were doing their best to get the fluid load out of him. So I talked to him about stuff that he loved. We were building a tree house for him at the time and I said, you know, get out of here and there'll be a tree house and the little eyebrow went up, one eyebrow. And then I said, so there's the tree house coming and, you know, I did promise, we did promise you a new bike. Up went the eyebrow. And then I said, and you know how you always want to play chess? We'll be playing chess so much. No eyebrow. So I tried it again. No eyebrow.

Rob: Find out the important things.

Client: And I went through like that and I just kept naming. And for about two hours, I just named and talked and talked to him about how we'd both been doing all this health and fitness stuff and we could get back there. And I actually felt a tugging in my stomach as though there was a cord linking him and I. And after about two hours, I looked up and there was a nurse at his head end and she said, he's going to make it. And I said, yeah, I think so too. And everyone else was saying, we're in deep shit here. There's nothing good about to happen. And she and I just sat back and went, well we feel something has changed and he had a bit of a rocky road, but he came out of it and he survived.

But what I'm finding now is that all these years later -- actually what happened after that, we got him home, he was fine and our marriage broke up. It had been on the rocks anyway. And, but now, what I find is sometimes I go into his room and it was much worse before when he was younger, but I go into his room to wake him up and he lies, he sleeps in the nude. And if I walk in and see his chest just lying there and he's asleep, I get the flashbacks straight to intensive care. And I think he's dying and I get the whole thing. And I can have this every morning, before I even go to work, some days.

So and I've also got this thing that I have this sort of belief now that the absolute worst can happen. Like I remember sitting there at one stage thinking I can accept if he comes out with brain damage because I already have one child with brain damage. So if I could just be allowed to take him home and I'll have him. And that was just a really amazing moment

to get to that sort of thing. I'll take my child with brain damage if I have to. And now -- so that really changed me a lot as a person because I realised that the bad things can just keep happening.

Rob: They can. They can. And what would be a preferred experience for you? What would you rather have happen? I mean, he is precious to you. He, I mean, he always was, but somehow even more now.

Client: Yeah.

Rob: And you don't want to lose that.

Client: No.

Rob: So what when you, you know, in the morning, how would you like to -- what would you like to have happen there?

Client: Well I would like it that, you know, I could open the door and see him and actually be ecstatic that I'm seeing his body there instead of that vision thrusting me straight back to that fear and that distress.

Rob: When he came home and he got through it, there were some setbacks, but he got through it and do you remember the first time that you saw him, instead of thinking he's going to make it, thinking he has made it? If you remember -- if you were to remember what it's like to look there back then, those years ago and seeing him and say, ah, he has made it.

If you could just look at that for a moment and perhaps, as you're looking, have in the background, the garden knowing that the garden wasn't going to make it. And even though

you know the garden has made it and maybe some bad things are going to happen, certainly some things can happen in the garden. Some of them will be bad. It can be similar. But somehow you can't believe that the garden has made it, but you look at the garden and there's some appreciation there, there's some -- it's not exactly peaceful acceptance, but there's something. And that feeling, looking at the garden, I can't believe it, it's so good and it's going to be even, as it grows, it's going to be even more.

And having the garden in the background and somehow seeing Peter now in the foreground. He's made it. And when you look at him, look at his body and you see he has made it. And if you can look at that and really see it and really feel it, you can be incredulous. Even though you know he has made it, at some level you can feel I can't believe this. But there's something about I can't believe it, which makes him, makes the garden, makes the experience even more precious, even more lively, even more vigorous.

And as you look at that image of him years ago when you saw he has made it, now how clearly can you see his body and see he has made it? Clearly? And as you look at that, how do you feel?

Client: Calm.

Rob: Oh, really? Not incredulous?

Client: Yeah.

Rob: Yeah, yeah. So it's hard to believe, but you feel calm. You didn't dare believe; you hurt. You new at the same time,

you hoped and you didn't dare hope. They were all -- but you see now, he has made it and you can feel calm.

Client: Mm.

Rob: And it's good to know he has made it. Just [let them go] and just like none of the workmen would do what was needed, bloody nurses and doctors who [inaudible 20:47]. But the garden has -- and, and, you know the garden, you lost, you know, with Peter, you lost it. So, sometimes losing it is a good thing.

I'm reminded of that one of my favourite stories that I may have even mentioned before about a man living with his son. And a horse comes into the farm. Yeah. You know that story. And the neighbour says that's good and the farmer says, well, it might be good, it might be bad. The son gets on the horse, falls off and breaks his leg. The neighbour says that's bad. The farmer says it might be bad, it might be good.

The king's recruiting people come around looking for soldiers. The boy's got a broken leg, can't go to the army. The neighbour says that's good. The farmer says, well, it might be good, it might be bad. We find out afterwards, eh. But, my friend Bill MacLeod told me that the end of that story was that the horse ran away and the neighbour said that's bad and the farmer said it might be bad, it might be good. And they went looking for the horse and found a whole herd of them and brought them back and they were very, very rich as a result of that.

But the garden was the way it was and you thought it wasn't going to make it. And every time you look at it, you

can see a lot of doubt, a lot of uncertainty, but now you look and see the garden's made it. Then if you look at Peter back then and see he's made it and you can feel calm. It's good to know that you can feel calm. He's made it. How does that feel when you let yourself know calmly he has made it?

Client: That feels good, but I guess the next thought is, what if, what's the next thing?

Rob: Oh, there will be a next thing.

Client: That's the bit I'm worried about.

Rob: Oh, fair enough. Well, that's future trauma. You'll have to deal with that later, but I mean, there's stuff to do with the garden too and some bad stuff is going to happen to that garden. Some of the plants might die. Someone might -- Peter might tread on something or break something or I don't know. What have you learnt from the garden up until now that's going to help you to deal with the things in the garden in the future?

Client: Oh, that there's just always a new plan out there.

Rob: That's right. And you can talk to the plans. You can talk to yourself and you can watch the eyebrows going up.

Client: Look for signs of life.

Rob: The sign of life. You look for it. And the fact that your daughter got into the car and said what she said, maybe that wouldn't have happened without that. So, you know, no-one would wish that on anyone, but you know, it was bad, but it

may have been good to her. And you will never take him for granted, that's for sure.

And you found out about your husband and you found out about that GP and you found out about that bitch of a nurse. And you found out about the system of sending you away to get something. Sometimes, there are some inhuman, sometimes there's some cruelty, sometimes stuff happens and there'll be cruelty in the future. You can be certain of that. But as you say, if you look for signs of life, watch for that eyebrow and sometimes it doesn't go up when you think it will. You thought it would go up with chess, but it didn't. And you found out something then.

And the same thing would happen with the garden, some unexpected things can happen. And you can find out some things and certainly find out what's important. I remember Erickson saying that he would love to walk along a footpath and see a weed growing up between bricks, between a little crack in the concrete.

I was being driven to the airport the other day and along a **[inaudible 25:58]** in the road, a rock face, there was a tree growing. There's no soil there. There was a tree growing. How do they do that? So when you look tomorrow morning and you see Peter and you see he has made it, how does that feel?

Client: Sort of good and right.

Rob: It may be some time, some years in the future where you might think I wish he hadn't made it. When I was 18, I crashed the family car for the second time in six weeks and I

think my father wished I hadn't made it. But tomorrow morning, can you look forward, can you look in tomorrow morning and seeing and knowing that he made it. How does that feel?

Client: It feels good.

Rob: Any doubts about that? Any qualifications there, that little something in the way you said that.

Client: Well I think, no, I don't have doubts. I just think it's such a change. It's going to be a change, but I can see it.

Rob: Is it too drastic a change?

Client: Probably not too drastic. It would be a good change.

Rob: Yeah, but it might be nice if you didn't have it happen all at once, that maybe tomorrow when you go and look, there might be ah, he made it and there might be little shadows of he might not have or wouldn't it have been awful if he hadn't. That kind of -- there might be some of that sort of swimming around the edge of that.

And I personally and this is just my opinion, I think it would be beautiful if even in 10 years' time, you were to see him and have just a momentary remember, remembering of was he going to make it. It helps to keep him precious. Like with the garden, to look back and think, you know, there were times when you knew it was going to be catastrophic. Somehow makes it more precious.

Client: Mm. It does.

Rob: You don't need to get rid of the totally. Is that more agreeable?

Client: Yeah, that is.

Rob: Good.

Client: That's great. That is good.

Rob: Okay, are we done?

Client: Uh-huh. Thank you.

Rob: Thank you so much for sharing that precious, such a precious experience, so precious.

Client: Yeah, it's got a lot in it, but that feels better now to imagine that -- I even like that idea about just sort of not trying to get rid of it completely.

Rob: Well, you let me know that because there was a way that you said yes, that was like a little sniff or something there. It wasn't quite...

Client: Convinced.

Rob: No. Something like that.

Client: I was convinced and I actually had the feeling that I could do it, but it was sort of such a big change.

Rob: Yeah, there was a qualification there. There was kind of a -- there was something in the way you responded that was like maybe too big a change. So seeing that you're asking to let that happen a little bit less dramatically.

Client: Yeah, well that feels great, actually.

Rob: I mean, just imagine if your garden did one of those television shows, you know, where they come in and suddenly there's a garden. Its like get out of here, you know.

Client: Yeah. Yeah, you would be really deflated if I had that happen to you, I reckon, in a weekend flat.

Rob: Yeah, that would be awful.

Client: This has really got my money's worth out of this, you know. It's been about three months that I'm just non-stop doing things and, yeah.

Rob: Okay, so maybe you might want to take three months to let this happen too.

Client: Mm. No, that could be right.

Rob: And even for some of the time, you might -- the flashbacks might be there very strongly and you might think this is going to be permanent, there's no way out of this.

Client: And then I can sort of think maybe they won't be permanent.

Rob: Yeah, actually, you don't know, but it's nice to know that there are various options and you can somehow feel lost at times, but know that you can manoeuvre and eventually you'll get to where you get to.

Client: Yeah, that's just the next plan to try.

thanks

I'm grateful to the people who have generously permitted us to share their hypnotic experience, so we can learn to be more effective in our work.

Resources

Websites www.cet.net.au

<http://robmcneilly.com>

Email rob@cet.net.au

Other enhanced ebooks by Robert McNeilly [available on Amazon Kindle]

Utilisation in hypnosis - building on an Ericksonian approach

Utilising hypnosis with children - a girl returns from a dog phobia

Hypnosis in psychosomatics - utilisation after Erickson

Listening for Solutions in Hypnosis - utilisation after Erickson

The Poetry of Therapy - Creating effectiveness after Erickson

Coaching for Solutions

Connecting Hypnosis 1 After Erickson the Fundamentals

Connecting Hypnosis 2 After Erickson Demonstrations of the Fundamentals

Connecting Hypnosis 3 After Erickson Demonstrations of Experience of Hypnosis

Connecting Hypnosis 4 After Erickson Demonstrations of Clinical Applications of Hypnosis