Over the years, I have learned that there is a subtle but significant difference between teaching a Yoga class and speaking to an audience that is not actively engaged in doing asana. In a presentation, rather than going inside and focusing on inner sensation, the audience’s attention is focused entirely on us as presenters. For many people, this direct attention generates fear and anxiety. The question that I continue to ask myself when this happens to me is, What do I do when fear comes up as I do an asana? How can I apply my approach to yoga to my experience speaking to a group? I have found it very useful to think of presenting as simply another yoga posture where in addition to being curious about and softening into the tight and contracted places in my body, I also allow myself to take the same approach with my audience. Yoga teachers have a unique set of skills that can be very useful when making a presentation. We also have a highly developed sense of personal presence. We know how to slow down and become quiet inside. We know how to tune in and attend to what is happening in the body. And, we know how to become grounded through our asana practice. These are finely honed internal awarenesses that we practice daily. The trick in public speaking is to find ways to apply those very same awarenesses to both ourselves and our relationship with the people in our audience.

—Carla Kimball
Public Speaking Coach and Kripalu Certified Yoga Teacher
Author of Elemental Speaking™: A Roadmap to Speaking with Confidence and Connection
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The data obtained in this investigation indicate that further research in the application of Transcendental Meditation as an adjunct therapy with stutterers is warranted.


For health of the vocal chords, the author recommends: Fish pose (matsyasana) or camel pose (ushtrasana), turtle pose (kurmasana), panting breath (bhastrika), lion breath (simha), bee sounding breath (brahmari), and *om* chanting.

**Deardorff, Julie.** Experts say breath skills improve life skills: *This performance enhancer is legal.* Detroit Free Press, 28 Jun 2005.

Breathing skills may improve performance in darts, running, public speaking, chiropractic work, test taking, and childbirth.

“Public speaking: Breathing exercises—which must be done regularly, not just before a speech—can help speakers project their voice and build stamina. They help prevent embarrassing cracking or straining, too.

“‘People need to understand that there is simply no way to have strength and conviction without breathing properly,’ says Kirby Tepper from Charisma Consultants in Los Angeles.”


**Kimball, Carla.** The art of presence in public speaking. Article available online: http://www.riverways.com/presence/presence.htm.

From the website: “For the past several years, through my own experience speaking to many audiences and hearing about the experiences of participants and clients, I’ve become very interested in exploring what’s involved in staying present when we are in public. I’ve applied my understanding of yoga and meditation to help inform me further and at this point I’ve begun to describe what I consider some of the essential elements of presence in public speaking.”

Discusses the benefits of Yoga for individual children with asthma, allergies, apraxia, obsessive-compulsive disorder, ADHD, and Asperger’s syndrome.


All six participants reported a reduction in stuttering since beginning to meditate. Five attributed this improvement to meditation, and one indicated it had been “one factor out of many.” All stated they had noted some reduction in stuttering within two weeks after beginning to meditate. Five subjects mentioned they avoided speaking in some situations prior to beginning Transcendental Meditation. Four of these five indicated they were avoiding less. All reported being more relaxed and feeling better about themselves in general.


On how Yoga can help ease strain in vocal cords and teach you the technique of *samakonasana*.

From the article: “Yoga for voice culture helps not only to treat problems related to speech but also in improving the quality of voice for an individual.

“[The] Integrated Approach of Yoga Therapy includes practices at [the] physical, mental, emotional and intellectual levels.

“At [the] physical level the practices bring about deep rest to the muscles of [the] voice box and the inflamed flaps of vocal chords . . .

“During practice sessions you need to bring your awareness to breathing, the feeling of the touch of the air in the nose and throat. Also feel the effort in the muscles around the voice box when you are chanting A or U or M.

“Immediately after every practice relax the throat region to feel the soothing effect. It is this after-effect of deep rest and relaxation with awareness that corrects the problem locally. When you rest, the blood flow improves and the tissue repair begins by clearing up all the unnecessary material in the vocal chords.

“Relief from tightness of the thin delicate muscles that are attached to vocal cords in different angles is the other major factor that contributes to the improvement.
“Opening up of the sinuses through kriyas adds to the quality and modulation of the voice.

“You cannot relax the voice box if your nervous system, which controls the inflammation and the local muscle contractions, is not rested. Stress, worry and anxiety make it worse.

“Hence in order to promote healing, a calm mind, mastery over emotional surges and a deep internal feeling of contentment within are essential. Pranayama and meditation are very important.

“This can do wonders for a musician. Singing or listening to music by itself shifts the awareness from outside to inside . . .”


Yoga Relaxation Therapy (YRT) is a new treatment to improve fluency and overcome stuttering by use of both old and new methods of meditation, Yoga postures, visualization practices, breathing, and relaxation techniques. The technique is based on many years of personal experience by Kamal Obiorah to improve his own fluency.


General recommendations: forward bends, backward bends, inverted *asanas*, stress-removing *asanas*, *ujjaiyi* and *nadi-shodhana pranayama*, and meditation

Specific recommendations: *virabhadrasana I* (warrior pose), *parsvottanasana* (side stretching pose), *simhasana II* (lion pose), *bhujangasana* (cobra pose), *matsyasana* (fish pose), *ustrasana* (camel pose), *eka pada rajakapotasana I* (pigeon pose), *bharadvajasana I*

**Speech therapy.** Available online: http://www.yogamedicine.com/speechtherapy.htm.


For persons with learning difficulties or disabilities.

From the website: “The YOU & ME Yoga System of sound, color and Whole-Body-Movement is a unique system which has been devised to enable students of all abilities, both adults and children with learning disabilities and sensory or physical impairments, to develop their potential to the fullest extent possible. Sound is used to coordinate movement with breathing, and color to identify the various parts of the body which need to be strengthened and relate them to the appropriate beneficial movements for the whole body.”


From the website: “... designed for yoga practitioners, therapists, teachers, [caregivers] and parents of persons with special educational needs or conditions such as Down’s Syndrome, autism, cerebral palsy, epilepsy, spasticity, paralysis, visual, aural and speech impairment and psychiatric and/or behavioral problems. It can be used with all ages and with people with a range of developmental needs and abilities.

“The video was recorded at various special schools, adult training centers and residential homes in the UK and Eire. Instruction is given by practitioners of the system using adaptations appropriate to their students, and also by some of the more advanced students themselves. Even those who normally show very little response demonstrate here how they are able to practice a thorough programme for the whole body. The techniques shown on the video help to bring about improved physical dexterity, coordination, and sensory awareness, and to make the students more calm, relaxed and confident.”
Of Related Interest


Abstract: OBJECTIVE: The major aim of this study was to determine whether adults with persistent developmental stuttering (PDS) have anomalous anatomy in cortical speech-language areas. The major postulate was that anomalous cerebral dominance, reflected by anomalous cortical anatomy in various regions, may put an individual at increased risk for the development of stuttering. METHODS: Adults with PDS (n = 16) and controls (n = 16) matched for age, sex, hand preference, and education were studied. Volumetric MRI scans were completed. Frontal (pars triangularis, pars opercularis) and temporo-parietal areas (planum temporale, posterior ascending ramus) were measured in the left and right hemispheres and interhemispheric asymmetries were computed. Gyral variants were assessed within these perisylvian cortical speech-language areas. RESULTS: The right and left planum temporale were significantly larger in the adults with PDS (p = 0.045), and the magnitude of the planar asymmetry was reduced (p = 0.003). Some gyral variants were unique to the adults with PDS, including a second diagonal sulcus and extra gyri along the superior bank of the sylvian fossa. In addition, anatomic subgroups emerged based on sex and hand preference. Overall, the adults with PDS had significantly more gyral variants (mean = 4.19) than controls (mean = 1.31, p < 0.0005). CONCLUSIONS: These results provide strong evidence that adults with PDS have anomalous anatomy in perisylvian speech and language areas. No one anatomic feature distinguished the groups, but multiple loci within a widely distributed neural network differed between groups. These results provide the first evidence that anatomic anomalies within perisylvian speech-language areas may put an individual at risk for the development of stuttering.


An interview with Joe Kalinowski, Ph.D., creator of the hearing-aid-like SpeechEasy device for stutterers, a hearing-aid-like device that plays the speaker’s voice back with a slight delay to mimic speaking in unison with others. (Stutterers do not tend to stutter when speaking in unison.)


“In [this] one-of-a-kind program, music therapist Laurel Terreri does exercises that target problems unique to cleft palates.
“‘We use a lot of strengthening activities like blowing into a whistle to facilitate movement of air from their lungs out their mouth,’ Terreri tells Ivanhoe.

“Repetitive sounds make practicing tough words fun. Now, this shy little boy isn’t afraid to show off a little.”


“In a study of 16 people who stuttered and 16 who did not, MRI scans detected differences in a brain region called the planum temporale, which helps control language and speech. This part of the brain was significantly larger in stutterers than in non-stutterers.

“Stutterers were also more likely to have irregularities in the shape of the brain, researchers report in the July 24th issue of the journal Neurology. However, there was no single variation in brain structure that accounted for all the differences between those who stuttered and those who did not.”

“‘Our study provides the first strong evidence that anatomical variation...in brain areas devoted to speech and language functions may be associated with an increased risk for the development of stuttering,’ the study’s lead author, Dr. Anne L. Foundas of Tulane University in New Orleans, Louisiana, told Reuters Health . . .

“‘Our study [also] found that there were anatomical differences when men and women and right- and left-handers who stutter were compared,’ Foundas explained. ‘Whether individuals in groups based on gender and hand preference are biologically distinct within developmental stuttering and whether these subgroups respond differently to specific treatments requires additional study.’”