The Art of Seeing – Natural Vision Improvement with the Bates Method

The link between Mind and Vision

“We see very largely with the mind, and only partly with the eyes. The phenomena of vision depend upon the mind’s interpretation of the impression upon the retina. What we see is not that impression, but our own interpretation of it.” (W.H. Bates, The Cure of Imperfect Sight by Treatment Without Glasses, p. 148 Central Fixation Publishing. Co. N.Y. 1920)

The eyes are the windows of the soul through which the brain obtains visual information from the surrounding environment as a vital survival strategy. When we think about our eyes, we tend to think of them as separate from the brain. Yet they are an integral part of it and belong to a system: the visual system. As organs of light, they absorb the in-coming light and the pigments in the retina transform it into nervous impulses sent through the optic nerves to the seat of vision in the visual cortex in the occipital lobe at the back of the head. The eyes are also part of other systems of the body. The ocular muscles are indirectly linked to the sub-occipital muscles which in turn form part of the posterior muscle chain down the back of the body. The optic nerves are connected to the central and autonomic nervous systems.

The information transmitted to the visual cortex is assembled, analyzed and interpreted in order to provide us with a sense of what we are seeing. The brain receives all sensory-motor information from the environment first. The mind then interprets its content.

As the mind is responsible for seeing, it is important that it is free to do so. Worries, negative thoughts, emotions, even day dreaming or boredom as well as trauma and stress will interfere in the process of visual interpretation and in the use of the eyes.

The physiology of stress, whether emotional or environmental, is of particular interest in relation to vision. Among the physiological modifications triggered by the state of stress, the fight or flight response of the human organism. Is the shrinking of the visual field, dilation of the pupils and a fixed regard. Once the danger perceived by the nervous system has disappeared, the state of response to threat is no longer necessary and the body changes back to normal. However, if the emotional/trauma/stress state persists, and/or the body goes into a Freeze response (neither able to fight nor flee) the fixed regard becomes the normal way of looking reduced eye mobility. This mobility of the regard is an essential factor in good vision and any interference with the natural dynamics of the eyes lowers vision.

The responses to our environment that we experience each moment of our daily lives underline the variability of our states and this is a fundamental aspect of vision. Many of us may notice that we sometimes see better at one time and worse at another. According to Dr. W.H. Bates, strain of the mind (emotional, mental and environmental stress) plays an important role in this variability. He recommended, among other things, the conscious relaxation of the eyes, but especially of the mind. He taught the principles of visual function in order that the patient understand how he could help himself in improving his own vision on the muscular, nervous and mind level.

“The mind is the source of all such efforts from outside sources brought to bear upon the eye. Every thought of effort in the mind, of whatever sort, transmits a motor impulse to the eye; and every such impulse causes a deviation from the normal in the shape of the eyeball and lessens the sensitiveness of the center of sight. If one wants to have perfect sight, therefore, one must have no thought of effort in the mind. Mental strain of any kind always produces a conscious or unconscious eyestrain, and if the strain takes the form of an effort to see, an error of refraction is always produced.” (Bates, The Cure of Imperfect Sight by Treatment Without Glasses, P.109)
The various levels of trauma are experienced in the nervous system before it is registered in the mind as the response of the autonomic nervous system to trauma or perceived danger is immediate. The harmony between the different branches of this system (sympathetic, parasympathetic, and polyvagal) is in the antagonistic relationship between these branches and their capacity to enable the human organism to be resilient to life experiences. Thus when this system is overwhelmed, it triggers physiological modifications that also affect the eyes, the regard and therefore vision. The overwhelmed system will consequently affect behaviour and the psyche and may lead to symptoms and syndromes (Levine).

When making this connection between vision and the personality’s adaptative response to the environment, it is worth reading the literature on the psychophysiological research of psychiatric subjects suffering from multiple personality disorder. A certain number of studies have been carried out on patients who, according to their “alter” personality, manifested psychophysiological differences at all levels: brain activity, skin temperature, thyroid function, voice, posture, perception, visual function ... The study of these modifications revealed and measured a variability in visual acuity, refraction, muscular balance of the eye, visual field, corneal curve, papillary reaction. These changes were observed each time the subject changed from one personality to another. (Miller)

This indicates that refractive error in a subject’s eyes is not a permanent situation but can vary according to his state of mind, nervous and muscular system and especially to the way he perceives the world around him. This observation is of particular important in the routine eye tests which can be a stress in themselves and have an influence on the optical prescription. “The repetition of certain tests at different moments during the examination of vision often induced slightly different results” (Forrest, P.200). On this line of thought, if vision lowers due to a symptom of dis-stress, it follows therefore that optical prescriptions maintain that symptom in place and impede the natural variability.

Vision is therefore, modified by any strain of the mind at varying degrees including emotional trauma. The loss of colour vision has been observed after an emotional shock, or aggression and even complete loss of vision may occur after a traumatizing event. A well-known example is Ray Charles who gradually lost his vision after witnessing the drowning of his younger brother and experiencing the family reactions to his lack of intervention due to his frozen state of shock – unable to react.

By working on the visual problem, becoming acquainted with one’s eyes, how each eye functions separately and then together, how each eye feels when it works alone or in collaboration with its partner, exploring how presence of mind enables better interpretation of the incoming visual information, encouraging the natural movement of interest and therefore the regard thus enabling the return from the freeze state to relaxed being, learning to look in a different way and with a new attitude thus using the eyes in a different manner, the eyesight improves, also bringing greater clarity to the mind. This is the approach of the art of seeing in the Bates Method.

References

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Nina Hutchings is a member of the Eye & Mind Society, GB.  www.eyemindsociety.com

She is an experienced Vision Education and Bates Method teacher who runs workshops and offers individual lessons in Aix-en-Provence, Avignon, Marseille, Montpellier, and on request elsewhere in the south of France. She also runs courses in Strasbourg, Switzerland and Madrid

Trained in London at the School of Vision Education, she has been teaching for over 10 years. She also works in collaboration with Alexander Technique teachers. Her work integrates the principles of “Somatic Experiencing” www.traumahealing.com

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