

# Unlimited Human Magazine ABI Article 13<sup>th</sup> June 2017

## Bio

Michelle Mayur is an Accredited Goulding SleepTalk® Consultant at [www.unconditionallyloved.com.au](http://www.unconditionallyloved.com.au) and an Amazon #1 Bestselling Author for *Embraced by the Divine – The Emerging Woman's Gateway to Power, Passion and Purpose*. Michelle is passionate about building strong self-esteem and emotional resilience in children. Since 1995, Michelle has been running Angel Wings Healing in Melbourne, Australia, and uses hypnotherapy and energy healing. She works with clients globally and has been interviewed on numerous radio shows and telesummits.

## SleepTalk®: Improving Quality of Life for Adults with Acquired Brain Injury

Have you ever made a simple comment to someone that turned out to be life-changing? For me, it happened when my friend Joane Goulding, Founder of the Goulding SleepTalk® for Children process, was just about to leave my home after a coffee catch up. I casually asked if she had anything planned for that evening. After her response I mentioned that I would be going to see my ABI (acquired brain injury) client, aged 30, that evening for his fortnightly energy healing session in the aged care facility in which he lives.

That was it – the lightbulb moment – when I wondered out loud, “Could the principles of SleepTalk® be adapted for adults with acquired brain injury?” Joane had been telling me previously about the wonderful results she and accredited Goulding SleepTalk® consultants around the world had been getting training parents in SleepTalk® to address all manner of behavioural and emotional issues in children. SleepTalk® is about teaching parents to work with their own child/children while they sleep and when they awaken, children have a more positive mind set. It only takes parents about two minutes per evening and the changes last for life. Parents talk – children listen – waking up bright and happy.

## My Interest in Acquired Brain Injury

The World Health Organization (Geneva 1996) defines an ‘acquired brain injury’ (ABI) as ‘Damage to the brain, which occurs after birth and is not related to a congenital or a degenerative disease. These impairments may be temporary or permanent and cause partial or functional disability or psychosocial maladjustment.’

Let’s backtrack a little. I had first become interested in disability through my now deceased partner, who had fought tirelessly for the rights of people with disabilities, earning him an Order of Australia medal. It was a whole new world that opened up for me and I did a qualification in disability studies for personal interest. It was incredibly confronting to see young people, especially, languishing in aged care facilities amidst the wailing and moaning of much older intellectually-impaired residents. My heart broke.

I first met my client (let’s call him Danny), aged 30, through his mum about eight years ago, two years after his near-fatal car crash when he smashed the left side of his head in. Unable to

move, non-verbal and fed through a tube in his stomach, he had been having numerous different therapies to try and regain some of his former functions, but was still largely unresponsive. Initially I tried creating custom hypnotherapy audios for him based on the concept of neuroplasticity and the work of Norman Doidge, M.D. (*The Brain that Changes Itself*, 2007). In other words, with neuroplasticity if one part of the brain is irreparably damaged then over time another part of the brain can take over its function. I realize now that I was close with the hypnotherapy audios I created about creating new nerve pathways – and even saw some positive results with Danny – but the piece I had unwittingly left out was the necessity of *first* creating a firm foundation in the subconscious mind of feeling Loved and Lovable. Both Danny’s mum and I felt intuitively he was very angry towards himself for the car crash. At other times it was if was he shutting down completely and trying to die. He needed to have a core belief that no matter what he had done he was unconditionally loved.

Being blessed with some psychic ability, for want of a better term, I often receive sensory impressions that are outside the range of normal ability. In Danny’s case, he showed me an image of his small consciousness banging and yelling inside this huge empty shell of a body. The message was clear to me that his consciousness was still functioning, even if he couldn’t get his body to do anything he wanted it to. This clear vision kept repeating in my mind and has been arguably the biggest impetus in my decision to research the effects of modifying the principles of SleepTalk® for working with adults with an ABI.

### **Modifying the SleepTalk® Process for Adults with an ABI**

The Goulding Sleptalk® for Children process empowers the parent or guardian to instill core beliefs directly into the child’s subconscious mind of being Loved and Lovable as a firm foundation for developing high self-esteem, confidence and emotional resilience for life. The results are measured at three monthly intervals across standardized charts of physical, academic, behavioural, emotional and other parameters. Customized statements may also be included.

To make the SleepTalk® process applicable to adults with an ABI, I modified the language of the Foundation Statements in such things as changing ‘Daddy loves you’ to ‘Dad loves you’, but left the meaning of the Foundation Statements the same.

The main tool of measurement in SleepTalk® is the ‘Where is My Child at Now?’ document, which obviously was not applicable for an adult with severe brain injury. I completely modified this document for ABI clients to be a meaningful measuring tool to pick up the shifts and subtle nuances over time in physical ability and mood as well as in interaction with others.

### **Case studies**

I have been working with four adults with an ABI using this modified SleepTalk® approach for approximately six months. All are in the age range of 20 – 32 years old and have severe brain injuries sustained through road trauma, attempted suicide by hanging, clinical death from an extreme asthma attack or oxygen-deprivation to the brain from multiple epileptic seizures. Three are living mainly at home with a parent and one is living mainly at an aged care center. I

have created customized audios using the voices of family members delivering the Foundation Statements for continuity for those clients who do not always live at home. Consistency is the key to the success of the SleepTalk® process.

This modified SleepTalk® work is something I would like to take to the mainstream of disability healthcare professionals when I have completed more pro bono case studies for 12 months or more with ABI clients. So I am being strategic in comparing 'different varieties of apples' rather than comparing 'apples, pears and apricots'. That is why I am just working with adults in that age range and only for ABI. I passionately believe that this work could also be suitable for adults with disabilities such as brain injured war veterans, cerebral palsy and stroke victims.

## Results

Even with a limited sample of case studies the results so far have been astounding. In fact the progress of these ABI clients shows similar trends to regular SleepTalk® for Children clients. All the ABI clients have shown positive changes in the first few days and have then plateaued for a while during a variable integration period before more changes take place. Consistently the positive changes have been greater happiness overall, more relaxed, calmer and more engaged and responsive. Danny has even spoken for the first time in 10 years!

Frustration-related behaviours, such as head-banging, seem to have markedly diminished in intensity, duration and frequency. Similarly, episodes of involuntary spasming have also reduced.

Unfortunately one of the mothers has recently dropped out of the study due to personal issues. The remaining young adults are all much more socially engaged with others and no longer close down around unfamiliar people. The one with multiple seizures had been showing pronounced autistic behaviours previously, but is now happy helping his mother, has greater co-ordination and has the first friend he has ever had at respite.

One young man who used to play keyboards before his ABI has now regained enough finger dexterity that he can play deliberate notes using iPad keyboard software.

## Conclusion

As far as I know I am the only person using the SleepTalk® principles with ABI clients at this time. A greater number of case studies with adults with acquired brain injury are required before this modified version of the Joane Goulding's SleepTalk® for Children process can be credibly presented to mainstream healthcare professionals such as occupational therapists, speech therapists and physiotherapists and also to key people at residential institutions for the disabled.

The results so far are showing that changes are consistently occurring in the client's overall happiness, relaxation and engagement with others. Even these changes, which may seem relatively minor to some people unfamiliar with disability, can represent huge shifts in the quality of life for not only the person with the ABI, but also for their family and carers. The stress on the parents' marriage and on other siblings can be enormous when a child/young

adult has a brain injury, so when a person with an ABI is happier it has a positive flow-on effect to the happiness of everyone around that person.

Please contact me! I am looking for more ABI clients in the 18 – 35 year age range to do pro bono work with over a 12 month period each. Distance is no problem as I see the parents via Skype or phone anywhere in the world or in person in Melbourne.

Please contact [michelle@angelwings-healing.com](mailto:michelle@angelwings-healing.com) if you have someone in mind with an ABI who you think is suitable for a case study or if you would like to get further information.