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Edited and published by Joel P. Bowman and Debra Basham for SCS Matters, LLC April 2007

TimeWarp TechnologiesTM Newsletter

Welcome...

Here is your TimeWarp Technologies™ Newsletter for April 2007. This newsletter may be duplicated and distributed to those who share an interest in Energy Medicine, neurolinguistics —especially Neurolinguistic Programming (NLP)—and spirituality.

This month the featured articles are "Emotions and Orientation in Time," by Debra; "What if You Were a Hypnotist and Didn't Know It?" by Joel; "The Truth about Healing," by Debra; and "What if Everything You Believed about NLP Were Wrong?" by Joel.

Emotions and Orientation in Time

The way we structure time has a significant influence on our behavior, and our current orientation in time—past, present, future, has a significant influence on our current emotions. Images appear in different locations in your "mind's eye" when you are thinking about a previous experience, or an anticipated event. When people talk about what they have done or plan to do, their gestures will reveal their timelines. People will literally point to "last week" or "tomorrow" in conversation. This is the foundation of timeline therapy.

It is quite evident that emotions, from an evolutionary perspective, helped determine who would survive. Every interaction has an emotional component, and when we were facing tigers and bears on a regular basis, sufficient emotional zap enabled us to remember an area was unsafe. That emotional zap was vital for survival so long after

the event was over, emotions about what had happened remained stored in our brains.

Just as an individual's pointing to "last week" or "tomorrow" tells you where he or she stores the pictures that represent his or her timeline, the current emotion an individual is experiencing shows you where, in time, the current focus of the individual is. Most people understand that you cannot cross a bridge until you come to it. Religions even mandate followers not to worry. Yet, many individuals experience fear, worry, anxiety, and even extreme panic attacks—without being aware that those emotions are feedback of too much of a future orientation in time.

In the same way that fear-based emotions are feedback of too much future focus, anger-based emotions are feedback of too much focus on the past. Guilt, frustration, and even grief come from this preoccupation with the past.

You can prove this to yourself by thinking about something that you might feel some worry or anxiety about. Ask yourself some simple questions about that situation. Is it something that has already happened or something that might, could, or may occur? Now think about something that you feel some sense of guilt or remorse about. Notice that these emotions are coming from an event that has already happened in the past. While the sense of loss that often accompanies grief can also have a future orientation, the loss itself and the emotion of grief is about an event that has already occurred.

While there is great value in not wasting the present by worrying about the future or ruminating

about the past, when a person's focus is *totally* on the now, it is difficult to learn from the past or plan for the future. Now, however, you can begin noticing how orientation in time influences your emotions, and you can make adjustments in that orientation, thereby experiencing relief from unnecessarily painful or difficult feelings.

In verbal communication (including both written and oral communication), the verb tense indicates where something is placed on an individual's timeline. When people are experiencing a problem—a stuck state—they often use an all-encompassing present tense: "I am depressed." Simply changing the verb to a progressive tense may help the individual see him- or herself as moving through a particular state or problem: "So you have been feeling depressed." Remember that the universal present tense exists through time. When you say that something or someone is, by implication the tense includes past, present, and future. This is known as the "is of identity." Your use of language, specifically verb tense, affects your emotions by changing your orientation in time. Shifting to the past tense helps move the problem into the past.

Think about your mind's eye as being like a lens on a camera. By expanding how much of your timeline you can focus on at one time—seeing more of the past as *in the past*, all of the present, *and* a brighter future *in your future*, you will actually calm anxiety and relieve guilt and experience more peace of mind and overall well-being.

What if You Were a Hypnotist and Didn't Know It?

You may have seen the ad for a sleeping pill encourages you to obtain a prescription and take the medication for the *rest* of your life. Unless you are aware of the ambiguity of "rest," you've received a posthypnotic suggestion for life-long dependence. Everyone is either a good or bad hypnotist depending on the degree to which we understand hypnotic language and other forms of communication that occur beneath our conscious awareness. Understanding hypnosis is the best way to avoid unduly influencing or being influenced—for the rest of your life.

Hypnosis is one of the least understood—and one of the most misunderstood—mental phenomena. Milton Erickson, M.D., the founder of Modern American Hypnotherapy, defined hypnosis as "a reduction in the multiplicity of the foci of attention." Although this statement is more a description of what happens than it is of what

hypnosis actually is, it captures the essence of hypnotic trance.

Hypnosis or trance is a common occurrence—it's not the exception; it's the rule. You are actually in "trance" a great deal of the time perhaps without being aware of it. The question is *which trance* rather than *whether trance*. Some people actually have an "I can't be hypnotized" trance. Anything we do without deliberate, conscious attention is a form of trance

Whenever your focus of attention narrows—as it does when you read a good book, watch TV or a movie, engage in conversation, eat a meal, or drive a car—you experience a reduction in the multiplicity of the foci of your attention. You also enter a trance when you fall asleep (hypnogogic or hypnagogic) and when you wake up (hypnopomic).

At these times, you are more responsive to suggestion than you are when you are fully alert and aware. This is one of the reasons that manufacturers go to extraordinary means to secure product placement in movies and TV shows. They know that viewers will be influenced below their level of conscious awareness. While we all tend to resist suggestions embedded in advertising, we are not so resistant to the hypnotic language used by family, friends, colleagues, and—especially—those we consider authorities, including doctors.

The well-known and documented placebo effect is, after all, a form of hypnosis. A recent study by Harvard psychology professor Ellen Langer and her student, Alia Crum, explored the potential placebo effect of beliefs and expectations about activity and health (reported in Newsweek, February 27, 2007). They visited several hotels in the Boston area, where they persuaded cleaning staff—all women to take part in an experiment. About half the maids were told that the work they did every day was enough exercise to meet the U.S. Surgeon General's health recommendations. The maids were also told the number of calories burned by vacuuming a carpet, changing linens, and other tasks. A month later, the maids given the hypnotic command not only felt healthier, but also had lost weight, while those in the control group had not.

Too often, however, doctors (and others who speak with authority) are unaware of the hypnotic commands they deliver. The following are all hypnotic commands delivered by doctors to patients:

- "No one survives what you have."
- "You will never walk again."
- "This [pointing to a wheel chair] is going to be your best friend."

- "You will live with chronic pain for the rest of your life."
- "You will never have quality of life again."
- "There is no hope."
- "Although you may learn to manage the pain, you will never be without it."

And it is not just doctors.... We are all hypnotists, giving hypnotic commands to our students, children, spouses, friends, and participants in our workshops and conference sessions. For this reason, it's important for you to be conscious and purposeful in your use of hypnosis instead of unconscious and careless. That, of course, presupposes that you know enough about hypnosis to recognize it when you see it, hear it, and use it on others.

The Truth about Healing

I was enjoying an email exchange with a friend the other day when the subject of the truth of healing came up. She asked me about my idea of the truth about healing. I told her that it would be my goal to facilitate your being able to identify that "truth" for yourself. I went on to say that, for me, the truth about healing consists of both what healing is and what it isn't. If medicine, surgery, etc., were the cause, and healing were the effect, then why does it work sometimes and not others, and why do some people heal without medicine, surgery, or other interventions?

I suggested that she think about something really physical, such as a hip replacement, and notice how nothing the surgeon does—nothing the nurses do—actually makes the hip heal. If healing results not from what is done to the individual by others, then what is it that actually causes or allows healing to occur?

Several years ago, I received a phone call from a woman who has since that time become a dear friend. Because she had been experiencing a major medical crisis, she had forgotten the most simple and yet most profound fact: your body knows how to heal. I just reminded her of that fact by pointing out to her that she had probably at some time, in the past, cut her finger. She may have washed the cut, she may have put on an ointment, she may have put on a band aid, but her finger knew how to heal. I told her that the same innate healing capability of her body was active with her ability to heal from this current crisis. Although it may take a bit longer, the same marvelous innate healing capacity was present in her now. She has told me many times over the past several years how much that simple truth of healing changed the direction of her life.

What allows for this healing to be so natural? You and I might call it God, without even understanding what "God" is. Others might call it simply innate healing capacity. It may be mysterious and defy our understanding, but it is undeniable, and it is ever present.

Our greatest goal as facilitators of healing is to support the individual's discovering the attitudes, beliefs, and behaviors that activate that capacity to its maximum. The woman who made the phone call has witnessed some amazing healing in her life, even after just one session. What was that? It was *healing*.

In some ways, perhaps hypnosis, as we come to understand it more and more, may hold a key to recognizing more about this innate healing capacity. We do know that hypnosis, negative or positive content, changes brain neurology toward health or toward dis-ease. We also now know that the majority of the genes in our DNA can be changed turned on or off, by language!

A doctor who tells a patient that he or she has three to six months to live is actually giving the patient a direct hypnotic command. Unfortunately, too many people, in not recognizing that, have gone on and died. The doctor then thinks he or she was right about the disease process, but may have totally failed to see that he or she contributed to the outcome out of ignorance about the truth of healing.

Illness and the opportunity it presents people to engage consciously and actively in a journey toward wholeness can be one of the most transformative experiences that life offers. It provides you with space for self-reflection, for caring for yourself you're your needs in a way that may not have been possible in your busy everyday life. It can give you time for learning about who you are, your purpose, your potential; a time for reassessing your priorities and the value of your relationships, work, and possessions. Illness (or disease) can be the beginning of a deep, spiritual quest.

Rituals of Healing: Using Guided Imagery for Health and Wellness, by Jeanne Achterberg, Ph.D., Barbara Dossey, M.S., FAAN, and Leslie Kolmeier, R.N., MEd., p. 12.

Faith, hope, and believing that your healing is possible constitute the first step. Perhaps you would enjoy the *Remembering Perfect Health* CD. If one does not believe healing is even possible, how would one recognize the evidence that you are healing? And what do you think will happen once you know beyond a doubt that healing is not only possible, but that your healing is actually the most natural thing in the world....

What if Everything You Believed about NLP Were Wrong?

Neurolinguistic programming (NLP) has evolved since it was originally developed by Richard Bandler and John Grinder in the late 1970s and early 1980s, and far too many—including NLP trainers—have missed the changes. Many still think that NLP consists of only the concepts and techniques taught in workshops through the mid-1980s. Since Bandler and Grinder went their separate ways, Richard in particular has continued to refine NLP techniques and to develop the completely new strategies and procedures included in Design Human EngineeringTM, Neuro Hypnotic RepatterningTM, and Meditation, Magick, & ChangeTM.

Also, misconceptions about the original discoveries and techniques abound. Early research focused on proving that NLP didn't work. Eye-accessing cues, which indicate visual, auditory, and kinesthetic mental processing, in particular were subjected to a great deal of hostile research. Researchers consistently "proved" that eye-accessing cues must not be meaningful because they failed to match sense-based language. What the researches had missed, however, is the fact that eye-accessing cues reveal mental processing taking place outside the speaker's conscious awareness, while sensebased language reveals the conscious mental processing. Researchers also attempted but failed to demonstrate that NLP procedures taking only a few minutes were any less successful in treating psychological problems than months—and even years—of psychotherapy.

In my early days of NLP, I challenged a professor of psychology at Western Michigan University to comparative treatments of individuals with phobias. I would use NLP, and he would use traditional psychotherapy. He refused the challenge, saying that we should stick to "a review of the literature." One of the reasons that some psychotherapists have objected to NLP is that the prospect that a 20-minute intervention could be as effective—and perhaps even more effective—than months or years of psychotherapy seems a major threat rather than a huge opportunity to help more people more quickly and earn more money at the same time.

One of the continuing complaints about NLP has been that it is "manipulative" in the pejorative sense of that word. Such complaints miss the point that NLP is essentially effective communication. Those with excellent communication skills are generally more successful at getting what they want than those with poor communication skills. That, of

course, doesn't mean that they are devious in their dealings with others. In fact, the reverse is more often the case: those with excellent skills are in the best position to help others resolve problems and achieve objectives. The tool-whether NLP specifically or communication in general—is neutral and can be used ethically or unethically, depending on the individual user. A person can be ethical, have poor skills, and create a great deal of misery. On the other hand, those who are both ethical and highly skilled can make a world of difference for themselves and others. The real question is how ethical it is to fail to acquire the skills required to be a truly effective communicator. When you know that, however well-meaning, the wrong words said at the wrong time, can influence a person for the rest of his or her life, your sense about the importance of having really effective communication skills changes, doesn't it....

One of the challenges is that everyone—including you and me-tends to overestimate his or her skills as a communicator. A number of different studies have shown that in any group of people, 100 percent will say that of that group, they are in the "top 50 percent" in terms of communication skills. What is even more surprising (or perhaps not), 25 percent of the group will say that they are in the top 1 percent based on communication effectiveness. When it comes to communication skills, a vast majority of us think that our skills are better than those of the people with whom we communicate. For this reason, we tend to blame others when communication problems occur. If you've ever "lost control" of a "discussion" with someone, you know what I mean. It would be nice to have sufficient skill to navigate such situations comfortably, wouldn't it....

One of the reasons Debra and I have chosen to remain current with NLP is that we have seen firsthand the power and elegance of interventions based on NLP techniques, and we wish to make available to those who choose to train with us the most recent and elegant tools for positive change and effective communication. Given our backgrounds (Debra is an ordained minister, and I am a former college professor), it has been natural for us to incorporate what might be called "spirit" or "heart" and respect for the cognitive and the rational to the development of what are essentially unconscious processes—mental activity outside of or below conscious awareness. It is also one of the reasons we have incorporated what we call perpetual tuition. When you train with us, you may repeat all or part of the same class at any time for only \$25 a day. You

are also eligible to download the most current copy of the course manual for those classes you have taken with us.

Our desire is for you, us, and everyone to get better and better—to have more health, more happiness, and more skills for spreading joy throughout the universe.

What's Next?

The next regularly scheduled SCS training will be "Relationship Dynamics: Dynamic Relationships," from 20 to 24 April in St. Joseph, Michigan, at the Priscilla Burns Heritage Center. This training is part of the NLP series and could serve either as your introduction to NLP or as your continuation on your path to the certification you desire. Licensed Practitioner of NLP requires successful completion of two of the five-day workshops, and Licensed

Master Practitioner requires successful completion of three the workshops in the series.

The real question is where you want to go next.... We continue to be open to suggestion and invitation to offer the workshop of your choice at your convenience. When you sponsor an SCS workshop, you have the advantage of bringing the workshop to you instead of going to the workshop, and your commission for sponsoring the event will undoubtedly cover the cost of your tuition—and perhaps even more. To learn more about sponsoring one of the workshops in the SCS list of offerings, call Debra at 269.921.2217, or send her a quick email message:

debra@scsmatters.com