

ELKANAH COUNSELLING

www.elkanahcounselling.com.au

Spring 2006

1 Whitehorse Road
Balwyn VIC 3103

Phone: 9817 5654
Fax: 9817 5654

Reception staff:
Helen Waterworth
Robyn Everest

Reception Hours:
10.00 am – 4.00 pm
Monday – Friday

Consultation Hours:
8.00 am – 8.00 pm
Monday – Friday

8.00 am – 12.00 pm
Saturday

Consultations by
appointment only.

After hours: Elkanah
does not operate a
locum service. If you
need crisis assistance
Lifeline can be
contacted on 13 11 14.

**JOHN
ANDERSEN**
B.A., Dip. Psych.,
M.A., M. Sc.,
M.V.A.F.T.



**LYN
SHAND**
B.A., Dip.Ed., Grad.
Dip. Psych.,
M.V.A.F.T., M.A.P.S.



**KERRYL
BEISSEL**
B.Sc (Hons – Psych),
M.A.P.S.



**SYLVIA
WERBA**
B.Ed. (Psych.),
T.Sp.T.C., M.A.P.S.



**MELANIE
BIRCH**
B.A., B.B.Sc.
(Hons), Cert Pastoral
Psych, Adv. Cert
Trauma, M.A.P.S.



**PETER
SALE**
B.A. (Hons – Psych),
Associate M.A.P.S.



Introducing: Peter Sale

We are very happy to welcome Peter to our practice as a counsellor and probationary psychologist.

He has worked in a variety of corporate and workplace settings and has experience in work burnout and stress related issues. Peter has interests in career transitions, psychometric assessment and employee workplace assistance.

His areas cover support for those struggling with motivation, depression, anxiety, phobias, family conflict and deep relationship issues.

He has interests in men's relationship issues with a particular emphasis on dealing with life change, anger, addiction and personal growth and development.

Peter draws on various psychodynamic and person-orientated styles together with a solution orientated focus.

He is married with four children and is involved in his local community, Schools and Church.

INSIDE THIS ISSUE

- | | | |
|---|---|---------------|
| 2 | What Makes Counselling Effective? | John Andersen |
| 4 | Getting Along with Difficult People at Work | Peter Sale |
| 6 | Get Your Hormones in Balance | Lyn Shand |
| 8 | Sibling Rivalry | Sylvia Werba |
| 9 | Provision of Psychology Services Through Medicare | |

What Makes Counselling Effective?

John Andersen.

Why does counselling work (sometimes)? People come to see a counsellor or psychologist because they want to bring about change in their lives. Their life is not working out the way they want. They are hurting over it. They want change.

Important questions we all bring to counselling are:

What makes counselling effective?

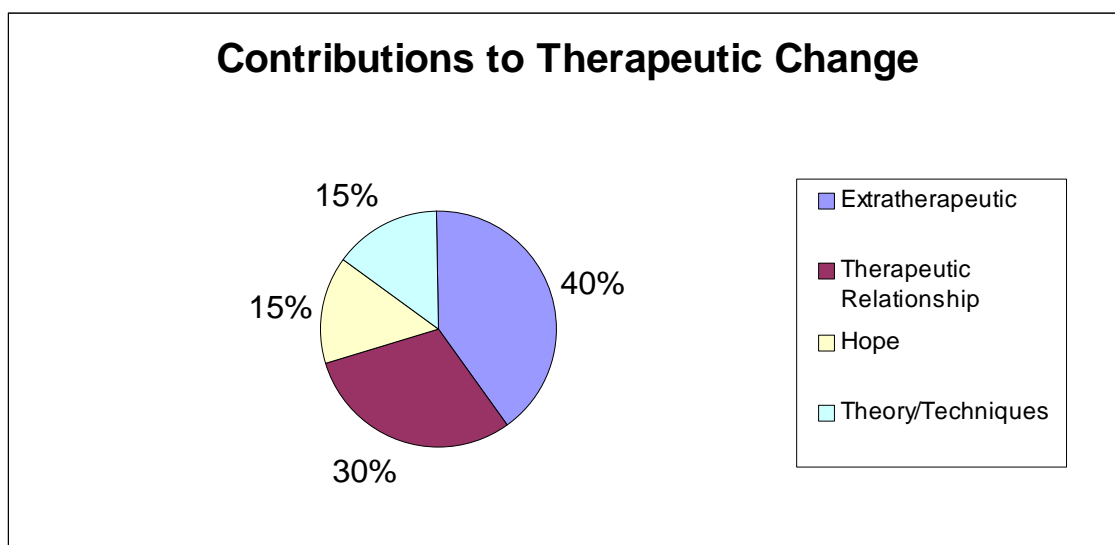
What needs to happen for the change I desire to happen?

Does it all depend on the right therapist, or the right treatment?

What contribution do I, the client, make?

Psychologists have devoted a lot of research to seeking an answer to these questions. The picture that is emerging increasingly supports the conclusion that successful counselling outcomes are the result of contributions of both the counsellor and the client. The particular approach adopted by a counsellor is not nearly as important as the quality of the working relationship between counsellor and client, and the contributions the client makes to counselling.

Miller, Duncan and Hubble¹ identified the following factors that promote change, and the proportion of times significant client change is produced by the contribution of these factors. These are summarised in the chart below:



¹ Scott Miller, Barry Duncan & Mark Hubble. (1997). *Escape from Babel: Toward a unifying language for psychotherapy practice*. New York: W. W. Norton

Extra-therapeutic factors relate to the contribution of client to therapy and chance events. What does the client contribute to successful outcomes? The client contributes more to therapeutic outcomes than the therapist or therapy - through his motivation, awareness, expectations and preparation. A client needs to be highly motivated – to genuinely want change and be willing to work at it. The personal resources a client brings to counselling are really important – resources that include: self-awareness, personal resilience, a capacity for growth, openness and readiness for change, an ability to secure support and assistance from others, and hope and expectancy of change. Highly engaged and motivated clients who are willing to take some risk and assume responsibility for change.

What are the contributions of the therapist to change? The first is the person of the counsellor himself or herself. The therapist is more important than the therapy. Therapy is an art. A good counsellor is a good therapist regardless of the theoretical approach he or she may adopt. The significance of the skillfulness of the counsellor is greater than the contributions of the model or approach.

First a good counsellor is able to create a good therapeutic relationship. There needs to be good ‘chemistry’ between a client and his or her counsellor. A strong therapeutic relationship has three general features:

- (a) bonds - trust, care, safety
- (b) goals - agreement on negotiated goals of therapy
- (c) tasks - the client needs to be comfortable with the therapeutic methods adopted by the therapist, and those methods need to be credible to the client.

Counsellors who are able to build good relationships with their clients do so by providing: a non-anxious presence, a good balance between emotional support and task-focused challenge to change, a balance of structure and flow with clear boundaries around the relationship, sensitivity and respect for the individual differences of clients with respect to religion, gender, and ethnic background, and are able to instill hope and confidence concerning change.

Where do therapeutic approaches come in? They serve as helpful road maps to help clarify where we are, what we are dealing with, and where we need to go. They provide specific things to do to help generate change. They instill confidence. This means the counsellor needs to be able to communicate confidence in his or her own approach to therapy, be genuine and consistent in the way he or she works. Who the counsellor is as a person needs to be consistent with the counselling approach he or she has adopted.

What is important to recognize, however, is that counselling is at best just one contributor to change. It is generally only one hour in the week. The most crucial contributions to change are made outside the counselling session, by the client in his or her daily life. Change is accomplished by heroic clients – every time.

Getting Along with Difficult People at Work

Peter Sale.

Generally when we meet difficult people in the community, whether it be at the football club or at a party we have the choice to walk away, avoid them and keep our distance. We all know who they are. They are often the ones who like to dominate, start arguments, control the situation or withhold information. Some people have personality types with toxic behaviour patterns which may cause serious emotional pain to others.

At worst we may have the occasional run in with them and the best action is often to 'keep away'. However at work we often cannot stay away and at times we may need to work closely with difficult people.

In fact we need to learn the ability to work effectively with difficult people as this is often a major determining factor of success in the workplace. The implications of not getting along with difficult people may include stress, frustration and inefficiency.

While we would like to leave we often can't as important things like the mortgage, car payments or school fees ensure we stay put. In fact at work we are in a professional relationship where our sole purpose is to get the job done. The company is depending on us to be able to work together, cooperate, work as a team and keep the business running smoothly.

People with difficult and toxic behaviours may not be easy to recognise at first. They are at times charming, highly motivated, engaging and informative. Often they are difficult to identify at a job interview as they are often well rehearsed, intelligent,

knowledgeable and polished. It is often not until they have started on the job that their true nature starts to come through. In fact they may work their way up the organisation ladder leaving a trail of upset and angry people in their wake.

So what types of personality behaviours are we dealing with and how do we learn to work with them?

Aggressive People

These are the people who force their views on others, at times with verbal abuse to warn off others and diminish the competition. They can dominate meetings, belittle colleagues and quickly inflame passions. If this is a boss or people manager even worse as they can often micromanage, set unrealistic deadlines and easily blow when they don't get it their way. Generally they have poor people skills. Ways to deal with them may include:

- Don't be defensive and attack back
- Make sure you do not get caught up in their game. Seek support from a caring colleague or superior.
- If you can avoid working with them then don't and make sure you are not in a position where they can undermine you or seek your collaboration.
- If you must work with them then ask them firmly to sit down and calmly explain their views. Ensure you listen without returning anger and let them calm down.

Passive-Aggressive People

These people often display passive aggressive personality types. They often lack assertiveness skills and prefer to control people with resentment and disharmony. They often use words as biting weapons. They prefer to attack in a cowardly way with back handed comments, inappropriate jokes and caustic words making the workplace a difficult place. We can deal with these people in ways such as:

- Don't let them get away with this behaviour. Tell them their sarcasm is not welcome.
- Praise their good personality traits and when they say something positive
- If their behaviour is too unacceptable recommend they see the employee assistance provider if this is available or see a counsellor reminding them the consequences of their poor behaviour may result in job loss.

Negative or Complaining People

Negative and complaining people can be draining and hard to motivate. They can be pessimistic and quick to point out faults in a new idea or project. They are often inflexible and difficult to change. Even with these faults they may offer valuable skills and resources to the team, be hard workers and get the job done. The challenge is to find a way for others not to be worn down working with them. Ways to deal with these people may include:

- Limit their responsibility and focus their skills
- Do not let them launch into negative or complaining comments. Set them straight on the situation immediately, be realistic with feedback. Distract them from their complaints, talk about the work focus, action plans and deliverables.
- For the sake of the team, structure their job so they have limited contact with others where possible.
- Keep them occupied and busy with problem solving and set realistic timeframes to projects.

While this summary of difficult personality types is not exhaustive, I have tried to identify some of the key behaviours with some suggestions on how to deal with them. Often aggressive, negative and complaining behaviours are a result of deeper problems below the surface. Sometimes these people have spent a lifetime wrestling with these socially inappropriate behaviours. While we may struggle to get on at work with these people it is often useful to try not to react with conflict or aggression ourselves as this is exactly what fuels these personality types, triggering unresolved issues within them. These personality types can be helped with counselling, but only if they realise they have a problem.

If you would like to make an appointment to see Peter, he is available for consultations on Friday evenings and Saturday mornings.

GET YOUR HORMONES IN BALANCE

Lyn Shand.

Psychologist Lyn Shand has 30 years experience as a psychologist and family therapist. For 12 years she has advised on natural bio-identical hormonal supplements for women. A one-time sufferer of inadequate advice and incorrect treatment, after a hysterectomy at age 33, Lyn is passionate about getting the correct information and ALL the options out to women on this important health issue. She prefers to educate women individually, so that they understand which hormones are out of balance, before they consult a doctor.

Lyn gives presentations to women's groups and has also produced a newsletter for many years. She has run courses and presently counsels on menopause, PMS (premenstrual stress), pregnancy sickness and post-natal depression, as well as seeing couples for relationship therapy. It should be noted that any work, psychological or relationship stress will make hormonal problems worse. On the other hand hormonal problems can cause relationship issues.

HRT (Hormone Replacement Therapy) can be divided into three groups: synthetic, bio-identical and plant mimics which contain plant oestrogens.

Synthetic hormones, which are the standard H.R.T. that everyone hears about, have been altered from the original chemical molecular structure so that the pharmaceutical companies can patent the synthesized version. For example, progestin is synthetic progesterone. Although many women can tolerate these modified hormones, many cannot. Also these contain standard doses which do not suit all women. Lyn believes that it is better to use the original natural form of the hormone, as less is required and they do not produce the negative side effects that often result from the synthetic ones.

Presently, over 600,000 Australian women take synthetic HRT to combat the symptoms of menopause. Recent US research has shown that synthetic HRT (synthetic oestrogen only or synthetic oestrogen and progestin) is linked with an increased risk of stroke, heart attack and breast cancer.

However, bio-identical HRT (hormones which have not been synthesized by drug companies) have the same chemical structure as those naturally produced by our bodies. They do not have the same negative side effects as the synthetic ones. The hormones can be divided into oestrogens, progesterone, testosterone and D.H.E.A. Individual women have very different needs in regard to the amounts of these that are needed to manage hormonal problems. For example, progesterone (not progestin) is what is needed for the P.M.S. types of symptoms— anxiety, migraines, sleeplessness etc. However, you do need a doctor's prescription for these and

many doctors do not know about them. They also need to be made up for the individual by a compounding pharmacist – similar to the old fashioned pharmacists who mixed up prescriptions themselves, rather than dispense packets of drugs.

The plant mimics of human hormones only really relate to oestrogens, not progesterone. For example, wild yam has phyto-oestrogens, which might help for some people with oestrogen deficiency symptoms but do NOT contain progesterone. However, some companies are selling wild yam extracts as if they do contain progesterone, which is not the case in Australia, as the Therapeutic Goods Administration will not allow products containing progesterone to be sold without a doctor's prescription. This is also the case in Great Britain but not in the U.S.A. where these creams can be bought over the counter.

There is so much misinformation about hormone replacements. Some doctors only seem to know what the drug companies tell them. In truth, every woman is different. Some need oestrogen only, some need progesterone only, some need a combination, or a supplement of the male hormone testosterone and others will tolerate the synthetic hormones. Others benefit from the plant oestrogens.

Lyn uses a detailed questionnaire to help decipher what hormones seem to be lacking from each woman's symptoms. This gives the woman a better understanding of her own body and her hormonal needs, before she decides which type of treatment to try or before she sees a doctor.

Lyn has recently attended an International Hormone Conference on the Gold Coast. This was a resounding success with over 400 delegates, mostly doctors, there. This shows the increasing interest in the use of bio-identical hormones. Of course, the drug companies do not like this, so in the week after the Conference, The Sunday "Age" newspaper had major headlines opposing the use of these natural hormones. It seemed that women and doctors are demanding their use. Why? Because they work!

Lyn owns and operates the psychology and family therapy practice at Elkanah Counselling, 1 Whitehorse Road, Balwyn. You can call her receptionists, Robyn or Helen on 9817 5654, for an appointment or a brochure.

She has also written a book called "Balance Those Hormones", which now sells all around Australia. It is available from Elkanah for \$22 or \$26 including postage.

SIBLING RIVALRY

Sylvia B. Werba.

Children argue for many reasons, and just as adults, sometimes their “angst” has a basis built on unresolved past issues. Managing children’s disputes is what even the best parents find most difficult, as there is often no training – other than their intuition and their own childhood experiences to guide them. Because there are no hard and fast rules for managing these disputes, parents often do silly things like:

Instantly taking sides according to what is immediately obvious

Asking two children with clenched fists to shake hands

Screaming out “No more screaming!”.....etc.

Children’s disagreements are actually a safe way to learn to cope with the inevitable disagreements they will meet in all areas of life. It is important for parents to promote friendly relationships between their children and help them to deal constructively with other disagreements when they arise.

Some suggestions:

Always reinforce, notice and reward children, whenever they play well together – Catch them doing the right thing!

Establish a list of “non-negotiables” – such as no weapons and no damage to persons or property.

Be creative – Devise motivational schemes.

Hold family meetings to discuss what is working and what is not.

Try not to interfere in disputes unless there is immediate danger. **BUT ALWAYS REWARD A POSITIVE OUTCOME.** If the outcome has not been positive, find a moment at a later stage to discuss it **privately** with each of the children.

Do not deal with aggression by using aggression, or do not raise your voice in order to be heard over the screaming. Perhaps turn off the light or the TV or the computer, etc., and sit down with the children calmly.

Children need to have a few things that they do not need to share unless they want to. They also need friends of their own, whom they do not have to share with brothers and sisters – unless they want to– although there is no harm in encouraging such

sharing.

Children also need space for themselves – a drawer or a box, etc. Ensure there are family rules designed to protect these “special places.”

Each child needs some privacy – time to be alone if they want to. Ensure there are rules to accommodate this – such as signs on the door saying “Privacy please” or “Thinking in progress” etc. At these times, others within the family should knock on the door, rather than just coming in.

Try not to give an easier child more privileges.

Be a good role-model for your children.

Children learn by example. Parents should be aware of how they manage their own disagreements and angry feelings.

Children need to feel they are valued and good at doing some things. Self-esteem helps children in their interactions with each other. Help children build up interests of their own and allow them to feel proud of these.

Avoid making comparisons between one child and another.

Verbalise the positives

Teach children to ask appropriately for attention or for help. Often children argue to get the attention of their parents. It is much healthier to encourage children to ask for private time to discuss something, or simply for some “mum or dad time”.

Leave unexpected little affirmative notes in unexpected places.

When disputes occur, remember to:

Remind children of previously agreed ground rules

Remind children that disagreements are normal when people live with each other. Help them to look for solutions rather than to “blame”

Always discuss issues **privately**

Separate children without taking sides, if they are hurting each other, or they are in danger. Address the concern privately at a later stage – or at a pre-established “family meeting.”

PROVISION OF PSYCHOLOGY SERVICES THROUGH MEDICARE

On October 9, details were announced of new mental health reforms that come into effect on November 1. These are comprehensive changes and increase community access to mental health professionals and team-based mental health care.

As part of these changes clients will be able to access Medicare rebates for up to 12 sessions of individual therapy and 12 sessions of group therapy per calendar year with registered psychologists who have a Medicare Provider Number.

Referrals can be provided to people with 'an assessed mental disorder' that is being managed by a GP under a GP Mental Health Care Plan, or a psychiatrist assessment and management plan, or on direct referral from a psychiatrist or a paediatrician (for treatment of a child). Psychologists provide a written report to the referring medical practitioner following the first six sessions and/or on completion of the course of treatment. The referring doctor will review progress after the initial six sessions, after which a further 6 sessions may be authorised.

The Australian Psychological Society describes a mental disorder as a term used to describe a range of clinically diagnosable disorders that significantly interfere with an individual's cognitive, emotional or social abilities. This includes people with mental disorders arising from:

- Psychotic disorders
- Schizophrenia
- Bipolar disorder
- Phobic disorder
- Anxiety disorder
- Adjustment disorder
- Depression
- Sexual disorders
- Conduct disorders
- Bereavement disorders
- Post-traumatic stress disorder
- Eating disorders
- Panic disorder
- Alcohol use disorders
- Drug use disorders
- Sleep problems
- Attention deficit disorder
- Obsessive Compulsive Disorder
- Co-occurring anxiety and depression

(Dementia, delirium, tobacco use disorder and mental retardation are not regarded as mental disorders for the purposes of the new mental health Medicare items.)

The GP Mental Health Care Plan referred to earlier involves the GP assessing the patient, identifying needs, setting and agreeing management goals, identifying any action to be taken by the patient, selecting appropriate treatment options and arrangements for ongoing management of the patient, and documenting this in the plan.

Under these new arrangements, psychologists are authorised to provide approved Focused Psychological Strategies (FPS). These include:

- Psycho-education
- Cognitive behaviour therapy
- Relaxation strategies e.g.: progressive muscle relaxation; controlled breathing
- Skills training e.g.: problem solving skills and training; anger management; social skills training; communication training; stress management; parent management training
- Interpersonal therapy

We warmly welcome these changes and the increased access to timely mental health services that will result for a great many in our community. For more information, go to www.health.gov.au and click on the *Better Access to Mental Health Care* icon.

ELKANAH NEWSLETTER

Feedback & change of details

We appreciate any information and feedback that can help us in providing our newsletter and other services to you.

Please complete the following if:

- You wish to advise us of a change in your mailing details
- You have feedback or suggestions for the newsletter
- You would like copies of our brochure

Please complete your details as currently listed

NAME:

POSITION/DEPARTMENT:

ORGANISATION:

ADDRESS:

POSTCODE:

TELEPHONE:

New contact details:

NAME:

POSITION/DEPARTMENT:

ORGANISATION:

ADDRESS:

POSTCODE:

TELEPHONE:

Are the above changes for: Address Change Replacement Contact Additional Contact

If you wish to be taken off the Elkanah newsletter mailing list please tick

BROCHURE REQUESTS - Number required:

Each newsletter contains articles written by members of our team of psychologists. Let us know of any of topics that you would particularly like to know more about, anonymously if you wish. Most of our psychologists are also available to present talks and seminars. Please contact reception on 9817 5654 for enquiries.

Comments:

PLEASE RETURN THIS FORM TO: ELKANAH COUNSELLING, 1 WHITEHORSE ROAD BALWYN 3103