Kluwer Mediation Blog

A Neuro-Linguist's Toolbox – Self-Care and Improvement: Working with Physiology

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For readers who are new, the "Neuro-Linguist's Toolbox" series is an ongoing series focused on using Neuro-Linguistic Programming (NLP) in our practice of amicable dispute resolution. The first section (with 6 entries) focused on rapport (the first of which can be found here).

This second section focuses on matters of self-care and personal improvement for mediators. For ease of reference and the convenience of readers, I will list in this and subsequent entries the series the entries in this section.

1. A Neuro-Linguist's Toolbox – Self Care and Improvement: Preliminary Thoughts

In this second entry of this section, I would like to focus on working with physiology to further self care and improvement.

Before going further, it would be useful to state an operating assumption as well as the goal sought in discussing these interventions. These entries assume that we, as mediators, occasionally find ourselves in unresourceful situations. This could be in the context of a live mediation i.e. at the mediation table, or outside of it. In these situations, we can feel stuck and unable to think of ways to respond constructively.

To illustrate this, can you think of a difficult interaction you had recently which you feel did not go as well as you would have liked and which you still feel bad about? As you think about it now, notice your posture and your breathing (physiology), what you are feeling (state) and how you are representing the event to yourself in your head (representation). At this point, if I were to ask you to think of solutions, chances are you either will not be able to think of any or may only be able to come up with solutions which are not particularly resourceful.

NLP suggests that this particular configuration of physiology, state and representation prevents you from considering or thinking of certain solutions. NLP also suggests that, because these variables are systemically related, changing one variable in the configuration will affect the others thereby creating a change in the way we perceive and respond to that situation. The goal then is to access a more resourceful space thorough the suggested interventions.

To this end, I would like to offer three possible interactions at the physiological level. The first relates to how we physically hold our body. When one experiences being unresourceful, it is often described as feeling off balanced or uncentered. While this can be taken to be a metaphorical

description, if we assume for a moment that it might be literal, then the solution is to regain and maintain one's balance. The simplest way to do this is to first become aware of how one is standing/sitting at that moment and then to reconfigure one's physiology so that both feet are firmly planted on the floor and about shoulder width apart, and to straighten one's posture. (As an aside, those familiar with Virginia Satir's communication styles will recognise this as the "leveler" mode. Practitioners of the martial arts, chigong (??) or dance will also recognise the parallels here.)

Sometimes, it is not about feeling unbalanced but about experiencing a mental block. While changing one's physiology to a more balanced one may help, there are two other things that might help. Once again, become aware of your physiology at the moment of being "stuck". Chances are there is very little movement, if at all. The suggestion is to introduce movement. Stand up and move around. Physically changing locations, environments and moving can often move you from being stuck. Darwin, while formulating his ideas about evolution, reportedly constructed a sand-covered "thinking" path at Downe House which he would walk to think about his work.

The other suggestion is to adopt a mirror image of the physiology that is part of the configuration of being "stuck". For example, if one's left arm were crossed over the right, reverse it. Doing the opposite physiologically may well create an opposite mindset of "stuck". Readers interested in this may wish to refer to an earlier entry devoted to Movement in Mediation.

The first physiological intervention has been about physically manipulating the body. The second physiological intervention involves our breath. When one is feeling unbalanced or stressed, one is often breathing quickly and shallowly. Those who hyperventilate in times of anxiety will be familiar with this. Sometimes, we may even hold our breath. This is an indication of sympathetic nervous system arousal as our body prepares to fight, flee or freeze. The easiest to deal with by simply going back to breathing, but in a very specific way. The breath that helps us regain our balance is diaphragmatic or belly breathing. This means breathing using as much of the lungs as possible, by taking a slow, steady and deep breath and sinking that breath to a point just below your navel. The breathe is then held for a period before slowly and steadily being released. A simple formula to follow is a 4 count.

– Breathe in (4 counts)
– Hold (4 counts)
– Exhale (4 counts)
– Hold (4 counts)

This diaphragmatic breathing lowers your mental centre of gravity and grounds you. Diaphragmatic breathing will be familiar to those who sing, or practice chigong or Yoga. Diaphragmatic breathing will invoke what Dr. Herbert Benson refers to as the relaxation response.

The final physiological intervention is activating the peripheral vision response. The human eye is geared towards two types of vision. The first, foveal vision, is a function of the cone cells. This is central vision, which gives you clarity, accuracy and detail of vision. The second, peripheral vision, is a function of rod cells. Peripheral vision detects context and movement. When we are stressed, we tend to fixate on foveal vision, often leading to what is referred to as tunnel vision.

Going into peripheral vision activates the parasympathetic nervous system which, among other things, lowers blood pressure and relieves stress. Peripheral vision (sometimes referred to as "soft eyes") can be activated by first fixing one's attention (foveal vision) on a distant point, then paying

attention to movement in the environment—without moving the eyes. It takes some practice, and can be assisted by having a friend stand to the side and make hand movements. Once you get used to being able to see your surroundings without having to look directly at it, it will become easier to call into use. The key in activating peripheral vision is to not worry about detail but to look for movement and context.

By way of closing, I would like to make two final observations. First is that these three physiological interventions can be used on their own or in conjunction with one another. At some point, they are also interrelated. For example, diaphragmatic breathing can also lead to the activation of peripheral vision which may in turn lead to one being balanced, both physically and mentally. Second, one should practice these physiological interventions so that they will be ready to be deployed when one needs it. As the saying goes, the time to learn how to swim should not be when one is drowning.

I hope this has been interesting and that you will find these techniques helpful to you.

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