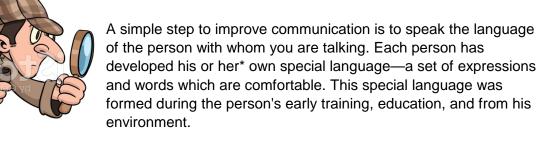
The Secret Language of

Verbal Communication



This is the language that the person uses when speaking to peers—the people in whom she has confidence. This is the

language that the person understands and trusts. This is his special mode of communication, which he uses to process data to solve problems. Unfortunately, not everyone tries to understand these special languages. Notice, you are not necessarily attempting to match jargon or pet expressions, but you are actually matching the words themselves, the sentence structure, word length and frequency.

As a master communicator, you will match the vocabulary of the person with whom you are speaking. You will pretty much use the same words and expressions that you both have in common. Note how a person speaks, what words she is using, and match those words. (Refer to the "Process Words for Creating Instant Rapport" list on www.DynamicResources.net/ downloads.htm page.) The end result is that the person with whom you are communicating will be more relaxed and open to new ideas.

If we study how people express themselves, we get a very important set of clues as to how they process data. Once you learn HOW a person thinks, the world of communication will begin to open, and you will be able to predict how that person will react to what you have to say; thus, taking a giant step toward improved communication and increased self-confidence.

The basic modes of data input are the five physical senses: sight, sound, touch, smell and taste. As we examine these five senses, we find sight, sound and touch to be dominant; the senses of smell and taste are considered by some to be extensions of touch. We use all of our senses to gather data, and "favorite" modes or channels for processing that data.

By studying the words—predicates, verbs, adverbs and adjectives—that a person uses, we can learn her personal "sensing language." When we use her language, she can comfortably process, in her favorite mode, what we are communicating. This builds a bridge toward greater communication. Please read next page

DR. DIANNE RUTH PhD in Psychology ● Anxiety Care Coach & Alternative Counselor

THREE MAJOR COMMUNICATION CHANNELS

Visual Channel—SIGHT

The person who has developed a data processing mode of SIGHT to gather information will use expressions that relate to sight or visual modes. For example, a Visual person will prefer TV to radio, looking at the clouds instead of swimming in a pool, and dreaming of the future rather than cutting the lawn.

A Visual person may use word clues like look, focus, perspective, picture and/or clear. A visual person might say:

"Let me LOOK at that report again."

"I can SEE that it is not what we want."

"I can't get a CLEAR PICTURE of your ideas."

You can get the PICTURE of what mode a person uses to process data by LOOKING to SEE what words that person is using.

Auditory Channel—SOUND

An Auditory person prefers communication media using SOUND to gather and process data. An Auditory person, as an example, may prefer radio over TV, a concert over a ballet, and would rather listen to the stereo than cut the lawn.

An Auditory person may use word clues like voice, say, listen, talk and/or sound. An Auditory person might say:

"I would like to HEAR what you have to SAY."

"This doesn't SOUND like what we want."

"Your idea RINGS true."

You may often HEAR these people TALK about their SOUND ideas.

Kinesthetic Channel—TOUCH OR FEELING

The Kinesthetic personality has developed primarily in the TOUCH, or FEELING, area. The Kinesthetic person, for example, would rather swim than watch a movie, dance rather than watch a ballet, and, at last, we find someone who might enjoy gardening and cutting the grass.

A Kinesthetic person may use word clues like grasp, firm, touch, concrete and/or handle. A Kinesthetic person might say:

"I have a FEELING that you are on the right track."

"You don't seem to have a very good GRASP of the problem."

"When the plan is FIRMED up, get in TOUCH with me again."

By this time, you can get a HANDLE on this type of person by using CONCRETE, SOLID examples in your conversation.

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Condensed from Drs. Tag and Judith Powell's article. Rapporter, Aug./Sept. 1989, pp. 8-9.