Multimodal Relaxation Method applied to counselling, psychotherapy and coaching

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Abstract

This paper briefly highlights the physical and mental health benefits of relaxation based techniques. Then it describes the Multimodal Relaxation Method (MRM) which can be used within counselling, psychotherapy and coaching settings as a technique to manage stress, reduce anxiety, enhance performance and wellbeing.

Keywords: Multimodal Relaxation Method, relaxation, stress, anxiety, enhanced performance, wellbeing

Abstrait

Brièvement, cet article met en évidence les avantages de santé physique et mentaledes techniques de relaxation basée. Puis il décrit la méthode de Relaxation Multimodal (MRM), qui peut être utilisé au sein de counselling, psychothérapie et coachingde paramètres comme technique pour gérer le stress, réduire l'anxiété, améliorer la performance et bien-être.

Mots clés: Multimodal méthode de Relaxation, détente, stress, anxiété, enhanced performance, bien-

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Introduction

There are many different relaxation, meditation, autogenic training and mindfulness techniques that have been used within counselling, psychotherapy, coaching, training and medical domains to reduce anxiety and stress (eg Bernstein & Borkovec, 1973; Carrington, Collings, Jr, Benson, et al., 1980; Lim & Kim 2014; Palmer, 1993; 2008a; Palmer, Cooper & Thomas, 2003) and depression (Finucane & Mercer, 2006). Applied Relaxation can positively impact upon generalized anxiety, reduce ratings of worry, cognitive and somatic anxiety and depression (see Ost & Breitholtz,

2000). The outcomes for these types of techniques are wide-ranging. For example, mindfulness therapy may also prevent disability pension, reduce societal costs and increase the effectiveness of care (see Fjorback, Carstensen, Arendt, Ornbol et al., 2013).

A well-known technique is the Benson 'Relaxation Response', (a variation on transcendental meditation) which has been shown to have additional benefits including the reduction of blood pressure (Benson, 1975; Benson, Rosner, Marzetta & Klemchuk, 1974a,b) and it may also relieve the intensity of pain and improve the quality of life

(Rambod, Sharif, Pourali-Mohammadi, Pasyar & Rafii, 2014).

A ten-year systematic review with a meta-analysis focusing on relaxation training for anxiety reduction showed consistent and significant efficacy of relaxation training in reducing anxiety (Manzoni, Pagnini, Castelnuovo & Molinari, 2008). The authors concluded that post-treatment anxiety is lower than baseline level and relaxation training outperforms control conditions on anxiety-specific measures and both psychological or psychosomatic clients and volunteer participants gain more benefits from relaxation training although anxiety reduction for medical patients is lower in comparison to the others categories, but relaxation training still had good efficacy (Manzoni et al., 2008)

Multimodal Relaxation Method

The Multimodal Relaxation Method (MRM) was developed at the Centre for Stress Management based in London, to help counselling clients suffering from stress and anxiety, and also stress management training participants to reduce their psychological and physiological arousal and thereby experience a state of relaxation (see Palmer, 1993). The MRM was originally used within the multimodal (Lazarus, 1971, 1981; Palmer & Dryden, 1991, 1995), cognitive (Beck, 1976) and rational emotive behavioural (Ellis, 1962) therapeutic approaches. However, the MRM can be used within most forms of counselling, psychotherapy and coaching where a psychoeducational component is acceptable. The MRM script has been recorded and (with permission) used as an audio download for university students.

The Multimodal Relaxation Method uses a range of techniques which are taken from a variety of modalities (see Palmer, 2008a, b) including slow focused breathing, simple mantras (i.e. the number 'one' or another number of the client's choice being internally verbalised in the mind), imagery/visualisation, sounds, smell and imagining touch (Palmer, 1993).

Depending upon the speed of delivery by the practitioner and the length of the pauses, the MRM may take between 10 to 15 minutes. It is recommended that an audio recording is made for the client during the session so that they can listen to it outside of the therapy session in a safe environment. For convenience, clients may wish to record the therapist speaking the MRM on their mobile/cell phones as most modern phones have the ability to record. The recording does allow the client to listen to the MRM at bedtime if they have been suffering from insomnia due

to an inability to stop intrusive thoughts. The MRM is a useful cognitive distraction in addition to aiding relaxation.

The first part of the MRM script prepares the client for what they may experience. As it is desirable for clients to use the MRM in various settings including work, then it is recommended that they sit in a chair and not lie on the floor of the therapy room. This also applies in group settings. A number of clients may go off to sleep during the reading of the MRM script. Therefore it is advisable to ask the client how they would like to be woken as explicit permission is required. For example, is it acceptable to lightly touch them on the shoulder to wake them up or to speak loudly?

On the script, the instructions to 'pause' are instructions to the therapist and are not supposed to be vocalised. A 'pause' is approximately between two to four seconds depending upon the time available and also if a stressed client requires additional time to relax. A 'long pause' is approximately 10 to 15 seconds. If the client wears contact lenses then they can either remove them before the relaxation exercise or they are note instructed to look upwards.

Multimodal Relaxation Method Script (© Palmer, 1993: 17-23)

The therapist speaks in a calm, soft voice:

If you could like to make yourself as comfortable as possible in the chair

Pause

and if you would just like to close your eyes.

Paus

As you do this exercise, if you feel any odd feelings such as tingling sensations, light-headedness, or whatever, this is quite normal. If you open your eyes then these feelings will go away. If you carry on with the exercise usually these feelings will disappear anyway.

Pause

If you would like to listen to the noises outside the room first of all.

Long pause

And now listen to the noises inside the room.

Pause

You may be aware of yourself breathing. These noises will come and go throughout this session and you can choose to let them just drift over your mind or ignore them if you wish.

Pause

Now keeping your eyelids closed and without moving your head, I would like you to look upwards, your eyes closed, just look

TECHNIQUES AND INTERVENTIONS

upwards.

Long pause

Notice the feeling of tiredness.

Pause

And relaxation.

Pause

In your eye muscles.

Pause

Now let your eyes drop back down.

Pause

Notice the tiredness and relaxation in those muscles of your eyes.

Pause

Let the feeling now travel down your face to your jaw, just relax

your jaw. *Long pause*

Now relax your tongue.

Pause

Let the feeling of relaxation slowly travel up over your face to the top of your head.

Pause

To the back of your head.

Long pause

Then slowly down through your neck muscles.

Pause

And down to your shoulders.

Long pause

Now concentrate on relaxing your shoulders, just let them drop down.

Pause

Now let that feeling of relaxation now in your shoulders slowly travel down your right arm, down through the muscles, down through your elbow, down through your wrist, to your hand, right down to your finger tips.

Long pause

Let the feeling of relaxation now in your shoulders slowly travel down your left arm, down through your muscles, down through your elbow, through your wrist, down to your hand, right down to your finger tips.

Long pause

And let that feeling of relaxation now in your shoulders slowly travel down your chest right down to your stomach.

Pause

Just concentrate on your breathing.

Pause

Notice that every time you breathe out you feel more ...

Pause

... and more relaxed.

Long pause

Let the feeling of relaxation travel down from your shoulders right down your back.

Long pause

Right down your right leg, down through the muscles, through your knee, down through your ankle.

Pause

To your foot, right down to your toes.

Long pause

Let the feeling of relaxation now travel down your left leg.

Pause

Down through the muscles, down through your knee, down through your ankle.

Pause

To your foot, right down to your toes.

Long pause

I'll give you a few moments now.

Pause

To allow you concentrate on any part of your body that you would like to relax further ...

15 second pause minimum

... I want you to concentrate on your breathing again.

Pause

Notice as you breathe.

Pause

On each out-breath you feel more and more relaxed.

Long pause

I would like you in your mind to say a number of your choice such as the number one.

Pause (NB: If the number 'one' evokes an emotion then another number can be chosen instead)

And say it every time you breathe out.

Long pause

This will help you to push away any unwanted thoughts you may have.

Pause

Each time you breathe out just say the number in your mind.

30-second pause

I want you now ...

Pause

... to think of your favourite relaxing place.

Long pause

Try and see it in your mind's eye.

Long pause

Look at the colours.

Pause

Now focus on one colour.

Pause

Now concentrate on any sounds or noises in your favourite relaxing place. If there are no sounds, then focus on the silence.

Long pause

Now concentrate on any smells or aromas in your favourite relaxing place.

Long pause

Now just imagine touching something.

Pause

In your favourite relaxing place.

Long pause

Just imagine how it feels.

Long pause

I want you now to concentrate on your breathing again.

Pause

Notice once again that every time you breathe out.

Pause

You feel more ...

Pause

... and more relaxed.

Long pause

Whenever you want to in the future you will be able to remember your favourite place or the breathing exercise and it will help you to relax quickly.

Long pause

In a few moments' time, but not quite yet, I'm going to count to three.

Pause

And you will be able to open your eyes in your own time. *Pause* (NB: Or insert, 'go off to sleep', if used as a recording to overcome sleeping difficulties)

One.

Pause

Two.

Pause

Three.

Pause

Open your eyes in your own time.

Discussion

Once the MRM is finished, it is important to debrief. Key items to ascertain are whether or not the client experienced any positive or negative feelings (emotions or physical) or thoughts and images. Did the client find any specific technique particularly relaxing? This is a relevant question as the MRM can be edited, shortened or extended to focus on what the client finds most helpful. For example, whereas some clients find the imagery very relaxing, others may find the breathing with the mantra number 'one' the most beneficial section.

A small minority of clients can find that deep relaxation can trigger pre-existing conditions such as panic attacks, asthma or epilepsy (Palmer & Dryden, 1995). Even though this is unlikely to happen, as with any therapeutic intervention, it is advisable to ask with client when initially suggesting the MRM if they have ever experienced any problems using relaxation, mindfulness or mediation techniques.

Conclusion

The MRM has been used with clients who are suffering from anxiety and symptoms of stress. The technique can be used by the client outside of therapy sessions on a daily basis.

Citation

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Biography

Prof Stephen Palmer PhD is Director of the Centre for Stress Management, London since 1987. He is also Coordinating Director of the ISCP International Centre for Coaching Psychology Research. He is the Honorary President of the International Stress Management Association and the International Society for Coaching Psychology. He is also Honorary Vice President of the Society for Dialectical Behaviour Therapy and Deputy Chair of the Association for Rational Emotive Behaviour Therapy. He is an Adjunct Professor of Coaching Psychology at Aalborg University and Visiting Professor of Work Based Learning and Stress Management at the Institute for Work Based Learning, Middlesex University. He has written or edited over 50 books including the Handbook of Counselling (Routledge, 1997), The Handbook of Solution-Focused Therapy (Sage, 2003) and The Beginner's Guide to Counselling and Psychotherapy (Sage, 2015). He has published over 225 articles.



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