The Immanuel Approach (to Emotional Healing and to Life) Chapter 13: Immanuel Approach Troubleshooting Part II: Basic Immanuel Interventions

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DRAFT

To refresh the larger context for Immanuel approach troubleshooting: Many people are quickly able to establish an adequate interactive connection, they easily maintain this connection, and they receive enhanced friendship with the Lord, transformative emotional healing, and a variety of other beautiful, live-giving results, all with only the minimal Immanuel approach interventions described in chapters 2 through 9. However, others initially experience confusing, disappointing, or frustrating results. Tens of thousands of hours of experience with EMDR, Theophostic-based emotional healing, and now the Immanuel approach have totally convinced me that the Lord is *always* present, that the Lord *always* wants to bless us with life-giving gifts, that the Lord is *always* able to accomplish this, and that the Immanuel approach will almost always (eventually) release these gifts and blessings *if the facilitator can help the person identify and resolve any blockages that are hindering the process*. This means that we need to be very persistent with respect to troubleshooting in situations where the person does not initially get good results, and it means that we need to be diligent in developing the best possible troubleshooting tools and skills.

Immanuel Interventions at any point the person does not have an adequate interactive connection: As just presented in chapter 10, the first part of Immanuel approach troubleshooting is to coach the person to turn to Jesus, focus on Jesus, engage with Jesus directly, and ask Jesus for guidance/help at every point in the session, regarding every issue that comes up, and regarding every difficulty that arises. The second part of Immanuel approach troubleshooting is to use Immanuel interventions if the recipient is having difficulty establishing an adequate interactive connection at the beginning of the session, and/or if she loses an adequate connection with the Lord at any point later in the session. Let us start our discussion of Immanuel interventions with recalling the definition from chapter 3:

"Immanuel interventions" are specific, focused, systematic interventions with the goal of helping the person receiving ministry to perceive the Lord's living presence, and to establish an adequate interactive connection with Him.

Actually, the process described earlier for establishing an interactive connection at the beginning of the session is the simplest, most basic form of Immanuel intervention. But for the purposes of this discussion, I think of Immanuel interventions as 1) the systematic trouble-shooting process for helping the person establish an adequate connection with Jesus when the initial steps of positive memory recall, appreciation, reentering the positive memory, and explicit request do *not* flow quickly and easily into an adequate interactive connection; and 2) interventions for helping the person *re*-establish an adequate interactive connection with Jesus at any point in the session that they might lose this all important foundation.¹

You could also say that Immanuel interventions are "troubleshooting" with respect to establishing and/or reestablishing an adequate interactive connection with the Lord. As

¹ As most readers will probably realize, helping the person establish an adequate interactive connection when she is "inside" unresolved traumatic memories is an especially important instance of using Immanuel interventions to help the person reestablish an adequate interactive connection.

mentioned above, tens of thousands of hours of emotional healing work have convinced me that the Lord is *always* present, that the Lord *always* wants to bless us with life-giving gifts, that the Lord is *always* able to accomplish this, and that the Immanuel approach will almost² always (eventually) release these gifts and blessings *if the facilitator can help the person identify and resolve blockages that are sometimes present*. One of the most important insights that came to me as I was first learning about Immanuel interventions was that we could "trouble-shoot" with respect to perceiving the Lord's presence and adequate interactive connection in much the same way that we could "trouble-shoot" with respect to the overall emotional healing process; and the details of the conceptual framework for Immanuel intervention trouble-shooting fell into place very easily when I realized that there were several very specific parallels between trouble shooting for the overall process and trouble shooting for Immanuel interventions:

With troubleshooting for the overall process, I assume that the Lord always *wants* to heal emotional and spiritual wounds, and that the Lord is always *able* to heal emotional and spiritual wounds. Therefore, if the person is not experiencing healing, I assume that there must be something in the way. My experience has taught me that the blockages can be identified and resolved, and that when this is done, the healing process will move forward. I therefore work very persistently to expose and resolve any blockages, and in almost every situation persistent trouble-shooting eventually enables the person to receive healing.

Similarly, with Immanuel Intervention trouble shooting, I know with absolute certainty that the Lord is present – He has been present with the person in every past experience, and He is present now. And my experience has taught me that the Lord always wants the person to be able to perceive His presence, connect with Him, synchronize with Him, receive from Him, and be *with* Him (the Lord always wants to establish an adequate interactive connection). Therefore, if the recipient is not initially able to establish an adequate interactive connection I assume that there must be something in the way. My experience has also taught me that the blockages can be identified and resolved, and that when this is done, the person *will* be able to perceive the Lord's presence, connect with Him, synchronize with Him, receive from Him, and be with Him. I therefore work very persistently to expose and resolve any blockages, and in almost every situation persistent trouble-shooting eventually enables the person to perceive the Lord's presence and establish an interactive connection.

- **A. Basic, simple, easy, safe Immanuel Interventions:** There are a number of Immanuel interventions that are so basic, simple, and easy that the average layperson can learn to use them quickly, and so safe that they can be used in the context of group exercises. The Immanuel interventions described in 1) through 5) fall into this category.
 - **1. Coach the person to direct her attention back to Jesus:** As mentioned earlier, people can forget about the Lord and/or lose track of the Lord, *even when He is still standing right beside them.* The recipient can get so focused on some aspect of the issue she is working on, and/or so overwhelmed by the negative thoughts and emotions she is experiencing, that she totally forgets about Jesus. Therefore, before trying any other Immanuel intervention trouble-shooting, check to see if the person has simply forgotten about and/or lost track of the Lord. As described above, when this is the case, the person is still able to perceive the Lord's

² On very rare occasions, a person will persistently choose to indulge in bitterness and/or self-pity and/or rebellion. This will block the Immanuel approach process, and cannot be resolved with any of the usual troubleshooting tools.

tangible presence and can easily maintain an adequate interactive connection, *as long as they choose to focus their attention on Him.* In these situations, all you need to do to restore an adequate interactive connection is to identify the problem and then coach the person to direct her attention back to Jesus.

2. Heart invitation and explicit request: As I have carefully observed the details of the many Immanuel approach sessions I facilitate, I've noticed that an explicit invitation and request are often not needed at the beginning of the session. Often, after recalling a positive memory of previous connection with the Lord, stirring up appreciation, and reentering the memory, the person will report that the memory flows spontaneously into a living, interactive connection in the present, even without any explicit invitation or request. Many of my colleagues (for example, Dr. Wilder) have also noticed this, and have therefore decided to omit explicit invitation and request as regular components at the beginning of Immanuel approach sessions. I would encourage you to experiment with both options, and notice what seems to work best for you and the people you work with. Even so, for the reasons outlined below I still usually coach the person to make an explicit invitation and request, as part of establishing an interactive connection at the beginning of the session (recognizing that they often don't seem to need it).

In contrast, when a person loses her interactive connection with the Lord at some point later in the session, I strongly encourage you to start your Immanuel intervention trouble-shooting with coaching the person to make a simple, explicit invitation and request. It is very common for a person to temporarily lose her interactive connection with the Lord at some point later in the session. For example, it's very common for people to temporarily lose their interactive connection when they first enter a memory that still carries unresolved trauma. And this is true even for people who are able to *clearly* perceive the Lord's presence and establish a *strong* interactive connection at the beginning of the session. At any point in the session that the person loses her interactive connection, the first, simplest, easiest, most basic Immanuel intervention is to coach her to make a very simple heart invitation and explicit request. I usually use something along the lines of,

"Lord, I thank You for the truth that You are here. I make a heart invitation – I invite You to be *with me*, here in this place. I also ask You to help me perceive Your presence, and to help me reestablish an interactive connection."

Additional comments regarding heart invitation: One might ask, "If He's always with us, and we're making a point of thanking him for this truth (in faith), then why are we inviting Him to be with us?" My perception is that this invitation applies to our hearts. The scripture that helped me clarify this point is from Rev 3:20: "Here I am! I stand at the door and knock. If anyone hears my voice and opens the door, I will come in and eat with him, and he with me." My understanding is that this scripture is referring to our hearts. The Lord is always present and everywhere present, but even as we claim and thank him for the truth that He is with us, we also need to invite Him into our hearts.

Another data point that helped me recognize the importance of this invitation has been

³ A number of our live session DVDs provide examples of this phenomena. See, for example, *Rita* #3: Jesus Is Better than Candy, Maggie #3, Labor and Delibery Trauma, and Steve: "Just" Be with Jesus."

discovering that the opposite message is one of the most common blockages hindering a person from perceiving the Lord's presence. In many situations where the person is initially unable to perceive the Lord's presence, we discover that she *does not want Him to be with her* – either because she's afraid to let Him be present or because she's angry at Him; and that instead of making an invitation she is (consciously or unconsciously) sending the exact opposite message: "Lord, stay away from me!" When we are *not* making an invitation – when we do *not* want the Lord to be with us in a given memory or experience, the Lord seems to respect our desire that He stay away. Furthermore, we often see people who are initially *not* able to perceive the Lord's presence *become* able to perceive His presence when we identify that they do not want Him with them and help them to resolve this blockage, and then they replace "stay away from me" with an invitation.

Additional comments regarding direct, explicit request: I'm not a theologian, and have not done a careful theological study regarding the role and importance of asking, but my Layman's/Lehman's experience is that asking does seem to make a difference. My experience is that the Lord, out of His grace, sometimes gives us what we need and/or want without even waiting for us to ask, but that more often He seems to want us to ask.

"You have not because you ask not" (James 4:2) seems to be a very simple summary of this point.

The importance of asking was especially visible early in our journey with Immanuel interventions and the Immanuel approach, before we began to start each session with helping the person perceive the Lord's presence. As described in Part I, there was a block of time during which we would not try an Immanuel intervention unless/until we encountered a problem with inadequate capacity. In these early sessions, we would usually be half way through the session, the person would be having difficulty with a painful memory, and I would finally suggest trying an Immanuel intervention. And in some of these situations the person reported that she became able to perceive the Lord's presence *immediately in response to our asking*. Some told me that they had become able to perceive the Lord's presence at the moment we finished the prayer, and others described becoming able to perceive the Lord's presence "before we even finished praying." Several people specifically commented: "Now I realize that He's been here, with me, the whole time, but I wasn't able to see Him (feel Him/hear Him/sense His presence) until we prayed."

In each of these situations, my perception was that the Lord had been waiting for us to ask—that He had wanted to be tangibly present, to be more connected, and to provide more assistance, but that He had been *waiting for us to ask*. In fact, in one session, after the recipient made an invitation for Jesus to be with her, asked for His help in perceiving His presence, and then became able to see Him with her in the memory we were working with, she paused for a moment and commented spontaneously, "Jesus says He was waiting for me to ask."

3. Ask "What's in the way (of perceiving the Lord's presence and establishing an interactive connection)? And then coach the person to describe whatever comes into her awareness: Often the simple heart invitation and explicit request are all that's needed, either

⁴ I believe that He is actually still with us, but when we do not *want* Him with us, He seems to respect our desire/request by allowing us to not perceive His presence.

at the beginning of the session, when the person first invites the Lord to be with her and asks Him to help with perceiving His presence and interactive connection, or as the first, most basic Immanuel intervention for any point later in the session at which the person temporarily loses her connection with the Lord. However, in some situations this simple, initial intervention will not be enough to reestablish the interactive connection. When this occurs, the next step with respect to Immanuel intervention troubleshooting is to ask, "What's in the way of _____ perceiving Your presence and establishing an interactive connection?," and then coach the person to describe whatever comes into her awareness. As soon as a blockage is identified, ask the Lord for guidance with respect to how to resolve it. I usually ask (or coach the person to ask) something along the lines of, "so now what do we do?/how do we cooperate with Your plan for moving forward?/what do we do to take the next step forward?" And once you have asked for direction regarding how to resolve the blockage, coach the person to describe whatever comes into her awareness, notice what the Lord reveals, and then cooperate with His guidance.

Notice that something important has come forward and then ask again: Just as describe in the earlier section on coaching the person to engage directly with Jesus at every point in the session, helping the person to recognize that something important has come forward, and then encouraging her to ask again is a subtle but important variation that the facilitator should be aware of as an option for augmenting the coaching. The person may not recognize any answer to the question she just asked, but when I coach her to describe whatever is coming into her awareness she reports new information and/or emotions that I can usually perceive to be significant. As mentioned above (and discussed at much greater length in chapter **fill in**, below), the person often does not perceive their meaning or importance until she describes them to me, and even after recognizing their significance, in many of these situations the person still does not feel that the new, important content is coming from the Lord. Even so, I encourage her to notice the significance of the new content, to consider the possibility that it is from the Lord, and to ask for more. In most of these situations, the different pieces coming forward eventually all fit together and we can see clearly that the Lord has been leading the process.

Help the person recognize what's in her heart, get words to describe it, and then share whatever she has formulated/articulated with Jesus: Just as describe in the earlier section on coaching the person to engage directly with Jesus at every point in the session, additional careful coaching to help the person recognize what's in her heart, get words to describe it, and then talk directly to the Lord about it is a simple intervention for increasing the effectiveness of any other piece of the process. For example, we might ask the Lord, "What's in the way?," and the person might report mental content that doesn't seem to go anywhere, but my intuition/guidance from the Lord is that there's something else coming forward that the person has not been able to identify or articulate. In these situations, before trying anything more complicated I simply try a slower, more careful, more deliberate form of coaching the person to "describe whatever is coming into your awareness." I coach her to carefully look through her internal awareness, and help her to notice, identify, and get words for whatever she finds there. Then I help her to present it to Jesus as clearly, honestly, humbly, and vulnerably as possible.

An interesting point here is that this intervention is still surprisingly effective, even though the person is not experiencing an interactive connection or even perceiving the Lord's presence. I coach the person to stand in faith, claiming the truth that Jesus is always with us, and talk to Him directly, even though she doesn't yet perceive Him in any tangible way. That

is, I coach the person to operate out of the invisible truth that Jesus is always with us, and talk to Him *as if she can perceive His presence*. And when she does this, something usually shifts in a good way and the process moves forward.⁵

Even with just these simple Immanuel intervention tools, we usually find something that explains the blockage. For example, the person might discover that she has a lot of ambivalence about experiencing Jesus' presence in the memory we are working on. After asking "What's in the way?" she realizes that the memory includes sinful choices on her part, and she is afraid that Jesus will be angry and condemn her if He should show up in the memory. And when I help her recognize this, get words for it, and then talk directly with Jesus about it, the blocking thought/fear/concern/issue loses power and she becomes willing to *allow* the Lord's presence. As soon as we notice this shift, I coach her to try the heart invitation and explicit request again, and she is then able to perceive the Lord's presence and quickly establishes an interactive connection. In fact, the person often becomes able to perceive the Lord's presence as soon as the shift occurs, before we even get around to repeating the invitation and request.

These steps in the Immanuel intervention troubleshooting process, including the two subtle variations for augmenting the process, might look something like the following:⁶

The person receiving ministry is working inside a memory in which she was traumatized by her mother's harshness, judgment, and unfairness. Immediately prior to the portion of the session presented here, we have clarified that the recipient lost her interactive connection when she entered the memory, she has taken the first Immanuel intervention troubleshooting step of making an explicit invitation and request (but she is still unable to perceive the Lord's presence), and I have just coached her to ask the Lord for guidance regarding "What's in the way?"

Rita: "Lord, please show me what's in the way – what's hindering me from perceiving You and connecting with You?"

Dr. Lehman: "Good. Now just describe whatever comes into your awareness."

Rita: (pause) "I'm just realizing that I still feel bitter towards my Mom in this memory. (pause)... The thought comes to me that maybe my bitterness is somehow blocking me from connecting with Jesus."

I coach Rita to ask the Lord for guidance regarding how to move forward, she does this, and I again coach her to describe whatever comes into her awareness.

⁵ As mentioned earlier, these two variations can provide additional help in recognizing and understanding whatever the Lord is sending forward. When we ask for guidance/help, *and we don't receive the kind of response we're expecting*, these two simple coaching variations – noticing that something important has come forward and then coaching the person to ask again, and helping the recipient to recognize what's in her heart, get words to describe it, and then share whatever she has formulated/articulated with Jesus – can help the session keep moving forward.

⁶ All of the details in this example are taken directly from an actual Immanuel approach session, and are used with permission.

Rita: (pause) "The thought comes to me that I need to let go of this bitterness towards my mother."

Dr. Lehman: "Do you feel like you're ready to do that?"

Rita: "Yes, of course. It's in the way, so I need to let it go."

I lead Rita through a prayer for releasing bitterness, and she appears to cooperate, but nothing changes. So I coach her to ask for more guidance regarding what's in the way and how to take the next step forward. She does this.

Rita: (Pause) "Nothing's happening."

Dr. Lehman: "Just describe whatever's coming into your awareness. Don't worry about whether it feels like it's coming from the Lord, don't worry about whether it feels important, and don't worry about whether it makes sense – just reports anything you notice coming into your awareness."

Rita: (Pause) "Nothing's happening, except that I feel uncomfortable."

Dr. Lehman: Focus on your feeling of discomfort, keep asking the Lord for more guidance, and then report whatever comes to you.

Rita: (Pause) "Lord, what's this discomfort about. What do You want to show me about this discomfort?" (Pause) "Well, when I think about letting go of the bitterness, I notice the discomfort. (Pause) "Maybe I feel anxious about letting go of the bitterness."

Dr. Lehman: Focus on your anxiety about letting go of the bitterness, keep asking the Lord for more guidance, and then report whatever comes to you.

Rita: (Pause) "Lord, what do You want to show me about my anxiety about letting go of the bitterness?" (Pause) "Well, it feels like the bitterness helps me defend myself from my Mom. If I'm not angry, I won't be able to protect myself from her unfairness – she'll just win."

Dr. Lehman: "Now that we've clarified the problem with being afraid to let go of the bitterness, I'd like to try something. Would you be willing to invite Jesus to be with you here, to help you let go of the bitterness?"

Rita: (Pause) "The thought that just pops into my head is 'no." (Pause) "I'm noticing the thought that Jesus might make me let go of the bitterness." (Pause) "I think maybe I'm afraid to let Jesus be here because I'm afraid He will make me let go of the bitterness."

Dr. Lehman: "If you're willing, I'd like you to speak directly to Jesus – talk to Him about all the stuff you just told me, and ask Him what He wants you to know about it. I realize you can't perceive Him yet, but if you're willing, stand in faith on the truth that He's here, and talk directly to Him about all of this."

Rita: (Pause) "Jesus, I think maybe I'm afraid to let go of my bitterness." (Pause) "I'm afraid that if I let go of my anger, I won't be able to defend myself. Mom will just yell at

me, be unreasonable, not listen to me, blame me for all the problems with my sister, and I won't be able to do anything about it. And I'm afraid to let You be with me here, because I'm afraid You will make me let go of the bitterness." (long pause)

Dr. Lehman: "So, what's happening? Just try to notice and describe whatever is happening inside, and then describe it."

Rita: (Pause) "Well, this is kind of funny. I don't perceive Jesus, and I didn't notice anything dramatic happening, but it doesn't feel as true any more. Somehow, it just doesn't feel true that I won't be okay if I let go of the bitterness." (Pause) "I feel like I'm ready to let go of the bitterness, and I don't feel afraid to let Jesus be here any more."

Dr. Lehman: "So, would you be willing to try the invitation and request again?"

Rita: "Sure. Lord, I make a heart invitation for You to be with me here. Help me to perceive Your presence, and help me let go of this bitterness." (Long pause, but Rita's face changes dramatically during the pause, moving from anxiety and anger to an expression of peacefulness).

Dr. Lehman: "So, when you're ready, let me know what's happening."

Rita: "This is so cool. As soon as I started, I could see Jesus standing beside me in the memory. I could tell that He understood everything about why I was so upset, and about why my Mom's behavior hurt me so much. For just a moment I could feel all the pain from the memory, but then I could feel Him *with* me, and it all seemed to change." (Pause) "I didn't feel alone any more, and I didn't feel helpless and unable to defend myself any more. Somehow, I suddenly realized that I'm not a little girl any more — I didn't feel paralyzed, or weak, or small — it just felt like I could say what I would need to say if I were in a situation like that." (Pause) And Jesus was showing me stuff about my mother — how she was overwhelmed and triggered. I think He gave me compassion for my mother."

Dr. Lehman: "So where's the bitterness?"

Rita: "Oh, wow! This is kind of weird. It's totally gone. Now I just feel compassion...."

From this point I continued to coach Rita to focus on Jesus, to ask for guidance, and to engage directly with Him regarding everything that came up. We went through the memory in this way, looking for any splinters, and finished the session with the memory completely resolved.

4. Go back to initial interactive connection: If you try the simple, basic Immanuel interventions just described but they don't seem to be working, coach the person to go back to the interactive connection from the beginning of the session. And then, in the context of the positive memory and interactive connection from the beginning of the session, you can coach the recipient to engage directly with Jesus and ask Him for guidance and help regarding the point in the session where she was *not* able to perceive His presence or establish an interactive connection. In fact, if you are feeling confused and/or overwhelmed at any point for any reason, you can always coach the recipient to go back to the interactive connection that was just refreshed at the beginning of the session. As will be discussed at more length in the next chapter, this is one of the wonderful Immanuel approach safety nets

for beginners, lay person's, and group exercises.

- **5. Practical considerations regarding the return-to-initial-interactive-connection intervention:** Note: If you're reading this material for the first time, just to get an overview regarding Immanuel interventions, then I would recommend skipping/skimming this section (for now) so that these practical details don't slow you down and hinder you from seeing the big picture. Come back for these practical details when you're ready to actually start practicing with the Immanuel approach.
 - a.) It can more challenging if the recipient is intensely non-relational: Sometimes a person who is connected to a traumatic memory will be feeling intense negative emotions and her relational circuits will be really off, and in this context she will not initially feel like talking about positive memories and she will not initially feel any subjective sense of appreciation. In these situations you may need to be very directive and persistent in coaching the person to talk about positive memories and appreciation even when they don't feel like it. In some situations it may take as long as fifteen to twenty minutes, but our experience is that if a person persists in talking about positive memories of experiencing the Lord's presence they will eventually calm down, regain access to their relational connection circuits, return to feeling appreciation, and be able to get back to a good place of perceiving the Lord's presence and enjoying an interactive connection with Him. It may take some practice to learn to be adequately directive and persistent in these situations, but with appropriate coaching most people can learn this fairly quickly. See pages five and six in the next chapter, The Immanuel Approach Safety Net, for additional practical tips regarding the return-to-initial-interactive-connection intervention with people who are deep in non-relational mode.
 - **b.)** A potential shortcut: Sometimes the recipient can go directly back to the interactive connection from the beginning of the session, without even needing to repeat the positive memory recall and deliberate appreciation steps. If you work with a person repeatedly, and discover that she can usually do this, it's good to try this simpler, more time efficient intervention first. And then only include the more time consuming positive memory recall and deliberate appreciation steps on the rare occasions when she is *not* able to quickly and easily reestablish the connection with God from the beginning of the session.
- **B.** Intermediate advanced Immanuel interventions: As mentioned earlier, the Immanuel interventions that we have just described are so basic, simple, and easy that the average layperson can learn to use them quickly, and so safe that they can be used by beginners and in the context of group exercises. Many facilitators and recipients are surprised to discover that they can usually successfully navigate through the Immanuel approach emotional healing process with only the simple, basic trouble-shooting tools described in chapter 12, and the simplest, most basic Immanuel interventions describe in this chapter. However, some people (like myself, in my early experience with emotional healing and Immanuel) have complicated, memory-anchored blockages that hinder them from establishing an initial interactive connection with God, and other recipients will lose their interactive connection while working

⁷ The *Bob: Safety Net Demonstration* live session teaching DVD (#29 in the LMS series) provides a good example of quickly and easily going back to the initial interactive connection, without having to go through the positive memory recall and deliberate appreciation steps. **note: this teaching DVD is still pending as of June 25, 2013**

on intense trauma, and then have complicated, memory-anchored blockages that hinder them from reestablishing a connection. In these sessions, the facilitator will need to use more advanced Immanuel interventions as discussed in Chapter **Fill in when this chapter is finalized**. Almost everybody⁸ is eventually able to perceive the Lord's presence, establish an interactive connection, and then receive powerful healing and blessings, but with these complicated, memory-anchored blockages the facilitator and recipient sometimes need to persist through extended troubleshooting with advanced Immanuel interventions.

C. Expect Particularly Good Results with People Who Often/Usually Perceive the Lord's Presence: An interesting data point is that when we work with someone who's been able to perceive the Lord's presence in many previous emotional healing sessions (and/or has often perceived the Lord's presence in other situations), and then we encounter a situation in which the person is not able to perceive the Lord's presence, we have a very high success rate with finding and resolving the blockages by the end of the session. In almost every case, by the end of the session we've been able to figure out what was in the way, resolve the blockage, and then go forward, with the person being able to perceive the Lord's presence. Again: if a person has often/usually been able to perceive the Lord's presence in the past, then it's almost always possible to (fairly quickly) find and resolve hindrances in any specific situation where she's not able to perceive His presence.

My point here is that I want to encourage a special level of persistence and faith, within a single session, for any situation where you're working with someone who has often or usually been able to perceive the Lord's presence in the past. Also, this is a good place to start if you are a beginner and feeling insecure with respect to Immanuel interventions.

In the *long run*, you should have the same kind of persistence and faith for any person seeking to perceive the Lord's presence. Almost every person we have worked with has eventually been able to perceive the Lord's presence and establish an interactive connection; but some of these people have required many sessions to identify and resolve a variety of memory anchored blockages, and some of these people have required many sessions to identify and resolve the different components of their particular pernicious blockages. My own experience with many healing sessions to resolved a variety of memory anchored blockages, and many sessions to identify and resolve the different components of my particular pernicious blockage, provides a good example. I was not able to perceive the Lord's tangible presence or establish an interactive connection until I went through many emotional healing sessions to resolve memory anchored blockages, and to identify and untangle the components of my pernicious blockage; but in the long run this persistent work has been effective, and it has been worth it! I now routinely perceive the Lord's presence and am able to establish an interactive connection with Him, both of these pieces have become easier and easier to accomplish, and the strength and quality of my interactive connections with the Lord have been increasing steadily. A final encouraging thought along these lines is that I'm convinced my journey would have been considerably easier and shorter if our current Immanuel approach insights and tools had been available.9

⁸ As mention earlier in chapter,

⁹ For a detailed discussion of the pernicious blockage that hindered my connection with the Lord for many years, including the story of how the Lord helped me to resolve it, see "Immanuel, An Especially Pernicious Blockage, and the Normal Belief Memory System." For discussion of my healing journey with respect to other memory anchored blockages, see "Dad/God Isn't All-knowing or All-powerful:

D. Immanuel interventions usually work, and when they do, the person is always able to take the next step forward: It is important to note that Immanuel interventions do not always work. There have been some 10 situations where we have *not* been able to find and resolve whatever was in the way. However, mostly we are amazed with how often they do work. In our current experience Immanuel interventions are usually successful, and in every situation where Immanuel interventions are successful, and the person is able to perceive the Lord's presence and establish an adequate interactive connection, something good happens and the person is able to take the next step forward.

E. Putting it all together (Immanuel interventions section): So, putting all these pieces together, the practical application with respect to the Immanuel Approach is that the facilitator needs to help the person maintain an adequate interactive connection through out the process. We need to actively watch for clues that the person may have lost an adequate interactive connection, we need to check-in regarding the person's interactive connection as part of routine troubleshooting whenever it seems the session is not moving forward, and we need to apply Immanuel interventions whenever we find that an adequate interactive connection is no longer present.

A Case Study and Discussion," "Case Study: 'God the Psychotic Cult Leader," and "Emotional Healing and Personal Spiritual Growth: A Case Study and Discussion." These essays are all available as free downloads from www.kclehman.com.

¹⁰ A very small number, but not zero.

The Immanuel Approach (to Emotional Healing and to Life) Chapter 14: Immanuel Approach Safety Nets

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Prior to developing the Immanuel approach, we had decided to avoid group emotional healing exercises due to concerns about the possibility that many people might get stuck simultaneously. With all other approaches to emotional healing that we are aware of, you can only do troubleshooting in a "one on one" setting. Therefore, we never did group exercises because we did not want to get to the end of an exercise and have 38 people stuck in traumatic memories, each needing an experienced facilitator to provide one-on-one troubleshooting. Actually, I did this *once*. I tried a group exercise at one of our seminars, with maybe 50 to 75 people. Many of the participants experienced wonderful healing; but a number of the participants got stuck in negative memories, we were not able to provide one-on-one troubleshooting in the group context, and these people had miserable experiences. Once was enough. Hence the decision to avoid emotional healing exercises with groups. However, as Dr. Wilder and I worked with the Immanuel approach we realized that several of the principles and process pieces that are new with the Immanuel approach make it possible to deploy a number of "safety nets" that protect against this problem. Therefore, one aspect of the Immanuel approach to emotional healing that is particularly exciting is that it can be used in group settings.

When one thinks about the war torn third world countries, where millions of people have post traumatic stress disorder but where there are minimal resources available for these multitudes to get effective treatment to address their traumatic memories, it is hugely strategically important that the Immanuel approach can be used with many people simultaneously. For example, wouldn't it be glorious if an emotional healing mission team could gather a couple of hundred trauma survivors and facilitate healing for all of them at the same time? With this kind of possibility in mind, Charlotte and I, Dr. Wilder, the Khouris, the Courseys, Pastor Patti, and several other colleagues have been experimenting with group exercises in a number of different settings over the last four to five years. And the results so far have been very encouraging – together, we have worked with thousands of group exercise participants, with group sizes from 25 to 1200, and we have seen lots of healing with minimal problems.

Prior to developing the Immanuel approach, we were also cautious about lay people doing emotional healing work (we wanted them to get a lot of training before facilitating lay ministry), and we felt that beginners should only practice under the close supervision of experienced facilitators. As with group exercises, we were concerned that recipients might get stuck – we were concerned that some recipients would open up painful memories, encounter difficulties beyond the troubleshooting abilities of lay ministers/beginners, and then be re-traumatized by remaining in the unresolved trauma for extended periods of time. However, as we have been working so diligently to clarify the principles and sharpen the tools for using the Immanuel approach with groups, we have realized that the same "safety nets" that make it possible to use the Immanuel approach safely with groups also make it possible for lay people to safely provide emotional healing ministry with much less training. This means that more lay people can become lay ministers much more quickly and easily, and this means that many people with less complicated trauma will be able to get healing with lay ministers, instead of having to wait for one of the rare and overloaded Immanuel approach mental health professionals. Furthermore, these same "safety nets" also make it possible for unsupervised beginners to safely practice with each other. This means that a handful of people anywhere in the world can get together to learn

and practice with each other. You don't have to wait for one of the rare Immanuel approach trainers to come and supervise as you practice with each other. You can just gather a handful of your friends, family, or colleagues, put together your own study group, and then receive Immanuel approach healing in the context of practicing with each other.

This is good news for the millions of third world citizens with severe post traumatic stress disorder and minimal resources, and also for those of us with less trauma and more resources. Even in first world countries there are many people with moderate trauma who are having a hard time finding someone to facilitate Immanuel approach sessions for them. I spent the fall of 2012 working with Andy and a professional website designer building the new Immanuel network directory (see the "Referrals" page of www.immanuelapproach.com). When we first put it up, I had hoped that large numbers of facilitators would quickly post profiles, and that this would make it much easier for folks to find a facilitator. Unfortunately, many well trained, experienced facilitators have chosen to not post profiles because they are already swamped with more requests than they can care for. Consequently, many who would like to receive Immanuel approach sessions are still having difficulty in finding facilitators, and this problem will probably continue for some time.

Bringing us back to "It's good news that the Immanuel approach safety nets make it possible for many more lay ministers to get adequate training much more quickly and easily, and it's good news that these same safety nets make it possible for unsupervised lay person beginners to safely practice with each other." My hope is that large numbers of lay people² will take advantage of every possible training opportunity, so that we have a steadily, rapidly growing number of facilitators available to the general public. I am also hoping that people will build study/practice groups by actively recruiting family and/or friends and/or colleagues,³ and then use the do-it-yourself Immanuel approach training resources in this context.⁴ If these possibilities develop as I am hoping they might, lay people practicing with each other in the context of do-it-yourself Immanuel approach study/practice groups and sessions facilitated by lay ministers will be two of the most important resources for those who are wanting to experience the Immanuel approach.

I. Safety net number one: The initial steps of identifying a positive memory, deliberate appreciation, and establishing an adequate interactive connection with the Lord combine to set up an especially reliable "home base" that the lay person/beginning facilitator can use as a back up

¹ It is tremendously helpful to have a trainer teach you about the Immanuel approach and then supervise you as you practice with each other, and you should therefore take advantage of any opportunity to learn from someone who is already experienced with the Immanuel approach, but I don't think this is necessary (which is a good thing, since there are so few trainers).

² Mental health professionals and people in full time ministry are certainly welcome as well, but my vision is for every person in the world to be able to receive Immanuel approach sessions, and for this to be possible we will obviously need massive participation on the part of lay ministers.

³ Another possibility for building study/practice groups is for lots of people to post profiles on the Immanuel website network directory and tag their profiles with the "Immanuel approach study group" label. Then people wanting to build study/practice groups can find potential participants by searching for other "Immanuel approach study group" profiles in their area.

⁴ Resources for Immanuel approach do-it-yourself training can be found in the "Where/How Do I Get Training Regarding the Immanuel Approach?" essay on the "Training" page of the Immanuel approach website (www.immanuelapproach.com), and/or Appendix C of *Outsmarting Yourself*.

resource, or troubleshooting "safety net," during the session. As discussed briefly in chapter 13, if the recipient loses her connection with God and other basic Immanuel intervention troubleshooting tools are not effective in reestablishing an interactive connection, the facilitator can coach the her to go back to the interactive connection from the beginning of the session. And then, in this safe, positive context, the facilitator can coach the recipient to engage directly with Jesus and ask Him for guidance and help regarding the point in the session where she was *not* able to perceive His presence or establish an interactive connection. We have been amazed at the effectiveness of this simple safety net troubleshooting intervention.

The especially reliable home base that gets set up at the beginning of the session also provides a "make sure the person is okay" safety net at the end of the session. If the recipient gets stuck in a bad place and is not able to resolve whatever blockages are preventing her from moving forward, or if she is unable to finish processing her traumatic memory because she simply runs out of time, she can return to the positive memory, appreciation, and interactive connection with the Lord that were all refreshed at the beginning of the session. She may be disappointed that she was not able to resolve the traumatic memory, but she at least ends up back at a safe place of relational connection and positive emotions.

An airplane analogy helps in understanding the particular importance of the make-sure-the-person-is-okay-at-the-end-of-the-session safety net. Having a safety net that helps the recipient get back to her initial interactive connection with Jesus, even if she gets stuck regarding her trauma work and/or runs out of time, is like having a safety net that would enable a pilot to always get her plane safely back on the ground, regardless of any problem she might encounter in the air. The scariest part of flying in an airplane is that if things go wrong, you can drop out of the sky at hundreds of miles per hour and end up as flaming debris scattered across somebody's cornfield. And this is why you never hear of beginner pilots practicing without an experienced pilot sitting right next to them. Without one-on-one supervision, a beginner making even *one* serious mistake, or encountering any serious problem she doesn't know how to deal with, would pretty much be dead. No sane person will take this kind of risk.

In contrast to this scenario, think about how *not* scary and *not* dangerous flying would be if there was a big red button in the middle of the control panel that could always get you safely back on the ground. You've miscalculated the cost of bucking a strong headwind all the way from New York to Chicago, and so you're running out of fuel over the middle of lake Michigan? No problem – just push the big red button and you're perfectly safe, back on the ground in New York. You can't see the ground because of heavy cloud cover, your navigational system gives out, and now you're totally lost somewhere over the rocky mountains between New York and Los Angeles? No problem – just push the big red button and you're perfectly safe, back on the ground in New York. You might be disappointed that you weren't able to get to Chicago or Los Angeles, but I think most people would be willing to handle the risks of practicing without supervision if this were the worst that could happen. It's still *ideal* to learn the Immanuel approach with an experienced facilitator sitting beside you and coaching you as you practice, but in areas where no experienced facilitator coaches are available, having a safety net that can get the recipient safely back on the ground minimizes the risks to the point that many beginners are willing to learn and practice even without supervision.⁵

⁵ These ideas obviously also apply to situations in which a small team of experienced facilitators are leading an exercise for a large group, so that minimal supervision is available.

And we know this works because we have heard from lay person beginners who have already tried it. For example, several months ago a twenty three year old friend of ours called from another country, asking for help regarding her cousin who was in crisis. I encouraged Barbara to help her cousin find someone who could facilitate Immanuel approach sessions; but, unfortunately, they had already explored this possibility pretty thoroughly, and they could not find anybody in their area who could provide what they needed. So then I suggested that she might try facilitating a session for her cousin. Barbara had read some of our material, and she had received a handful of Immanuel approach sessions for her own healing work, but other than these two pieces she didn't have any ministry or mental health training or experience. So the prospect of facilitating an emotional healing session for someone in crisis was understandably quite daunting. However, as we continued to talk about the possibility of her doing a session with her cousin, I kept reminding her about this safety net; and I explained several times how she could make sure it was in place at the beginning of the session, and then if she got in over her head all she had to do was help her cousin get back to the initial positive memory connection with Jesus. She eventually decided to go ahead with this plan, even though she was a total beginner and would be facilitating her very first practice session without supervision.

A couple weeks later we got another call, and Barbara informed us that she had, indeed, gone ahead with the plan to facilitate an Immanuel approach session for her cousin. She also informed us that the safety net had been a very, very good idea. Within twenty minutes of starting the prayer time, her cousin was lying on the floor, overwhelmed with painful emotions as she reexperienced severe early traumas that she had never before been consciously aware of. Barbara coached her cousin to invite Jesus into the traumatic memories, and then tried several simple troubleshooting tools when her cousin was not able to perceive Jesus, but she was still not able to establish a connection with Jesus inside the traumatic memories.

At this point Barbara realized that she was in over her head. She did not have the troubleshooting knowledge or skill necessary to be able to help her cousin identify and remove the blockages hindering her from connecting with Jesus, and she certainly didn't have the therapy training or experience necessary to be able to help her cousin work through the trauma without Jesus. Without a safety net, this would have been a very messy situation, and Barbara would have needed to turn to unpleasant emergency interventions, such as sitting with her cousin through hours of excruciating emotional pain, hoping that she would eventually, somehow, calm back down, or possibly even taking her cousin to the emergency room and having her admitted to a psychiatric inpatient unit. However, Barbara had fortunately remembered to put the safety net in place at the beginning of the session. When she had tried all of the tools she knew how to use and realized that she was in over her head, she simply coached her cousin to return to the positive memory, appreciation, and connection with Jesus from the beginning of the session. And even though her cousin had been totally stuck in traumatic memories with overwhelming negative emotions – even though she had not been able to resolve the blockages and get through the trauma to resolution – they were still able to end the session in a good place, with her cousin connected to a positive memory and experiencing an interactive connection with Jesus.

Our young friend was willing to try facilitating an Immanuel approach session *because she knew this safety net would be in place*. And *she was able to successfully use the safety net*, even though she did not have any ministry or mental health training or experience, even though she had to practice without supervision, and even though she stumbled into intense, early, dissociated traumatic memories in the very first session.

II. Safety net number two: When working with groups, when teaching the basic exercises to lay

ministers, and especially when training beginners, we set a policy that establishes a second safety net. Those who are *not* able to perceive the Lord's presence and establish an interactive connection with Him at the beginning of the exercise are encouraged to participate in the rest of the exercise as intercessors, but *they do not work with their own traumatic memories*. This precaution seems to identify and protect those who are most likely to get stuck and have a negative experience, and thereby provides a second safety net. It also identifies those who do not have the primary safety net in place, which is another really good reason for them to abstain from working on their own trauma.

III. Safety net number three: Whenever you are working with a group, whether you are working with a large group of three hundred or whether you are practicing in an Immanuel approach study group of twelve, the first step of the group exercise is to divide the larger group into very small circles of three to five. This provides a third safety net, or maybe I should say that it provides the team that makes sure the first safety net gets deployed effectively. If the group member who is receiving gets stuck in a negative place, the others in the group can help her return to her initial positive place by coaching her to describe the initial positive memory, to repeat the deliberate appreciation exercise, and then to reestablish the initial interactive connection with the Lord. Dividing the larger group into small clusters also provides a setting in which each member can report regarding her experience (describing "whatever comes into her awareness"), at each step in the process, and thereby benefit from the ways in which our brains work better in community. This significantly increases the effectiveness of the exercise, both increasing good results and decreasing disappointing results.

Note that both this third safety net and the enhanced efficacy from our brains working better in community also apply to individual sessions, since the recipient can report to the facilitator at each step in the process, and if the first safety net needs to be deployed the facilitator can coach the recipient to return to her positive memory, refresh her appreciation, and reestablish her initial connection with the Lord.⁷

Advanced topics warning: If you're reading this material for the first time, just to get the overview regarding the Immanuel approach safety nets, then I would recommend skipping/skimming the next section (for now) so that these practical details don't slow you down and hinder you from seeing the big picture. Come back for these practical details when you're ready to actually start practicing with Immanuel approach exercises.

V. Practical considerations regarding the return-to-initial-interactive-connection intervention:

⁶ See chapter 16, "Our Brains Work Better in Community," for a compelling explanation of why it's important for each participant to describe "whatever comes into her awareness," and for discussion of the intriguing ways in which God has designed our brains to function best in community.

⁷ The only situation that does not benefit from this third safety net and our brains working better in community is when you try the Immanuel approach on your own. This is one of the reasons we strongly recommend first experiencing the Immanuel approach in a group or with a facilitator, and only doing it on your own after you have developed capacity and skill in the context of group exercises/facilitated sessions.

A. It can more challenging if the recipient is intensely non-relational: As mentioned in chapter thirteen, sometimes a person who is connected to a traumatic memory will be feeling intense negative emotions and her relational circuits will be *really* off, and in this context she will not initially feel like talking about positive memories and she will not initially feel any subjective sense of appreciation. Again, in these situations you may need to be very directive and persistent in coaching the person to talk about positive memories and appreciation *even when they don't feel like it.* In some situations it may take as long as fifteen to twenty minutes, but our experience is that if a person persists in talking about positive memories of experiencing the Lord's presence they will eventually calm down, regain access to their relational connection circuits, return to feeling appreciation, and be able to get back to a good place of perceiving the Lord's presence and enjoying an interactive connection with Him. It may take some practice to learn to be adequately directive and persistent in these situations, but with appropriate coaching most people can learn this fairly quickly.

When the person is intensely connected to traumatic memories (and usually also deep in non-relational mode), and you want to use the return-to-the-initial-interactive-connection intervention, it is important to acknowledge the validity of the person's distress, assure her that her pain is not being dismissed or ignored, remind her regarding the purpose of the positive memory intervention, and assure her that you will eventually come back to the unresolved trauma. I usually say something along the lines of, "I understand that this painful memory place is very important, and needs to be cared for. I'm not trying to ignore or minimize this memory place, or just stuff it back down. But for right now, the next step in the healing process is to "switch gears" and go back to the positive memories and interactive connection from the beginning of the session."

If you know about attunement and are skilled in providing it, the ideal is to start with offering attunement until the person regains access to her relational connection circuits, and then *after she has regained access to her relational connection circuits* coach her through the steps of recalling positive memory, deliberately stirring up appreciation, and reestablishing an interactive connection. When I include attunement in this way, the comments validating her pain, reminding her of the purpose of the intervention, and assuring her that we will return are usually part of my offering attunement.⁸

B. A potential shortcut: As also mentioned in chapter thirteen, it is sometimes possible to use a shortcut. Some recipients are able to go directly back to the interactive connection from the beginning of the session, without even needing to repeat the positive memory recall and deliberate appreciation steps. Again, if you work with a person repeatedly, and discover that she can usually do this, it's good to try this simpler, more time efficient intervention first. And then only include the more time consuming positive memory recall and deliberate appreciation steps on the rare occasions when the recipient is *not* able to quickly and easily reestablish the interactive connection with God from the beginning of the session.

⁸ For additional discussion of attunement and relational connection circuits, see chapters 15 and 17 in *Outsmarting Yourself*, and Part II of the "Brain Science, Psychological Trauma, and The God Who is With Us" essays (available as free downloads from www.kclehman.com).

⁹ The *Bob: Safety Net Demonstration* live session teaching DVD (#29 in the LMS series) provides a good example of quickly and easily going back to the initial interactive connection, without having to go through the positive memory recall and deliberate appreciation steps. **note: this teaching DVD is still pending as of June 25, 2013**

The Immanuel Approach (to Emotional Healing and to Life) Chapter 15: Formulate and Tell the Immanuel Story

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Over years of working with the Immanuel approach, Dr. Wilder, myself, and many others have noticed that some people have a few powerful, beautiful healing experiences with Immanuel, and even report dramatic lasting fruit, but then do not continue with ongoing Immanuel approach sessions. They are grateful for the handful of beautiful connections with Jesus, for resolution of the one traumatic memory (or one set of related traumatic memories), and for relief of the pain and symptoms associated with this one memory (or set of related memories), but then they don't go on to pursue emotional healing as a regular, ongoing part of their lives. In contrast, others have a few initial Immanuel approach sessions and then quickly begin to make the Immanuel approach a regular part of their lives. For these people, deliberately watching for times when they get triggered and then pursuing Immanuel healing for the underlying trauma become a *lifestyle*, as opposed to a one time event (or maybe something they do every several years, when they are in crisis and/or experiencing especially intense pain). Naturally, we all wondered, "Why doesn't everybody get it? Why do some people quickly recognize the larger importance of their initial healing sessions, and then deliberately incorporate ongoing emotional healing as an integral part of their lives, while others seem to totally miss the bigger picture?"

My perception is that there are a number of factors that contribute to this difference, but Dr. Wilder noticed that one striking variable is whether or not the person formulates the experience into a coherent narrative and then shares this "Immanuel story" with others. I haven't had a chance to go through the science myself, but Dr. Wilder's summary of the psychological and neurological research is that formulating the experience into a coherent narrative and then sharing the story with others helps to deepen and consolidate the beneficial effects. The specific traumatic memory still gets healed, whether or not you formulate the experience into an Immanuel story and then share it with others, but formulating and sharing the Immanuel story helps you begin to think differently about how to respond when other traumatic memories get triggered in the future. Formulating and sharing the Immanuel story actually increases the beneficial brain changes associated with Immanuel healing, causing updates in the memory files that carry information about how you should respond to the many different situations that you might encounter. If you formulate and share the Immanuel story after each healing encounter, when you get triggered in the future you will become more and more likely to immediately think, "Hey, I'm triggered, but I know what to do about it! Instead of being miserable and fighting with the triggers, I'll do that Immanuel thing, connect with Jesus, and get healed."

Furthermore, it is beneficial to the listener to hear others share about their Immanuel encounters. Not only do these stories provide encouragement, build faith, and fulfill a Biblical mandate ("Remember what I have done for you,...tell your children about My faithfulness..." etc), but they also produces beneficial brain changes. Just as with you sharing your Immanuel stories, hearing others tell stories about how they respond to triggering with the Immanuel approach to emotional healing, and how they respond to other situations with the Immanuel approach to life, also causes

¹ As described in chapter two, the Immanuel approach to life includes more than just emotional healing and more than just connecting with Immanuel during specific sessions. However, most people begin building an Immanuel lifestyle/an Immanuel approach to life by getting healing for traumatic memories in the context of Immanuel approach sessions.

memory updates in the parts of your brain that carry information about the best ways to respond to the many different situations that you might encounter. Good stories actually provide a form of modeling. When you encounter a similar situation, the "What do I do now?" part of your brain will remember the story, and respond with something along the lines of, "When Dr. Wilder encountered a situation like this, he did that Immanuel thing with Jesus, and it turned out pretty well. I think I'll try that plan, instead of just fighting with the trigger."

The very short summary with respect to how to formulate an Immanuel story is: 1) describe how things were regarding the particular issue/memory before you experienced God's presence; 2) describe (in as much detail as possible) what happened/changed as you became able to perceive God's living interactive presence, and then engaged with him regarding the particular issue/memory; and 3) describe how things have been different since engaging with God's Immanuel presence regarding the issue/memory. For some recipients, this short summary is all they will need. Just coach them to put these three pieces together into a coherent narrative, and then to share the story with God, yourself, and with at least three additional people, ideally within a day or two of the Immanuel experience.

However, there are several considerations that lead to the need for additional specific coaching in certain situations. The first of these considerations is that many people have much more experience, much more skill, and much more vocabulary for talking about the painful part of the story before they perceived the Lord's Immanuel presence and engaged with him for healing. As a result of this, people's Immanuel stories are often 30 minutes of pain story (all about how bad things were and how painful it was before Immanuel), and then 15 seconds of "Then suddenly Jesus was there with me, and all the pain went away. I feel better now, and that memory doesn't bothered me any more." Another consideration is that Immanuel stories can sometimes get hijacked by trauma splinters. As mentioned in the discussion of deliberate appreciation,² with complicated trauma it is common to have a number of distinct pieces within a given traumatic memory, so that unresolved pieces (or "splinters") may sometimes remain, even though the recipient has truly experienced the Lord's living presence and received beautiful healing. When this is the case, if one of these splinters gets touched on as the person is trying to formulate and share her Immanuel story, the story can get "hijacked" and end up being all about the pieces of pain that are still not resolved. Finally, the Immanuel approach is often used in situations in which it is particularly problematic to have participants focusing on their pain stories. As described in chapter two, the Immanuel approach is often used in group settings with people who have experienced large amounts of severe trauma, and who often have similar trauma. In these situations, if participants start telling long, detailed pain stories they will trigger each other, and you will have a room full of people who are all intensely connected to unresolved severe trauma.³

Therefore, in environments where there's a lot of trauma that could get triggered, it's important to provide some practical coaching, especially helping people to de-emphasize the part of the story about the pain and to enrich the parts of the story about engaging with Immanuel and about

² "Appreciation without splinters" in the "Practical Considerations" section of chapter six (pages **fill in**).

³ Thankfully, we can care for this situation by calling a time out, and coaching everybody to go back to their positive memories, appreciation, and initial interactive connection with God, but it's better to avoid this situation as much as possible.

what has been different since engaging with Immanuel.⁴ Actually, our observations are that most of us are much better at telling the pain part of the story, and that most of us formulate narratives with the Immanuel part of the story being brief and impoverished. In fact, our observations are that *most* of us need to be more deliberate in formulating the Immanuel part of our Immanuel stories, and that most of us could benefit from the coaching we provide here with respect to formulating the Immanuel details. So even if you are not in a high trauma situation in which it is important to avoid the pain part of the story, we encourage you to try these suggestions regarding how to formulate a story with rich, optimal Immanuel details.

I. One pain free phrase for the initial context: When working in high trauma environments, we want to both start and end the Immanuel story at a positive Immanuel interactive connection place, so the recipient should start the Immanuel story at the point when she first becomes aware of Immanuel's presence. As the first step in preparing the Immanuel story, help the recipient formulate a single phrase that presents the context for this initial perception and connection with the Lord (a *single* phrase that gives just the simplest description of the physical setting, *with no content regarding the pain*). For example, if Eileen were constructing this kind of minimize-the-pain Immanuel story for the emotional healing session presented in chapter one, she could start with this single phrase, "I was standing in the middle of the kitchen."

Eileen would *not* formulate a whole paragraph (or page) about how her depressed mother was staring blankly into space as she mindlessly scrubed the counter, about how Eileen was longing for love and connection but never got it, about how she desperately needed her mother but her mother just ignored her, about how Eileen was not getting the love she needed but there was nothing she could do about it, about how Eileen had been waiting and waiting for her mother to notice her but her mother didn't seem to know she existed, about how Eileen was crying but her mother didn't hear her, about how Eileen doesn't have a single memory of her mother holding her or saying, "I love you," about how Eileen has always had an empty, unsatisfied feeling – a sense that something was missing – a sense that there was something she needed but could never quite get, about how Eileen has had a long standing pattern of compulsive eating with respect to ice cream, and about how Eileen has struggled with her weight for as long as she can remember. She would not even formulate a long sentence with multiple phrases that at least touches on the pain, such as, "I was standing in the middle of the kitchen, watching my mother working at the counter, and I was crying as I longed for her to notice me and want to be with me." Just, "I was standing in the middle of the kitchen."

II. A detailed description of interactions with Immanuel: Once the recipient has a single phrase that provides a very simple, *pain free* presentation of the context, the next step in preparing the Immanuel story is to formulate a description of her experience of perceiving God's Immanuel presence, connecting with Him, and engaging with Him to receive healing. As she describes perceiving and engaging with Immanuel, she should include as many details as possible, giving a blow-by-blow account, like a sports newscaster reporting on the super bowl. For example, if Eileen were preparing this part of the Immanuel story for her session from chapter one, she might come up with the following:⁵

"I became aware of Jesus sitting at the kitchen table right after you asked Him to help me

⁴ These instructions are adapted from E. James Wilder and Chris M. Coursey, *Share Immanuel: The Healing Lifestyle* (Pasadena, CA: Shepherd's House Inc.), pages 10-13.

⁵ Based on additional information from the video for the complete session.

perceive His presence, and when I told you I saw Him sitting at the table I felt a smile. At first I thought Jesus was just watching me, but then when you coached me to focus on Him more deliberately I realized that He was putting out His arms to me, asking me to come to Him. He didn't coming and get me, but He was putting out His arms to me and inviting me to come to Him. And I could feel the warmth of His presence and smile. I struggled for a while, because I was still focusing on my mom – I was still wanting and waiting for her to pay attention to me – I was still trying to make her notice me and love me. But then you coached me to focus on Jesus again, and ask Him for more help, and when I did He told me that He has loved me from the beginning of time.

I was still having trouble, still trying to hang on to the hope that my mother would notice me and want me, but when I talked to Jesus more about all of my thoughts and feelings, and asked Him for more help, He came closer and gave me some more encouragement. He showed me that I needed to let go of trying to meet my own needs, He told me that I needed to give Him my broken heart, and He said that He would give me a new one. He said, 'I was with you when you were born, I wanted you to come to life, and I've always been with you.' And then He held out His hands to me, He showed me His wounds, and He said, 'I did this for you.'"

Finally, I was able to go to Jesus and He picked me up and held me. As He was holding me I could feel His heart beating. And at the very end He told me that, for now, I could just be with Him and enjoy being with Him, but that at some time in the future we will have to do some more work about my mother."

III. The differences between thoughts and feelings before Immanuel and thoughts and feelings after Immanuel: The next part of preparing the Immanuel story is to identify the differences between our thoughts and feelings before our interactions with Immanuel and our thoughts and feelings after our interactions with Immanuel. Coach the recipient to formulate a series of sentences, with each sentence including the following three parts: 1. Her thoughts and/or feelings before her interactions with Immanuel, 2. What Immanuel did to effect the change, and 3. Her thoughts and/or feelings after her interactions with Immanuel. For example, if Eileen were preparing this part of the Immanuel story for her session from chapter one, she might come up with the following:

"Before, I felt a cold, empty void – I felt my mother's absence. But then I became aware of Jesus, and now I feel the warmth of His presence and smile instead of the cold, empty void."

"Before, I was crying. But then Jesus smiled, and when I sensed His smile and the warmth of His presence I began to smile."

"Before, I felt alone and disconnected, but then Jesus picked me up and held me, and now I feel connected."

"Before, I felt unloved – I felt the absence of my mother's love. But then Jesus told me that He has loved me from the beginning of time, and now I feel loved."

"Before, I felt unwanted, but then Jesus said that He wanted me, and now I feel wanted."

"Before, I felt unnoticed, unimportant, and uncared for. But then Jesus showed me the wounds in His hands and said, 'I did this for you,' and now I feel seen, special, and cared for."

"Before, I felt anxious, and that I had to take care of myself by making people notice me and care for me. But then Jesus told me that I need to let go of taking care of myself, and that I need to give Him my broken heart. And then I renounced trying to meet my own needs, and let Him pick me up and hold me. Now I feel peaceful, and secure in His love."

"Before, I felt like something was missing – I felt the absence of my mothers attention and care and love. But then Jesus held me and told me He loved me. Now I feel content, satisfied, and not hungry."

"Before, I felt helpless and powerless – like there was nothing I could do to get what I wanted and needed (like there was nothing I could do to make my mother notice me, want me, and love me). But then Jesus told me to give Him my broken heart and that He would give me a new one, and now I feel like I can turn to Jesus when I need help."

"Before, I felt sad and lonely. But then I sensed Jesus' smile, He told me He loved me, and He held me so close that I could feel His heart beating. Now I feel wonderful and joyful."

IV. Lasting changes in the recipient: The final part of preparing the Immanuel story is to identify any lasting changes in the recipient that have occurred as a result of her interactions with Immanuel. Are there longstanding negative thoughts that no longer feel true? Are there new, positive thoughts that now feel true for the first time? Are there old, familiar negative emotions that are no longer present? Are there new, positive emotions that are now present for the first time? Are there longstanding patterns of negative behavior that have decreased, or even disappeared entirely? Are there positive behaviors that are now more common, or even present for the first time? Obviously these kinds of changes will be easier to observe over time, but it is still good to look for these even as the recipient formulates her Immanuel story at the end of the session. If Eileen were formulating this part of the Immanuel story for her session from chapter one, she might come up with the following:

"For as long as I can remember, I have always had a vague sense that something was missing — a sense that there was something I needed but could never quite get — a restless, empty, unsatisfied feeling that I could never quite focus or resolve. And I have always tried to fix this problem/fill this empty place/resolve these unsatisfied feelings by eating ice cream. But now, on some very deep level, it feels like I've been comforted by something other than ice cream — it feels like this place has been filled and that this need has been satisfied with Jesus' presence and love, and I don't feel the constant need to try to fill this hole or satisfy this need with ice cream any more. And not only does it feel different, but my compulsive ice cream eating has actually stopped."

"For as long as I can remember, I've struggled with my weight. I've gained and lost the same 15 to 25 pounds at least 15 times, but I had never previously been able to maintain my weight at a place I felt good about. But now I have been steadily losing weight, with much less difficulty than ever before, and I am maintaining my healthy weight loss."

"I have always struggled with feeling unloved, unwanted, and unimportant – at family gatherings, or other social events, these thoughts and feelings would easily get triggered if I felt that people weren't noticing me, paying attention to me, or caring for me. And I would always be trying to make people pay attention to me, love me, and care for me. This whole thing has caused many problems with my family relationships and friendships. But since the Immanuel

time with my three year old part in the kitchen, this has been less. It's hasn't totally resolved,⁶ but it's not as bad. And in that specific three year old child place I still feel that Jesus notices me, wants me, cares about me, and loves me. In that specific child place, the sensitivity to not getting enough attention, care, and love, and the need to try to make people pay attention to me, care for me, and love me are totally gone."

V. Share the complete Immanuel story: After the recipient has finished preparing/formulating her Immanuel story, the next step is for her to tell the whole story, out loud, to God, and then take time to sense God's response to hearing her story. After telling the story to God, the recipient should share the story with anyone who was with her as she was perceiving and interacting with Immanuel (for example, the other members of her small group if she is working in a group setting). Finally, she should tell the story to three other people (Dr. Wilder recommends doing this before the end of the day). The story doesn't actually take that long to tell, so this isn't as challenging as it might seem at first. Telling the right Immanuel story three times will help the new, positive thoughts and feelings about herself to sink in more deeply. Also, as mentioned earlier, this will cause the memory files in the "how to respond to various situations" part of the recipients brain to be updated, so that in the future, when she encounters painful situations and/or gets triggered, she will be more likely to think to go to Immanuel for help and healing.

VI. Additional practical considerations:

- In preparing the Immanuel story, most people find it to be very helpful to work with the facilitator and/or their small group (anyone who witnessed the session). Most people also find it helpful to use written notes in preparing their Immanuel stories.
- Note that an Immanuel story formulated as described above is not the same as a case study or testimony, such as Eileen's story from Chapter one. As already described, the pain part of the story is completely removed in order to prevent people in high trauma environments from triggering each other with their Immanuel stories, and the positive parts of the story are formulated to accomplish very specific objectives with respect to integrating, consolidating, and updating in the brain. Testimonies and case studies, on the other hand, have different objectives and therefore need to be formulated differently. (I will include more regarding this distinction for the final draft of the book.)
- This is probably already apparent to the reader, but when recipients use the minimize-the-pain version of their Immanuel stories it will feel strange to tell their stories without any explanation

⁶ This issue of not feeling noticed, wanted, cared for, or loved is a thematic issue for Eileen, with many other memory anchors in addition to the specific memory resolved in this Immanuel approach session. The reader will be encouraged to know that it has continued to progressively resolve as she has continued to get Immanuel healing for these other memory anchors. Along these lines, it is interesting to note that her struggle with trying to fill the hole with ice cream did resolve with the healing from this one session.

⁷ I just tried reading Eileen's example Immanuel story (out loud, and slowly), and it only took me four-and-one-half minutes.

⁸ Pop quiz: What do we mean by the "right" Immanuel story? Hopefully your answer is something along the lines of "The pain part of the story is not overemphasized, the interactions with Immanuel are described in detail, and the story includes details regarding the things that changed from before engaging with Immanuel to after engaging with Immanuel."

or description regarding the trauma/pain parts of the stories. It is helpful to name this when explaining the process to the recipients, and then encourage them to try it anyway. It will also feel strange to the listeners, and many will ask about the pain details. Our recommendation is that the recipients try, "I have to talk to God about it, come back for an answer in three days." And then ask God how to answer them when they return. This will obviously be less awkward and confusing if the listeners are also familiar with this material regarding minimize-the-pain Immanuel stories. For example, this works very smoothly in a group training situation in which the all of the participants have received this teaching regarding minimize the pain stories, and they can share their stories with each other.

The Immanuel Approach (to Emotional Healing and to Life) Chapter 16: Chris, Birth Ordeal, and Immanuel

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After two days (43 hours) of waiting, praying, and agonizing labor pains, Chris and Jen were exhausted and at the point of desperation. Jen's dream of a natural birth was a foggy, distant memory, and they were both at the place of just wanting relief. They and the doctors decided to add pitocin, in an attempt to move things forward, and this quickly and dramatically dialed up the intensity. At this point one of the doctors also discovered that Matthew, Chris and Jen's unborn son, was misaligned, and Chris feared for the lives of his wife and child as the medical team scrambled to intervene.

Thankfully, by hour 47 Jen was holding their son as tears of joy rolled down their cheeks, but Chris had definitely been traumatized by the drama in the middle of the experience. During the two hours of maximum intensity, when the pitocin had been doing its' job and the medical team had been scrambling to get Matthew lined up correctly, Chris was fully aware that he had lost access to his relational circuits, that he had lost his shalom and joy, and that he had lost his awareness of God's Immanuel presence. He noticed himself thinking, "I don't want to go through that again," and suddenly realized that he no longer wanted more children. Losing access to his relational circuits, losing his shalom and joy, losing his awareness of God's presence, and the sudden appearance of new negative thoughts and emotions all indicated that he had not been able to successfully process the painful experience.¹

Fortunately, this inadequately processed pain only remained as trauma for a short time. As soon as he realized what had happened, Chris turned to Immanuel for help. He very deliberately thought about a previous experience of connecting with Jesus, and then focused on this positive memory until he felt gratitude and had reestablished a connection. As soon Jesus' presence seemed real, living, and interactive in the present Chris began to engage directly with Him regarding his unprocessed pain: "Lord, I realize I have no idea where You were or what You were doing during the time Jen was in serious trouble. I was afraid for my wife and my son. I felt so helpless and alone. Where were You when I needed You?"

After sharing the pain that was in his heart, Chris perceived God's comforting presence, and the words, "Chris, that was scary for you. I was there providing and working through the team of nurses and doctors who were trained to do their job under extreme circumstances. Even though you did not know what to do, they did." The sense of God's presence and these reassuring words brought some peace, but Chris still felt tension and fear when he thought about the hours with the pitocin and the medical team scrambling to get Matthew lined up correctly. The lack of complete shalom indicated that more healing was still needed, so Chris continued with, "Lord, thank You for Your team of people. They were helpful. However, I still feel hurt, afraid, and angry about the whole ordeal. Why did it have to be so intense? That was so scary, Lord!"

At this point Chris noticed a remarkable image coming into his mind:

"The best way to describe the image is what happens if you face a mirror when there is another

¹ Remembering from chapter two, "not being able to successfully process a painful experience" is our definition of trauma.

mirror behind you, and your reflection appears multiplied as far back as your eyes can see. With this image in mind, I felt Immanuel continue, 'Chris, when the team of nurses and doctors were born, I had Matthew in My mind. When the parents of your nurses and doctors were born, I had Matthew in My mind. When their grandparents were born, I had Matthew in My mind."

And this pattern continued until Chris felt overwhelmed by the depth and power of the truth that the Lord was revealing to him. Jesus was showing him that He had Matthew in His mind all the way back to the beginning of time, and that He had prepared this specific, special team of people to help Jen successfully deliver their son!

This profound, healing interaction fully restored Chris' shalom and joy. "I never want to go through that again" and the associated fearful resistance to the idea of having more kids was replaced by the return of his longing for more children, and the negative images, thoughts, and emotions from the pitocin hours were replaced with a vivid, peaceful picture of Jesus providing for his family. Furthermore, these positive changes have remained. His desire for more children has continued (Chris and Jen now have a second son), and as I write this three-and-one-half years later, his image of Jesus providing for his family remains vivid and his memories from the pitocin hours remain free of negative thoughts, painful emotions, or any other indicators of trauma.

Adapted from E. James Wilder, Edward M. Khouri, Chris M. Coursey, and Sheila D. Sutton, *Joy Starts Here: the Transformation Zone, Beta Version 1.0*, (Shepherd's House Inc.: Peoria, IL: Shepherd's House Inc., 2013), pages 175-177, with additional information from Chris and Jen per private communication. Used with permission.

The Immanuel Approach (to Emotional Healing and to Life) Chapter 17: Describe Whatever Comes Into Your Awareness (Our Brains Work Better In Community)

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At the beginning of each Immanuel approach session, we ask that God guide both the facilitator and recipient by guiding each thought, image, memory, emotion, and physical sensation coming into their internal awareness. In response to this prayer, the Lord <u>always</u> provides guidance. Our minds are never empty. There are <u>always</u> clues present. Therefore, an important part of letting Jesus lead the process is for both the facilitator and the recipient to watch for, recognize, and report/describe what God is showing them. Especially for the recipient, as she participates in the Immanuel approach it is important that she describes everything that comes into her awareness, regardless of whether or not it feels important or makes sense.

- **I.** A compelling explanation for why it's so important: Those of you familiar with Theophostic will know that Dr. Smith has always taught that it is very important for emotional healing recipients to describe everything that comes into their awareness. However, he has not provided any support for this point other than his personal observation that it appears to be consistently helpful. Over the last several years I have gathered a collection of data points that I believe come together to build a compelling explanation for why it is so important for us to describe everything that comes into our awareness as we work to receive emotional healing.
 - **A.** Case studies from our experience with emotional healing: The first data points I want to present are observations from our experience with emotional healing sessions.
 - 1. My session regarding 2 y.o. separation memories: When I was two years old my brother and I were sent to stay with friends for three to four weeks during a time when Mom was so physically ill that she was unable to care for us. To put this in perspective: a two-year-old will experience a three week separation from his parents in much the same way as he'll experience his parents dying suddenly they disappear suddenly, and stay away longer than any possible two-year-old ability to understand or cope with their absence. Furthermore, a two year old perceives his parents to be omnipotent he believes nothing happens unless they allow it, and that nothing could make them do anything they don't want to do. This means he'll believe he's separated from his parents because they want to be away from him, and he'll believe that they can hear his calls and could come if they wanted to, but that they are *choosing* to ignore his cries for help. This extended separation from my parents was certainly more than I was able to successfully process with my very limited two-year-old capacity and maturity skills, and therefore ended up as psychological trauma.

For most of my life I didn't even know about this early and important trauma. We usually start recording conscious, explicit, autobiographical memory for events around the age of three, and since all of this occurred when I was two, I had no conscious autobiographical memory for this important separation trauma. My discovery of these events makes a good

story. I had been learning a lot about the unique characteristics of traumatic memories, about various aspects of triggering, and about the differences between "normal" explicit memory and "invisible" implicit memory. As part of all this, I decided to be much more intentional with respect to noticing when I was triggered and then trying to figure out where the triggered content was coming from. And as I was observing my own triggering much more carefully, I noticed one especially dramatic pattern that I could not explain. Any scene in a movie or book with a little boy losing his mother would make me cry. For example, even though I had watched the movie *The Kid* many times, I would still cry every time I came to one of the scenes about his mother dying of cancer. This didn't make sense to me, since my mother was still alive and well: "Why do I cry every time a kid loses his mother, since that has obviously never happened to me?"

During the time I'm making these observations my older brother comes to visit, and while we're sitting in a restaurant eating deep dish pizza I mention this particular puzzling observation: "....This one just doesn't make sense. Mom never got sick — why do these scenes stir up so much emotion for me?" He promptly replies with: "What about the time when Mom got so sick that we had to go stay with the Wetzels?" After looking stunned for several seconds, I respond with something along the lines of "What on earth are you talking about? Mom never got sick!" He goes on to tell the whole story, since he had been two years older and could still remember many of the details. He told me about how Mom got mono while she was pregnant with our younger sister, and eventually got so sick that Dad had to carry her to the bathroom. And about how they gladly accepted the Wetzel's offer to care for us, since Mom couldn't even get out of bed, let alone chase after two small boys, and Dad was working full time. I still didn't believe him until I talked to Mom and Dad and they both told the exact same story. How strange! These events had affected me greatly, and I could still observe intense triggered thoughts and emotions that I now recognized as coming from these memories, but I had absolutely no conscious autobiographical memories for these events.

As these pieces all came together I realized that I had often experienced triggered implicit memory thoughts and emotions from these events, but that I had never recognized or

¹ For detailed discussion of the many important difference between traumatic and non-traumatic memories, see "Brain Science, Psychological Trauma, and the God Who Is with Us, Part III: Traumatic Memories vs Non-Traumatic Memories," (available as a free download from www.kclehman.com).

² Explicit memory recall is what we all think of as "remembering." Explicit memory feels like "normal" memory. When we recall events through the explicit memory system it feels, subjectively, like "I'm remembering something from my personal past experience." *Implicit* memory is all memory phenomena that does not include the subjective experience of "I'm remembering something from my personal past experience." Implicit memory content does not feel like "normal" memory. When the implicit memory systems are activated our minds and brains recall memory material, but it does not feel, subjectively like explicit autobiographical memory. Since implicit memory does not feel like what we think of as memory, we usually do *not* have any awareness that we are remembering or being affected by past experience when memory material comes forward through one of the implicit memory systems. When this happens, the person perceives that the implicit memory material, such as the beliefs and emotions associated with a childhood traumatic event, are true in the present. We sometimes refer to implicit memory as "invisible" memory, since it usually affects us without being "seen" by our conscious minds. For additional description and discussion regarding Implicit memory vs explicit memory, see chapter two of Outsmarting Yourself and "Brain Science, Psychological Trauma, and the God Who Is with Us, Part III: Traumatic Memories vs Non-Traumatic Memories," (available as a free download from www.kclehman.com).

understood them. This implicit memory content had even come forward in emotional healing sessions, but I had not recognized it or known what to do with it, and so always eventually pushed it aside and went on to something else. So the next time I got together with my prayer partner, I decided to work very deliberately on these memories. In this session, I focused on the familiar triggered thoughts and emotions I guessed to be coming forward from these memories, and then asked the Lord to help me access the underlying trauma. What happened next is the data point that's relevant for this section. After asking the Lord to help me access the underlying memories, images and thoughts started coming into my mind. I had an image of holding a telephone to my ear, but I was looking up at the place where the cord goes into the wall, so I must have been quite small (about the size of a two year old). I was looking around a room, with a door leading to a hallway to my right and a large sofa across the room from me. And the thought came to me: "I can hear her voice – she must be here somewhere! I wonder where she could be hiding? The sofa's big enough to hide a grown-up – maybe she's behind the sofa!"

But here's the strange part: I did *not* have any sense that these images or thoughts were important, and I did *not* perceive their meaning. The thoughts and images didn't *feel* important, and I did't recognize how they fit into my personal autobiographical story. In fact, this effect was so complete that I told Dan: "Nothing's happening. I'm not getting anything." Fortunately, Dan is an experienced enough therapist that he responded with: "Your mind is never completely blank,³ so why don't you just describe whatever's coming into your awareness, even if it doesn't make sense or feel important." As soon as I started to describe the above thoughts and images, a huge wave of emotion welled up inside of me, I started sobbing, and I recognized that I was getting the visual images, thoughts, and emotions from being at the Wetzel's and talking to Mom on the phone. At two years old I had not been able to comprehend that she could be so far away and still be talking to me – I figured that if I could hear her voice so clearly she must have been somewhere near by.

When the content was isolated inside my head, I was not able to **feel its importance** or **perceive its meaning**; but as I described it to Dan both of these pieces fell into place, and I was able to feel that it was important and to see how it fit into my personal story.

2. Person with memory of looking out the window of a car: In a session where I was facilitating the emotional healing process, the person I was working with initially reported "I'm not getting anything." However, as I coached her to describe *whatever* was coming into her mind, regardless of whether or not it felt important, she eventually acknowledged that she *had* been getting a mental image, but she also assured me that it didn't make any sense and was certainly not important. With more coaching, she eventually described "I'm seeing myself in the car with my family – I'm sitting in the car, looking out the window as we drive down the highway." And as she continued to talk about and focus on this image, she realized that it was from the beginning of a trip that had ended in deep rejection – it was from the beginning of an unresolved traumatic memory that was still anchoring an important rejection lie.

³ The one exception to "Your mind is never completely blank" is when internal parts and/or demonic spirits are deliberately creating the specific, unusual phenomena in which the recipient truly perceives her internal mental awareness to be completely blank. However, once you know this it is no longer a problem, because whenever you encounter a situation in which the recipient's internal awareness is truly completely blank you will realize this actually means you need to deal with internal parts and/or demonic spirits intentionally blocking whatever would otherwise be coming forward.

When the content was isolated inside her head, she was not able to **feel its importance** or **perceive its meaning**; but as she described it to me both of these pieces fell into place, and she was able to feel that it was important and to see how it fit into her personal story.

3. "Pulu did it": In another session the person I was working with commented: "I'm not getting anything — I'm just getting gibberish." But when I asked "What kind of gibberish?," and encourage her to describe *whatever* was coming into her mind, regardless of whether or not it made sense or felt important, she reported "I just keep getting the words 'Pulu Did It'." "Who's Pulu? And what did she do?" I asked, thinking that maybe Pulu was the name of an internal child part. "No" she responded, "It's the name of a children's book I got in the mail yesterday," and then immediately went on to make several spontaneous comments about things that had upset her about the book. I asked her to focus on these comments and ask the Lord to show her what He wanted her to know about them, and within five minutes these comments had led to an important connection to traumatic childhood memories.

When the content was isolated inside her head, she was not able to **feel its importance** or **perceive its meaning**; but as she described it to me both of these pieces fell into place, and she was able to feel that it was important and to see how it fit into her personal story.

B. Neurological case study: Another collection of data points I want to present come from a fascinating case study described by Dr. Antonio Damasio.⁴

Elliot was doing well personally, professionally, and socially. He was a good husband and father. He was very intelligent and talented, and had a good job with a successful business firm. He was a role model for his younger siblings and colleagues. And then he began to make poor decisions. For example, he might spend the entire afternoon on a series of tasks that were interesting but less important, while neglecting to prepare for a crucial meeting scheduled for the next morning. The tasks he did focus on would be done well, but then he would show up the next morning and be totally unprepared for the meeting. And these poor decisions were not an occasional accident, but rather became a consistent problem to the point that he could not be counted on to perform an appropriate action when it was expected. At this same time he also developed severe headaches, and it was eventually discovered that he had a large, fast growing brain tumor. The tumor was benign, and was successfully removed, but unfortunately a large area in the right-sided prefrontal cortex had been irreversibly damaged before the problem was corrected.

Elliot continued to make poor decisions so persistently that he eventually lost his job. And another job. In spite of warnings from several friends, he invested his life's savings with a questionable business partner, and then lost all of his money when the venture ended in bankruptcy. Aside from his persistent difficulty with poor decisions he appeared remarkably normal, and this actually contributed to his problems because his family and friends could not understand why he was behaving so foolishly. His wife, for one, could not deal with this state of affairs, and his marriage eventually ended in divorce. And then his second marriage also ended in divorce. By the time Elliot was sent to Dr. Damasio he was unemployed, twice divorced, bankrupt, and in the custody of one of his siblings.

⁴ Antonio R. Damasio, *Descarte' Error: Emotion, Reason, and the Human Brain*. (New York, NY: Avon Books, 1994), pages 34-51, 205-222.

Dr. Damasio was asked to see Elliot because he had lost his disability income. The problem was that he appeared to be so normal the disability investigators concluded he simply did not want to work. As Dr. Damasio proceeded with his evaluation, he was increasingly able to understand why the disability investigators had decided to discontinue Elliot's assistance – to his surprise, he could not demonstrate any objective impairment, *even with an exhaustive battery of every psychological testing procedure that might possibly be relevant.* Standardized IQ testing showed his intelligence to be superior; normal performance on the Wisconsin Card Sorting Test demonstrated basic logical competence and the ability to change mental set; normal performance on specialized tests developed by Shallice and Evans⁵ revealed that he could complete the complex task of making estimates on the basis of incomplete knowledge; he generated a valid profile on the Minnesota Multiphasic Personality Inventory (MMPI); and a variety of additional tests revealed that his perceptual ability, past memory, short-term memory, working memory, attention, new learning, language, and ability to do arithmetic were all intact.

Damasio and his colleagues also developed a number of specialized testing tasks to evaluate whether Elliot could come up with solutions for hypothetical ethical dilemmas and hypothetical business problems, whether he could predict the *practical* consequences of hypothetical events, whether he was aware of the *social* consequences of hypothetical actions, whether he could generate a variety of different options for how to respond in hypothetical situations, and whether he could conceptualize efficacious means for achieving a variety of hypothetical social goals. Elliot performed as well or better than the normal controls on each of these tasks, demonstrating that he still had *cognitive* knowledge of the principles of behavior that he neglected to use day after day in real life. He still had cognitive knowledge of these principles, and could carry on a very coherent and logical discussion of the different considerations involved in all of these *hypothetical* scenarios, *but he was unable to apply any of this knowledge or understanding in his real life decisions*.

As I am sure you already realize, one of the most significant points in all of this is the dramatic discrepancy between Elliot's excellent performance on the tests and his dismal performance in real life. Not surprisingly, Dr. Damasio and his colleagues also noticed this dramatic discrepancy, and they wanted to develop new tests that *would* be able to demonstrate Elliot's disability, and that would help to elucidate its source. But how to proceed? They knew that the damage to his prefrontal cortex had resulted in abnormalities in his brain function; but what were these abnormalities that caused him to perform so poorly in real life, but that did not affect his performance on the many different testing tasks? And they knew that the challenges encountered in real life must include component tasks that Elliot could not perform; but what were these tasks that he so persistently failed to navigate in everyday living, but that were obviously not included in the tests that he completed so successfully?

Two clues led Dr. Damasio and his colleagues to develop fascinating testing procedures that finally provided the explanation for Elliot's puzzling disabilities. The first clue was noticing that Elliot lacked normal emotional responses to situations that would be expected to upset the average person, the clearest example being Elliot's lack of negative emotions regarding his own tragic story. All of the testing had focused on Elliot's *cognitive* abilities, but as Dr. Damasio spent hours talking with him about every detail of his story, he slowly realized that

⁵ For detailed description and discussion of these specialized testing tasks, see Tim Shallice and Margaret E. Evans, "The involvement of the frontal lobes in cognitive estimation," *Cortex*, 1978, Vol. 14, pages 294-303.

Elliot's minimal display of *emotion* was not just the result of a stoic personality, but rather an abnormal lack of emotional response. And so the thought occurred to him: "Could Elliot's problems somehow be linked to his impaired emotions?"

A comment from Elliot supplied the second clue. At the end of a session of working on the specialized testing tasks described above – after coming up with many plausible, reasonable ways in which he might handle the hypothetical situation that had been presented – Elliot commented spontaneously: "And after all this, I still wouldn't know what to do!" Pondering this comment, Dr. Damasio realized that the specialized testing tasks had included formulation of alternatives, reasoning through costs and benefits, identifying possible consequences, etc – all of this being *logical discussion of the principles* – but the tests had *not* included the *bottom line of having to make decisions or choices with actual consequences*. As Damasio points out: "Real life has a way of forcing you into choices," (Page 49) and choices in real life have consequences. And so the thought occurred to him: "Could Elliot's problems come from difficulty at the point where he has to make an actual choice with real life consequences?"

In response to these thoughts, Damasio and his colleagues set out to design testing procedures that would simulate the complexity and uncertainty of real life, that would require choices with consequences, and that would include the assessment of emotional response. They came up with a testing scenario that involved simulated gambling. The test subject, or "player," was given \$2,000 of very real-looking play money, and told to lose as little as possible and make as much as possible. The player would then sit in front of four decks of cards, and would pick cards, one at a time, from whichever decks he chose. The only information the player received was that every card would indicate some amount of money that would be paid to him, and that some of the cards would also indicate a penalty he would have to pay to the experimenter. The algorithms for the actual numbers on each card in two of the decks were designed so that these decks were "slow but safe" – the rewards were small, but the penalties were also small, so that the subject would consistently win, over the course of the whole game, when pulling cards from these slow but safe decks. The other two decks were "fast," with each reward being much higher, but these "fast" decks were also dangerous, with occasional penalties that were so large that the subjects would consistently loose, over the course of the whole game, if they persisted in pulling cards from these fast but dangerous decks.

The details of the experiment were designed to be very complex, with lots of variability, lots of unpredictability, no patterns that were easy to identify, and the participants were not allowed to take notes or make calculations. The point of all this was to produce a very complicated situation with no clear right or wrong answers – a situation where the participants could not use their left hemisphere analytical systems to solve the problem by figuring out the underlying algorithms and thereby coming up with a logical plan that would guarantee success. *Just as often happens in real life*, they had to use right hemisphere intuitive assessment to come up with "best guess" decisions in a very complex situation with many variables and no clear right or wrong answers.

The results of this experiment were fascinating, and revealed that Damasio and his colleagues had designed the first laboratory task that could measure the functional difficulty displayed by

⁶ For a more detailed discussion of this fascinating research, see: Antoine Bechara, Antonio R. Damasio, Hanna Damasio, and Steven W. Anderson, "Insensitivity to future consequences following damage to human prefrontal cortex," *Cognition*, Vol. 50 (1994): pages 7-15.

people with frontal lobe damage such as Elliot's. Normal subjects initially sampled all decks, and often showed early preference for the "fast" decks, but then always moved to the safe decks by the time they had pulled 30 cards. They then stayed with the safe decks, and although their games went more slowly, with smaller rewards, they consistently won. Elliot, on the other hand, did not do this. He continued with a strong preference for the fast but dangerous decks throughout the entire experiment, even though he went bankrupt half way through the game and had to take "loans" from the experimenter. One of the most intriguing data points is that by the end of the game Elliot had figured out, *cognitively*, that the two "fast" decks were bad; but although he *cognitively understood* this key principle, he was *not able to apply it when actually playing the game*.

The second part of the testing setup was that the investigators used skin conductance⁷ to measure the subjects emotional responses throughout their participation in the card game gambling scenario.⁸ The results from this part of the study were also fascinating. *After* each card was turned – when they would see the results of each choice – Elliot's skin conductance responses were similar to those of normal subjects; but there was a dramatic difference regarding their responses *before* turning each card. Normals had an increasingly intense skin conductance response *warning them of danger before taking cards from the dangerous decks*. As they reached for the danger decks, their spontaneous, intuitive, emotional response (measured by skin conductance) said "oh, oh, oh – danger, danger," and this response steadily increased the longer they played the game. However, *the right prefrontal injury patients showed no skin conductance responses prior to choosing from the dangerous decks*. The emotion-based intuitive guidance system, indicated by the skin conductance, was not working to contribute intuitive, emotion-based warning; *and this matched exactly their hard to identify, but hugely disabling problems in real life*.

Finally, all the pieces fit together. Elliot's life had fallen apart because his ability to make real life decisions was greatly impaired, and he had this difficulty with real life decisions because he could not *feel* what was important. He could endlessly discuss all of the cognitive, logical considerations, but he couldn't feel which considerations were more important. He could logically analyze all of the different factors involved, but he consistently made bad choices because he had lost his right sided intuitive guidance system that had previously enable him to feel the relative importance of the different considerations, and that had enabled him to feel whether a given bottom line decision was "good" or "bad." Elliot was crippled in the real life world of pervasive complexity and uncertainty, where we constantly rely on our intuitive, emotion-based system to augment our logical, analytical system. For example, Elliot could correctly formulate and logically discuss all the considerations that should contribute to scheduling the events of his next week, but he might make the very poor final decision of skipping his daughter's birthday party in favor of getting his hair cut because he could not feel that his daughter's birthday party was more important than making sure to get his hair cut

⁷ Skin conductance is a measure of how easily electricity flows across study subjects' skin. When subjects experience emotional stress the stress stimulates sweating, the sweat allows electricity to flow much more easily, and skin conductance consequently goes up. And because sweat has such a dramatic effect on the conduction of electricity, even very subtle emotional responses resulting in very small amounts of sweating will still produce easily measured increases in the flow of electricity.

⁸ For a more detailed discussion of this part of the study, see: Antoine Bechara, Daniel Tranel, Hanna Damasio, & Antonio R. Damasio, "Failure to respond autonomically to anticipated future outcomes following damage to prefrontal cortex," *Cerebral Cortex*, Vol. 6 (March/April 1996): pages 215-225.

before the weekend, and he could not **feel** that it would be bad to miss his daughter's party.

And for the purposes of this discussion, it is important to remember the brain tumor at the beginning of the case study – all of these problems were caused by damage to Elliot's right prefrontal cortex.

- **C. Other information regarding the prefrontal cortex:** A large body of case studies and other research provides additional pieces to the puzzle:
 - 1. the right prefrontal cortex is the primary area for interactions with other people, and especially for face to face communication (for example, this part of the brain watches and interprets other people's facial expressions and voice tones, and generates appropriate facial expressions and voice tones in response);
 - 2. the left prefrontal cortex is especially involved in language-based communication; and
 - 3. both right and left prefrontal cortices are heavily involved in perceiving the meaning of a particular piece of mental content, and especially in perceiving how any particular mental content fits into your personal autobiographical story.
- **D. Returning to "describe everything that comes into your awareness":** So, putting all the pieces together Elliot's right prefrontal brain injury, his impaired decision-making in real life, the normal results from most psychological tests, the gambling decision-making research, the skin conductance research, our experience with Theophostic-based therapy and Immanuel Interventions, and additional research regarding the functions of both right and left prefrontal cortices I have come up with the following set of hypotheses regarding why it is so important to describe everything that comes into our awareness:
- Our internal mental content needs to be processed through our right-sided pre-frontal cortices in order for us to be able to *feel* it's importance. In the same way that Elliot couldn't *feel* any guidance from his damaged pre-frontal cortex, if a particular piece of relevant, significant mental content is not processed through the right-sided pre-frontal cortex, we can look right at it and not *feel* it's importance. This is what often happens when we are in an emotional healing session and do *not* describe everything that comes into our awareness.
- Our internal mental content needs to be processed through both our right and left prefrontal cortices in order for us to be able to recognize it's meaning, and especially for us to be able to recognize how a given piece of content relates to our personal autobiographical story. If a particular piece of important, meaningful mental content is not processed through both prefrontal cortices, we can look right at it and not recognize how it relates to our personal autobiographical story. This is what often happens when we are in an emotional healing session and do *not* describe everything that comes into our awareness.
- The *social interaction task* of communicating with the therapist/facilitator, especially face to face communication, causes the content we are describing to be processed through the right prefrontal cortex.
- The *language task* of getting words to describe our mental content causes the content to be processed through the left prefrontal cortex.

- Therefore, when we describe our mental content to another person, the combination of the social interaction task and the language task causes the content we are describing to be processed through both our right and left prefrontal cortices, and thereby enables us to feel the importance of the content we are describing, to perceive the meaning of the content we are describing, and especially to perceive how the content fits into our personal autobiographical stories.
- **II. Upgrading from partial to full benefits:** Furthermore, even if you *can* feel that something is important and *can* correctly perceive it's meaning, you will often miss a large percentage of the positive power if you keep it to yourself. My experience during a THRIVE conference exercise several years ago provides a good example. We were doing a devotional exercise, with instructions along the lines of "Pay attention to any images or thoughts or emotions that come into your awareness. Write them down, and trust that they are from the Lord...etc." Often when I would try this kind of exercise, I would not get anything that I perceived to be from the Lord, and so would usually end up disappointed, frustrated, and triggered. So my initial response was not exactly positive. I was thinking:

"This kind of thing never works for me. For example, right now I get an image of His smiling face, but I can feel that it's an imagination image that I'm generating as I think 'So what would it look like if I could see His face?' And I have the thought 'I'm glad to be with you,' but I can feel that this is just a thought that I'm generating in answer to my own question 'So what would the Lord say?'"

And then suddenly I had a second mental image of His face, but this image was spontaneous, unexpected, not initiated by me, much more engaging, and had a smile that was *alive*. At the moment I perceived this new, spontaneous image of Jesus' face, the thought came into my mind: "Just because you can accurately guess that I'm here and that I'm glad to be with you doesn't make it not true – just because you accurately deduce these truths doesn't disqualify them!" And the sense I had was that He said this with a smile and a chuckle – He wasn't upset with me or rebuking me, but rather was on my side, and laughing *with* me regarding my logical error and spiritual fussing.

At the time this occurred my initial response was surprisingly mild. Based on clues such as the unexpected, spontaneous nature of the image and thoughts I came to a logical conclusion along the lines of, "This is really the Lord – this image and these thoughts are actually from Him," and I had a subjective feeling that the image and thoughts were important and genuinely from the Lord, but both pieces of this initial reaction were quite subdued. However, later in the day, as I described this experience to Charlotte, intense emotions began welling up as I was telling the story and I had a much clearer, keener perception of what it meant. Until I described the experience to Charlotte, I had not been able to *fully* feel its importance or to *fully* comprehending its meaning. As I think about this now, it seems that I had been *missing 90% of the blessing* until I talked to Charlotte about it.

Watching groups doing Immanuel exercises provides another good example. As will be described in chapter (**fill in**), group Immanuel exercises include breaking up into small groups so that the participants can benefit from how our brains work better in community as they describe their experiences to each other. As I have observed those participating in these small group sharing circles, I have noticed that people are usually fairly calm while they are waiting to share (they have completed a piece of the exercise *internally*, but are waiting to share with the rest of the group). And then these same people *come alive emotionally* as they describe the

details of their experience with the others in their small group. When people are just doing the exercise in their own heads, I see smiles, nods, and observable emotions with levels of intensity between 1 and 3 (on a scale of 1 to 10); but when they describe their experiences to each other, I see tears, laughter, and observable emotions with levels of intensity between 3 and 7.

III. Compelling explanation helps (the reason I'm giving you this information): As mentioned above, Dr. Smith has taught "describe everything that comes into your awareness" as a part of the Theophostic process for years. However, my observation is that this simple directive is amazingly hard to implement when you are the one receiving healing. Even after being repeatedly, emphatically instructed to "report everything," it is still very easy to leave out the things that *feel* truly unimportant: "Yes, I know I'm supposed to report everything, but surely that doesn't apply to the things that *really* don't feel important."

Regarding this point, there is a striking similarity between what I observe in emotional healing sessions and Elliot's experience. Extensive psychological testing demonstrated that Elliot had a cognitive understanding of the principles regarding how to navigate life, but somehow being unable to *feel* their importance at the point they were relevant got in the way of actually being able to apply them in real life. In the card game, he eventually figured out the key principle that certain decks were dangerous, but somehow being unable to *feel* this danger at the point it was relevant got in the way of applying this knowledge when he was actually playing the game. *And this same phenomena occurs with the "describe everything" directive!* We understand this principle *cognitively*, but somehow being unable to *feel* it at the point it is relevant gets in the way of actually applying it – we have a cognitive understanding of the principle, but somehow being unable to *feel* the importance of a particular piece of mental content gets in the way of actually choosing to describe it.

My own experience provides an especially clear example. I totally understood the "describe everything" instruction, and I was convinced that it was valid and important because I had personally observed the whole phenomena so many times. I consistently taught that this was an important principle, and even wrote an entire essay about the importance of making sure to describe *everything* that comes into your awareness. But in spite of all of this, I would still frequently fail to apply this principle in my own sessions. Somehow, when I was inside my own sessions, being unable to *feel* the importance of certain mental content got in the way of actually choosing to describe it. When I was inside my own sessions, it was *so* difficult to take the time and energy to report things that *truly*, *truly*, *truly felt* unimportant. "I know what I tell everybody else, and I know I've missed things in my own sessions when I didn't report everything, but *these* thoughts/images/emotions/physical sensations are *truly* just distractions. I *will* 'describe everything that comes into my awareness' (*as long as it feels at least a little bit important*)."

Deep down in our experiential, intuitive, right hemisphere "guts," it's *really* hard to believe something might be important when it doesn't *feel* important; and in the middle of a session (especially when we're more triggered and blended than we realize), it's *sooo* hard to report something when we truly don't believe that it might be important.

Here's the good news, and the reason I have just taken all this time to present this material: I have noticed a dramatic change in my behavior since coming to these conclusions regarding the underlying brain science. In sessions where I'm receiving, when I become aware of mental content that does not *feel* important, I find myself thinking about the material I've just presented, and it is so compelling that it consistently tips the balance. I can *feel* that being aware of this material helps me choose to go ahead and report things even when they don't feel important. I

have also observed this same benefit for people I work with – a clear understanding of this material helps them to more consistently implement the directive to report/describe everything.

IV. Complexity, variability: There is obviously some complexity with respect to these circuits/this phenomena, since sometimes thoughts, emotions, images, etc come into our conscious awareness and we *are* able to feel the importance and perceive the meaning *even though we are not describing our mental content out loud to another person.* Some people seem to prefer to process internally at times, and this is okay *as long as it works.* However, as described above, in many situations the person is *not* spontaneously able to feel the importance and perceive the meaning, and he usually has *no insight* regarding his lack of ability to feel the importance and perceive the meaning of the clues sitting in front of him. Therefore, it is especially important to coach the person to report/describe everything when things are not moving forward and the session seems to be stuck. Furthermore, even with people who like to process internally and silently, I invite them to experiment with the "describe everything" technique to see if this tool will enable them to move forward even more effectively.

V. Risks with using the Immanuel approach by yourself (getting stuck and inoculation):

People frequently ask, "Can I use the Immanuel approach by myself, or will it only work with someone facilitating for me?" The simple answer is, "Yes, you can use the Immanuel approach by yourself." I know many people who use these principles and tools, without a facilitator, to engage with the Lord for emotional healing and also to connect with him for many other reasons throughout the average day. Using Immanuel approach principles and tools to become increasingly aware of God's living presence throughout the average day, and to increasingly abide in an interactive connection with him is the core of what I call the Immanuel lifestyle.

Applying the Immanuel approach principles and tools by yourself, without a facilitator, is obviously an important part of this "all day every day" picture. However, I would like to offer two important cautions with respect to using the Immanuel approach by yourself. The first is that some people get themselves into traumatic memories and then have trouble getting themselves back out again. For example, when a person gets intensely triggered and is in deep non-relational mode, she may need a facilitator to provide very directive and persistent coaching in order to get back to a good place.9

The second caution is that the Immanuel approach is subtly but significantly less effective when used alone, because you do not have the benefit of the subtle but important phenomena described in this chapter. That is, when you use the Immanuel approach by yourself, you do not have the benefit of the quiet but powerful neurology associated with describing your mental content to another person – the interpersonal neurology that pulls the content through the front of your brain and makes it much easier to feel it's importance, understand it's meaning, and see how it fits into your personal story. Once you have become familiar with the Immanuel approach, have experienced many fruitful connections with God, and have become utterly convinced of it's effectiveness and value, this concern about decreased effectiveness is minor. You will usually notice that your interactions with God are more subtle and less intense when you don't have a facilitator to interact with, and you will occasionally encounter some kind of difficulty that you can't resolve on your own, but these will be minor problems and you will still receive daily blessings and benefit. However, when you are just starting the risk is much more strategic.

⁹ As you may remember, this concern was discussed in more detail in the "Practical Considerations" section of the chapter on safety nets (chapter 14). And it will be discussed again, in even more detail, in the "Safety Net Intervention" section of the chapter on group exercises (**chapter** ****fill in****).

When you are just beginning to experiment with the Immanuel approach, the biggest risk is that you will try to apply the principles and tools by yourself, the process will bog down because you can't feel the importance or recognize the meaning of key clues, and then you will (erroneously) decide that the Immanuel approach just doesn't work. I call this being "inoculated" to the Immanuel approach because after this experience you will be "immune" to the possibility of trying it again in the future. If you have not yet tried it and one of your friends tells you about it, you might respond with, "Wow. That sounds really exciting. I'd like to try it – how can I learn more? Could you do a session for me?" However, if you have tried it on your own, and (erroneously) concluded that it doesn't work, you will respond with, "Yeah, I already know about that. In fact, I tried it but it didn't work. It's just another fad – lot's of hype, but just another disappointment. I'm not interested."

VI. Putting it all together: Putting all these pieces together, the first application with respect to the Immanuel approach is that we should include regular sessions with others as part of our Immanuel lifestyle. As just described, this is especially important when we are just getting started, and even more especially important if we are having difficulty and are tempted to conclude that the Immanuel approach doesn't work. The second application is that when we facilitate Immanuel approach sessions, it's very important to coach the recipient to describe everything that comes into her awareness. Repeatedly, persistently, and gently encourage the recipient to describe every thought, image, memory, emotion, and physical sensation that comes into her awareness, *at every point, throughout the Immanuel approach process*. The third application is that when we are receiving, we should deliberately practice the skill of describing everything, including internal mental content that doesn't make sense or feel important.

VII. Additional examples: In addition to further illustrating the general principles described in this chapter, I am hoping the following examples of some of the most common specifics will help many recipients to recognize the ways in which they are missing important clues. As already described, I have been amazed by how often we can miss important information that is sitting right in front of us. Sometimes the lightbulb doesn't go on until recipients read or hear examples that describe their specific situations. Hopefully there will be recipients who read the examples included below and respond with, "I do that! That happens in my sessions all the time. I didn't realize it was important – I didn't think Dr. Lehman could possibly have been referring to *that*."

The initial images can seem particularly unimportant, mundane, or even boring: Some times an important memory is coming forward but all the recipient sees is the opening image or scene, and this initial image or scene seems so unimportant, mundane, insignificant, or even boring that the recipient can't believe it could possibly be worth reporting. One of our earlier case studies provides a good example, with the person who was convinced that the process wasn't working because all she was getting was a boring, unimportant, insignificant image of herself looking out the window of their car as she and her family were starting out on a road trip.

This phenomena with respect to recalling traumatic memories reminds me of certain action movies I have seen. The movie begins with scenes of a peaceful meadow, with wild flowers blowing gently in the breeze. My spontaneous response to the leader footage could be something along the lines of, "Hey, I thought this was supposed to be Godzilla vs. King Kong – did we accidentally put the wrong tape into the VCR?" Then the music changes, and a huge scaly foot stomps into the middle of the meadow, as Godzilla charges out of the forest and crashed through the meadow on his way to destroy New York City. Similarly, recall of traumatic memories will often begin with "leader footage" that seems particularly innocuous,

mundane, and *non*-traumatic. However, if the person receiving healing describes these initial images, and then stays with them, the memory will continue to play forward into an important traumatic event. For example, the recipient might initially report "I'm just standing in the woods, listening to birds singing – what's this got to do with anything?" and then "Oh, no! This is the campground where my brother got hit by that drunken guy in a jeep. This is where I was standing when I heard him scream,…etc."

The person receiving healing can also be in the middle of an important memory scene, *but focusing only on non-traumatic aspects of the scene*. For example, one person I was working with kept going to a memory where he was standing on the edge of a lake studying every detail of a boat in the distance, and thought this seemingly unimportant memory was just a distraction. However, as he stayed with this memory and asked the Lord for guidance he realized that he was focusing on the boat as a way of "escaping" the scary and painful part of the memory – his parents were behind him, fighting, as he was "looking away" towards the boat.

"I'm just getting distractions," "It's just a jumble," "I can't get words": One of the most common scenarios is for the recipient to get a jumble of confused thoughts and images that don't seem to make sense and that she has difficulty describing. 10 These scenarios usually look something like this:

Client: Pauses as she waits for her internal mental content to become more organized and to make more sense (often pausing for as long as I allow, before coaching her to "describe whatever").

Dr. Lehman: "If you can, I'd like you to describe whatever's happening inside, even if it doesn't make sense or feel important."

Client: "I'm just getting distractions."

Dr. Lehman: "If you're willing, I'd like you to describe them – just for kicks."

Client: "There are a bunch of different images and thoughts, but they're just fragments, they're all jumbled together, and they don't make any sense...it's really hard to get words..."

Dr. Lehman: "What you're describing is very common – people often have difficulty finding words that feel just right; but I'd like you to give it a try and just do the best you can. What we usually see is that the person makes a first attempt, with comments about how difficult it is and how the words don't quite fit, but then as they work at it the picture becomes increasingly clear and they eventually find words that feel right. If you're willing, I'd encourage you to do that – just take the image/thought fragments one at a time and do your best to describe them."

And when the client does this, she is usually surprised to discover that the pieces become increasingly clear and fit together with increasing coherence. Sometimes it takes only a few

¹⁰ It is helpful to be familiar with this scenario because recognizing it will enable the client-facilitator team to successfully navigate the situation by encouraging them to be persistent with the "describe everything" technique.

minutes for all the pieces to fit together and sometimes it takes half an hour, but when she finishes this process of describing her mental content the pieces have come together, and a larger picture comes into focus in a way that enables her to take the next step forward.

"I'm just getting distractions – it's not important (and/or) it doesn't make sense": As this entire chapter has been describing, the recipient can have all kinds of important content, in any and every modality, sitting right in front of her, but if it isn't being processed through her right and left prefrontal cortices she can still respond with "I'm just getting distractions – I'm getting some stuff, but it's just distractions – it's not important (and/or) it doesn't make sense." Like my experience with the images from being on the phone at the Wetzel's when I was two years old. Or like the "Pulu Did It" case study example, with the person who was "...just getting gibberish." And this is why we gently but persistently coach the recipient to describe whatever comes into her awareness, regardless of whether it makes sense or feels important, at every point in the Immanuel approach process.

"I'm getting something, but I think it's just coming from my own mind" part one: In one of the most common scenarios, 11 something comes into the person's awareness, such as a subtle image of Jesus' face accompanied by a thought, but the image and thought are faint and the recipient feels unsure regarding whether she is perceiving the Lord's tangible presence and thought or whether this mental content is just a construct of her own mind. At this point the person will usually pause, waiting for greater clarity. Unfortunately, in many situations this greater clarity never comes because she is missing significant clues due to her inability to feel their importance and/or recognized their meaning. The person continues to wait...and wait, and eventually concludes that the process is not working. 12 However, if the facilitator coaches her to apply the "describe everything" technique the session can look like this:

Client: Long pause as she waits for a greater sense of clarity regarding whether or not she is really perceiving the Lord's presence.

Dr. Lehman: "If you can, I'd like you to describe whatever's happening inside, even if it doesn't feel important or you're not sure what it means."

Client: "I don't think it's working."

Dr. Lehman: "If we *do* discern that the process isn't working then we'll ask the Lord to show us what's in the way, but for now I'd like you to just describe whatever's coming into your awareness."

Client: "I think maybe I'm just making it up."

Dr. Lehman: "If we discern that your own mind *is* making things up – in an attempt to 'help' the process work, or for some other reason – we can ask the Lord to help us sort that one out; but if you're able to, I'd like you to start with just describing whatever has come into your awareness."

¹¹ Again, recognizing this scenario will enable the client-facilitator team to successfully navigate the situation by prompting them to gently persist with the "describe everything..." technique.

¹² Or, at the very least, she needlessly wastes time circling in confusion because she is unable to recognize the clues that would clarify the situation.

Client: "Well, I'm still in the memory, but now I have a subtle sense of the Lord's presence. (Pause) It's very faint, but I see an image of Jesus standing next to my Mom. (Pause) The thought comes: 'if you were to get into a situation like this again you could respond differently.' And He's showing me how the situation could have been handled much more constructively. But it's all so faint – I'm not sure if it's really Jesus, or whether I'm just making it up."

Dr. Lehman: "Were you thinking about ways in which the Lord might intervene, and then proactively imagining these images, thoughts, and insights, or was it all a surprise?"

Client: "Oh, it was totally a surprise. I was thinking about the memory, worrying that nothing would happen, and then I had the image of Jesus standing beside my mother and the thoughts came into my mind."

Dr. Lehman: "Do the thought that you could respond differently and the insight about the more constructive way in which to handle the situation feel true?"

Client: (Pause) "Yes. Yes they do. They feel totally true."

Dr. Lehman: "And how does the memory feel?"

Client: "Well, now that you mention it, it feels peaceful and calm. (Pause) I'm just realizing — in the past this memory has always upset me because I felt like I didn't know how to handle the situation, and I've always avoided similar situations because I didn't want to reexperience that feeling of being overwhelmed and inadequate. But now it doesn't bother me to think about it because I feel like I would know what to do."

As I ask questions that help the person discuss the details out loud, it usually becomes increasingly clear one way or the other. In some sessions, like the one just described, with careful joint discernment it becomes increasingly clear that the person is experiencing the Lord's living, healing, life-changing presence. In other sessions, with careful joint discernment it becomes increasingly clear that the person's mind is generating the phenomena through proactive imagination. For example, in one session the person reported having the thought, "Where should I put Him?" and then could feel herself constructing an imaginary image of Jesus at the place in the memory where she had decide to "put Him." As the reader could probably have predicted, the image she had just constructed did not feel unexpected, spontaneous, or surprising, nothing changed or resolved, and it became increasingly clear to both of us that the image of Jesus was purely a product of her own imagination.

"I'm getting something, but I think it's just coming from my own mind" part two: As clearly implied from the end of part one, in some situations the recipient is getting images that would appear to represent the tangible presence of God and thoughts that would appear to be from God, she is worried that she is fabricating both the images and thoughts, *and her concerns are valid*. Sometimes the person's own mind *is* making up images of Jesus and/or messages that are supposedly from Jesus.

But it is still really important for the recipient to describe this because it is vitally important information! Especially for people who have grown up in Christian homes, and who are desperately trying to cooperate, one of the most common blockages that hinders the Immanuel approach is the person's own mind, worrying that she won't "get anything," and then trying to

"help" by fabricating images of Jesus and imagining what He might say. If this *is* happening, it is very important for the recipient to describe exactly what she is experiencing inside, including her anxiety that it won't work, the subjective perception that she is proactively fabricating the images and thoughts that are supposedly from Jesus, and the thoughts that maybe her own mind is generating this content in an attempt to help by making guesses regarding the kind of thoughts and images that possibly should be coming forward. If this is happening, it is very important for the recipient to describe it so that the facilitator can be aware of it and address the problem directly (see chapter (**fill in**), Advanced Troubleshooting, for additional discussion of this scenario. **or also reference to Advanced TS book?**).

"I'm getting something, but I think it's just coming from my own mind" part three: Very subtle God thoughts provide a third scenario in which the recipient will eventually report something along the lines of, "Well, I do have a thought, but I didn't tell you about it because it felt like it was just coming from my own mind." She's not getting thoughts and images of Jesus that she disqualifies because they are subtle. And she's not getting thoughts and images of Jesus that she disqualifies because she suspects she may be fabricating them out of anxiety and a desire to "help." She's just getting thoughts that feel like her nothing-special, everyday, normal, natural mental content, but they turn out to be God thoughts.

Many of us expect that guidance from God will *feel* supernatural and/or foreign (like it's coming from outside of one's own mind). At the very least, most of us expect that guidance from God will feel subjectively different or special in some tangible way that is fairly easy to discern. However, our observation is that sometimes the Lord provides guidance in very subtle ways, so that the thoughts coming into our awareness feel just like our own normal, natural, nothing-special, every-day thoughts. God's mind touches our mind in such a gentle way that we initially have no perception that the content is coming from the Lord. This happens to me fairly frequently, and in these situations the only indicator that Jesus is sharing His mind with me is that the session moves forward if I describe the thoughts out loud, deliberately focus on them, ask the Lord for more guidance, and then keep reporting whatever comes into my mind. If I describe them, and then "test drive" them, it turns out that they have brought forward helpful information/insight that moves the session forward.

For example, I was working along in a session, trying to get more light and resolution for the way I can get intensely triggered by having trouble with inanimate objects. I was focusing on some trigger, such as being unable to find my keys. (Why are they deliberately tormenting me, *again*, by hiding when they know I need them for something important and don't have time to deal with this nonsense?!) As I was thinking about my intense frustration towards my perverse, stubborn, hateful keys, the thought just came to me that maybe my anger was implicit memory, and part of my childhood protest/battle to try to make the world be different – instead of standing straight in the pain of feeling so helpless with respect to the many frustrations in the world, I was trying to attack the triggers in an attempt to make the world be different. And along with this thought came the thought that I should deliberately choose away from indulging in the anger, try to stand straight in the pain of feeling so frustrated and helpless, and invite the Lord to be with me in this place. These thoughts didn't feel supernatural, external, different, or special – they just felt like my usual, normal thoughts. But as I described all of this to my prayer partner, and then tried it, I felt like the whole healing process with respect to this

¹³ Actually, they felt just the slightest bit different than my usual thoughts, in a subtle way that I have learned to recognize with much careful practice, as described in the next paragraph.

particular issue began to move forward.

Actually, I shouldn't say that the thoughts from God are *completely* indistinguishable from my own thoughts. Over time, with deliberate, careful practice, I have learned to recognize a subtle but distinct feeling that comes with God's thoughts. I have had the hardest time describing this God-thought feeling, but one might call it a very quiet sense of grace and truth. I learned to recognize this God-thought feeling by watching for the positive outcome that went with God-thoughts, and then retrospectively pondering every detail I could remember regarding how the thoughts felt when they first came forward. Even so, the quiet sense of grace and truth is still sometimes so subtle that I don't know for sure until I describe the thoughts out loud, focus on them, ask God for more guidance, continue to describe whatever comes into my awareness, and then notice that everything moves forward.

"I'm getting something, but I think it's just coming from my own mind" part four: Trying to analyze the issue and/or trying to solve the problem on her own provides a fourth scenario in which the recipient will eventually report (after multiple rounds of coaching to describe whatever comes into her awareness), "Well, I do have a thought, but I didn't tell you about it because it felt like it was just coming from my own mind."

In some situations, there is something hindering the recipient from being able to perceive God's guidance, and the recipient quietly, unintentionally slips into old familiar patterns of just trying to figure things out on her own. She's not getting thoughts and images of Jesus that she disqualifies because they are subtle. She's not getting thoughts and images of Jesus that she disqualifies because she suspects she may be fabricating them out of anxiety and a desire to "help." And she's not getting subtle guidance from God that she disqualifies because it feels like it's just coming from her own mind. She's getting thoughts that feel like her everyday, normal, natural thoughts *because they are* – she's just noticing her own thoughts as she slips into familiar patterns of trying to figure things out in her own strength.

Note that it is still very important that the recipient describe these thoughts, because often the only way to tell the difference between subtle God thoughts that feel almost identical to our own thoughts and thoughts that are truly just coming from our own minds is to describe them to the facilitator and then engage in joint discernment. Often, once the recipient has described the thoughts out loud, both the facilitator and recipient can easily see that the thoughts are just the recipient's own attempts to analyze, problem solve, etc. And if this is not immediately clear, the facilitator can test drive them by coaching the recipient to focus on them, ask for more guidance, continue to report whatever comes into her awareness, and then see what happens. As mentioned above, if they are actually subtle God thoughts, then test driving them will move the session forward. However, if they are indeed just the recipient's own thoughts, then the session will wander fruitlessly as the recipient tries to solve the problem in her own strength.

If it becomes clear that the thoughts are, indeed, just the recipient trying to solve the problem on her own, then the facilitator and recipient work together to identify and resolve whatever blockages are hindering her from receiving God's help. The troubleshooting can sometimes be as simple as the facilitator asking, "Can you still perceive Jesus?" And when the recipient responds with, "Yes, He's still here, but I sort of forgot about Him when I slipped into trying to figure it out for myself," the facilitator simply coaches her to focus back on Jesus, ask Him for help, and then watch/listen for His response instead of trying to figure it out. If the recipient can't perceive the Lord's presence, one simple troubleshooting option is to go back to the

initial interactive connection, and coach the recipient to engage with Jesus in that context. In many situations this basic intervention will result in a quick and simple resolution: "Jesus is showing me that I slipped back into my old problem solving mode. I think He's saying that I just need to try again, but this time stay focused on Him and *listen* for His guidance (instead of trying to figure it out myself)." The alternative basic troubleshooting intervention is to coach the recipient to ask, "What's in the way, Lord?" and then coach her to observe and describe whatever comes into her awareness¹⁴

My own experience provides a good example. Before starting to work with deep healing tools such as EMDR, Theophostic, and the Immanuel approach, I would get together with a therapist colleague each week and we would talk about our stuff. We would essentially take turns giving and receiving insight oriented psychotherapy, thinking and talking for an hour-and-a-half about our childhood memories, current family dynamics, problematic emotional reactions, difficult behavior patterns, etc. And I did this every week for years. All this to say that I have a LOT of experience with deliberately thinking about psychological and spiritual issues in my life, and I have a very good sense of what it feels like when I am using my own human abilities to analyze, figure out, and problem solve regarding some psychological and/or spiritual issue in my life. 15 Occasionally, when I am doing my own Immanuel approach healing work, I will describe my mental content and then recognize that I have slipped into this old, familiar way of thinking – whatever it is I'm working on, I have slipped into trying to resolve the issue with my own analysis and problem solving. Fortunately, usually all I have to do to correct this difficulty is to recognize it, deliberately set aside my own attempts to figure it out, and then go back to focusing on Jesus, asking Him for guidance/help, watching for whatever He brings forward, and then describing whatever comes into my awareness.

"I'm getting something, but I think it's just coming from my own mind" part five: In addition to the four just described, there is yet another scenario in which the recipient will eventually report (again, after multiple rounds of coaching to describe *whatever* comes into her awareness), "Well, I do have a thought, but I didn't tell you about it because it felt like it was just coming from my own mind." The person perceives that the thought in question is just coming from her own mind, and it turns out that this is indeed the case, but with this variation on the theme the thought is *not* analysis or trying to figure things out — in this case the thought is an observation of some kind. But we still need to report these thoughts because they often contain valuable information that God wants to use in guiding the session, and we often don't recognize their importance and/or meaning until we describe them to the facilitator.

For example, in several of my own sessions there were points where it seemed like nothing was happening, and all that I was aware of was anxiety that nothing would happen. I didn't mention this because I was waiting for "something else," but after a *looong* pause I finally reported:

¹⁴ Review chapters 12 and 13 for additional discussion of these basic troubleshooting interventions. In some situations the hindrances can be more complicated and can require advanced troubleshooting. See chapter (**fill in**) for additional discussion of advanced interventions.

¹⁵ There is nothing inherently wrong with this kind of thinking, analysis, and problem solving. In fact, these conversations were moderately helpful – I felt like I gained insight and self awareness that were both helpful in coping more effectively. But in all of these many conversations I don't think I ever experienced permanent resolution of underlying traumatic memories, and this kind of proactive, "I'm trying to figure this out" thinking and analysis gets in the way of the kind of receptive watching and listening that enables us to perceive guidance that God brings into our awareness.

"Well, what I'm most aware of is feeling anxious that nothing will happen." And as I was describing this to the facilitator, I realized that this thought and feeling were part of my triggered fear that the Lord would disappoint me, which turned out to be an important part of what I was working on. We would have missed this clue if I hadn't finally decided to "just go ahead and describe it anyway, even though it's not important."

The recipient's mind is truly blank: See chapter 18: "Describe Whatever Comes Into Your Awareness, Practical Tips."

VIII. Several important caveats regarding "describe everything that comes into your awareness":

A. Not a mandate to say things you are not yet comfortable disclosing: This application of how our brains work better in community¹⁶ is *not* a mandate to force yourself to say things that you don't yet feel comfortable sharing. For example, thoughts may come into your mind that you are afraid will offend the facilitator, or you may recall traumatic memories that feel too shameful to describe in detail. The "describe everything" discipline is not a mandate to force yourself to share this content. If you do become aware of content that feels too unsafe and/or too shameful to share, it is important to at least let your facilitator (or the others in your group, if you are participating in a group exercise) know what's happening. There are several options that can help you eventually move forward with your healing (discussed in chapters 18 and ***fill in**), but it's important to quickly tell the facilitator (or the others in your group) what's happening so that she (they) don't mistakenly conclude that the process isn't working.

As just discussed above, we are applying the neurology of how our brains work better in community in order to address the problem of choosing to not describe mental content because it *does not feel important*, because it *does not "make sense"* (you don't understand how it pertains to the current focus of your session), or because it *has not yet been nicely packaged*. Choosing to not describe mental content because it feels too embarrassing or unsafe to do so is a completely different phenomena. Again, if something comes into your awareness that you don't want to talk about, you do *not* have to describe the details if you don't feel comfortable doing so.¹⁷

B. Not a mandate to say things that will cause conflict or be upsetting/hurtful to others: The "describe everything" part of the process is also *not* a mandate to force yourself to say things that will cause conflict or be upsetting/hurtful to others. For example, let's say you're practicing group exercises with several others from your fellowship group at church, and when it's your turn to receive you notice that the facilitator has a nervous twitch. This reminds you that you happen to know he's still using pornography, but that his wife (who's sitting beside

¹⁶ Just in case it's not clear, "this application of how our brains work better in community" is referring to the persistent coaching for the recipient to report "whatever" comes into her awareness, "even if it doesn't feel important, even if it doesn't make sense, and even if it's not yet nicely packaged."

¹⁷ For additional discussion regarding how to navigate situations where you're reluctant to report what's happening because it's too frightening, shameful, or upsetting, see chapter 18, chapter **fill in** on advanced trouble shooting, and Karl D. Lehman, "Not Reporting Everything – An Especially Sneaky Form of Interference," last modified November 14, 2013, http://www.kclehman.com. **Update this reference if it has changed by publication**

him in the practice group) doesn't know. Applying the "describe everything" discipline in this situation does *not* mean sharing all of these details with the group. As just discussed with respect to memory content that you don't feel comfortable sharing, it's important to say something so that the facilitator/others in your practice group aren't left confused regarding what's happening. And it's also possible that the content includes clues for your session that you don't yet recognize. In this kind of scenario, you can report the content in general terms that won't cause trouble, such as, "I'm just becoming aware of a complicated issue between two of my friends, but I don't think it's appropriate to describe the details," and then specifically ask the Lord for more clarity regarding your own work, "Jesus, it feels like this is just a distraction. Please help me to recognize if it's more relevant to my session than I realize."

Again, the "describe everything" discipline is trying to address the problem of choosing to not describe mental content because it *does not feel important*, because it *does not "make sense"*, or because it *has not yet been nicely packaged*. Choosing to not describe certain details of your mental content because they would cause conflict or be hurtful/upsetting to others, and/or you perceive this is not the right time or place to address the issue, is a completely different phenomena. Feel free to withhold certain details or "save them for later" if something comes into your awareness and you perceive it would not be helpful to describe this particular mental content at this particular time.

C. Not left hemisphere analysis: This application of how our brains work better in community is *not* about giving left hemisphere theoretical, analytical monologues every time something reminds you of a subject you have thought a lot about. For example, if I'm receiving Immanuel approach emotional healing and the facilitator makes a comment that reminds me of the chapter I'm writing about advanced troubleshooting techniques, and I feel a lot of excitement about the subject, applying the "describe whatever comes into your awareness" technique would not mean launching into an hour of explanation and commentary related to the topic. The facilitator might even be interested in the topic and welcome my comments, but this would not be an application of the "describe everything" intervention we're presenting here. In contrast, let's go back to the facilitator making her comment that reminds me of the advanced troubleshooting material. At this point, applying the "describe everything" discipline would be to notice both the association and my internal response to it, and then report something along the lines of, "I've just spent the last week writing about advanced troubleshooting techniques, and your comment brings to mind some of specific material I've been working on. I can feel an intense emotional response – just thinking about it for a few seconds, I can feel how passionate I am about the subject. I'm not sure if this is a distraction or a clue, but that's what just came into my awareness after your last comment." I might even briefly describe any specific details that I noticed particularly coming into my mind, just in case these details might also be part of the Lord's guidance. But I would *not* launch into a long monologue regarding my left-hemisphere analysis with respect to advanced troubleshooting.

One more time: we are applying the neurology of how our brains work better in community to address the problem of choosing to not describe mental content because it *does not feel important*, because it does not "make sense," or because it *has not yet been nicely packaged*. Choosing to not present the details of my left-hemisphere analysis because this would derail the emotional healing session is a completely different phenomena.

The Immanuel Approach (to Emotional Healing and to Life) Chapter 18: Describe Whatever Comes Into Your Awareness, Practical Tips

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As of July 2013, we have had the opportunity to coach hundreds of people in many different settings as they are learning to use the Immanuel approach. Sometimes the images, thoughts, emotions, etc that come forward quickly and spontaneously feel important and make sense. For example, images come forward that the person quickly recognizes as coming from memories that match the trigger she was focusing on, or she suddenly has a clear perception of the Lord's tangible presence, with her, inside the memory she had already been working with. This is the low hanging fruit, and people have no difficulty reporting this kind of mental content. However, as we have just discussed at length in chapter 17, sometimes the content that comes forward does not feel important or make sense, and these are the situations in which the "describe everything" discipline helps us recognize important clues that we would otherwise miss. As we have coached many facilitators and recipients in practicing with the describe-whatever-comes-into-your-awareness techniques, we have come up with a number of practical tips.

The tip regarding time limits can be especially helpful for people facilitating group exercises with beginners, and the remaining tips are intended for those wanting to increase their knowledge and skill so that they can facilitate intermediate or advanced Immanuel approach work. (For those applying the "describe everything" technique with basic Immanuel approach exercises, just keep coaching the recipient with a simple phrase along the lines of, "Describe whatever comes into your awareness, regardless of whether or not it makes sense or feels important.")

I. Experiment with time limits for pauses: As I observe people first practicing with the "describe everything" discipline, I often see them waiting in silence for a minute,...two minutes,...five minutes,...ten minutes, or even longer, and when I question them regarding their internal experiences during these long pauses it becomes clear that they are waiting for something to come forward that feels important and/or makes sense. In spite of the extensive explanations and instructions, many people still find it amazingly difficult to just start describing their internal mental content when it doesn't feel important and/or make sense. In these scenarios, coaching from the facilitator can dramatically shorten what could otherwise be loooong pauses – pauses that appear to be fruitless and that can get so long that both the recipient and facilitator conclude that the process simply isn't working. Therefore, if I notice long pauses when people are first practicing with this technique, I encourage the facilitators to experiment with limiting pauses to one to two minutes, or even twenty to thirty seconds. If the recipient is still silent at the end of this designated pause the facilitator offers a gentle prompt along the lines of: "I realize additional material may come forward with more time, but just go ahead and report whatever has come into your awareness, even if it doesn't feel important or make sense yet."

**Advanced topics warning box: If you are just beginning to learn about the Immanuel approach and you are reading through this book for the first time, I encourage you to skip (or skim) the rest of this chapter for now. At this point in your learning journey, slowing down to study these more advanced practical tips will hinder you from getting the more important overview understanding of how all the pieces fit together. Come back to this material after you have been through the whole book at least once, you feel that you have a good understanding of the basic principles and tools, you have had a chance to experiment with the exercises for groups

and beginners, and you want to obtain additional understanding and tools for applying the "describe whatever comes into your awareness" technique in intermediate or advanced situations. Advanced topics warning box**

II. Observe the recipient and ask about facial expressions: Another simple technique is to observe the recipient's face, and when you notice facial expressions that indicate thoughts and/or emotions, prompt him with a simple observation and invitation such as, "I just noticed your brow furrow, and I'm guessing that thoughts of some kind were associated with the facial expression. Would you be okay describing them?" or "I just saw a thought and emotion go across your face – could you tell me about them?"

III. Ask if there's anything that keeps coming back: There will be important content that the recipient still won't report no matter how many times you discuss these principles and encourage her to describing everything. "I know you keep saying to report everything, but I didn't think you wanted me to report *that*." Fortunately, the most important content will usually keep coming back, and can often be discovered by periodically asking "Are there any thoughts, images, emotions, or physical sensations that keep coming back but that you haven't yet described because they don't feel important?" One of my favorite lines from recipients is, "Actually,

______ (fill in with some really strategic piece of information, the absence of which has been holding up the process for months) has come into my mind every time we have prayed about this problem, but I didn't think it was important."

IV. Learn to recognize different modalities/channels: Guidance from the Lord can come in many different modalities, in many different "flavors," or you might even say on many different channels. Some we are familiar with and therefore recognize more easily. For example, if I am working on my fear of anger and then I start getting images from second grade in which angry bullies are yelling at me, once I start describing these I quickly recognize them as guidance from the Lord. "Oh, hey! I think the Lord is showing me some of the memories that contribute to my fear of anger and conflict." My experience with talking to Jesus about my friend Thomas provides another example. I had the visual image of the Lord suddenly turning to me with a big smile, and then I was aware of new, clear, surprising thoughts that felt like they were coming from outside of my usual stream of consciousness. I quickly and easily recognized these images and thoughts as coming from the Lord. However, it can be easy to miss clues that come in ways that we are not familiar with or expecting. We can miss the letter in our mailbox or the messenger standing on our front porch because we are only listening for the phone. And a time traveler visiting from the 1950's might miss hundreds of messages waiting patiently in her inbox because she doesn't know about e-mail. To frame this from the other direction, clues coming in on a given channel are a lot easier to find if we know that channel exists and deliberately check for clues coming in on it.

In light of all this, it can be helpful for both the facilitator and recipient to learn about the many ways in which information can come into our internal awareness. This has definitely been valuable for me as a facilitator. When the recipient seems to be stuck and repeatedly states that she is not getting anything, I will provide a brief explanation¹ about some of the less familiar

¹ If I am working with one of my regular clients, who has already heard these explanations, I will just name the different modalities as a simple way to refresh her memory, and then coach her to deliberately check them.

modalities and then specifically coach her to look for clues that might be coming in those ways. I have lost count of the times in which the person will pause for a while, and then say, "Well, actually, I have been getting...," and then describe some thought, image, emotion, or physical sensation that had been present for many minutes but that she had not recognized as useful information that she should report. Deliberately checking all channels has also been valuable for me as a recipient. Whenever I have the initial impression that I'm not getting anything, if I can remember to deliberately check the less popular, atypical channels, I always end up with some clue that leads me forward. For example, when I am initially frustrated by the absence of the kinds of images, thoughts, or emotions that I most easily recognized as clues, I try to deliberately scan for atypical modalities such as subtle physical sensations: "Well, actually, I'm noticing that I have a knot in my stomach and tension in my throat." And then when I focus more deliberately on these sensations, more clues come forward and the whole process starts moving again.

Here's my list of modalities/channels that the recipient should deliberately check if she is having persistent trouble with "I'm not getting anything":

A. Images, thoughts, and emotions that feel supernatural and/or like they are coming from an outside source: This one is a no-brainer, and the one most of us start with looking for. In fact, if mental content actually *feels* supernatural and/or like it is coming from an outside source, it most likely is already going through the circuits that enable us to feel it's importance and recognize it's meaning. The only problem with this channel is that we can ignore everything else as we focus all of our attention on waiting for something to come forward in this modality.

B. Images, thoughts, and emotions that are clearly associated with autobiographical memory: This one is *theoretically* obvious, but should still be deliberately checked because of how important clues can still be invisible as they sit right in front of us. And the content still needs to be reported *regardless of whether it feels important or makes sense* (the whole point of this chapter, and illustrated by the examples in the case studies section).

C. Images and thoughts that we don't report because we feel like they are just coming from our own minds: As discussed in more detail in chapter 17, I perceive that there are at least four variations on this theme.

"It's just coming from my own mind" part one: As discussed in more detail in chapter 17, sometimes we get images that would appear to represent the tangible presence of God, and thoughts that would appear to be from God, but the images and thoughts are faint, and we are unsure regarding whether they are really from God or just products of her own imagination. We are therefore waiting (and waiting...and waiting) for additional clarity (which often never comes until we describe all of this to the facilitator).

"It's just coming from my own mind," part two: As discussed in more detail in chapter 17, sometimes we get images that would appear to represent the tangible presence of God, and thoughts that would appear to be from God, but we are actually fabricating them out of anxiety that the process won't work and a desire to "help." We sense this at some level, and are therefore reluctant to describe them. So we are waiting (and waiting...and waiting) for additional clarity (which often never comes until we describe all of this to the facilitator).

"It's just coming from my own mind" part three: As discussed in more detail in chapter 17, sometimes we get thoughts and/or images that feel like normal, nothing-special, everyday

mental content. We don't report them because we think they are just coming from our own minds, but it turns out that they are actually from God (and this doesn't become clear until after we share them with the facilitator).

"It's just coming from my own mind" part four: As discussed in more detail in chapter 17, sometimes we get thoughts and/or images that feel like normal, nothing-special, everyday mental content. We don't report them because we think they are just coming from our own minds, and this turns out to be accurate – they *are* just coming from our own minds as we try to analyze the issue or figure out the problem in our own strength. But we still need to report them to the facilitator because describing them out loud and joint discernment with the facilitator is often the only way to distinguish them from subtle God thoughts. And then the facilitator can help us troubleshoot regarding what's in the way of being able to receive God's guidance.

"It's just coming from my own mind" part five: As discussed in more detail in chapter 17, sometimes we get thoughts and/or images that feel like normal, nothing-special, everyday mental content. We don't report them because we think they are just coming from our own minds, and this turns out to be accurate – they *are* just coming from our own minds, but in this variation they aren't analysis or trying to figure things out. In this variation, the thoughts come from our own minds as we make observations about the process, or engage in a variety of other kinds of thoughts. But we still need to report them because they often contain valuable information that God wants to use in guiding the session, and we often don't recognize this until we describe them to the facilitator.

D."Invisible' implicit memory thoughts and emotions": Sometimes the thoughts and emotions that come into the recipients awareness are coming from memories, but they come forward as "invisible" implicit memory, so that they just feel true in the present and we don't recognize them as memory. On rare occasions the recipient will recognize subtle clues that indicate implicit memory content, but more often these "sneaky" implicit memory thoughts and emotions get missed because they can feel so much like the background reality that nobody thinks to comment on. For example, recipients never report, "I'm aware of the reality that I'm on planet earth, that I'm breathing air, that I'm a human being, that I'm wearing clothes, that I'm awake, and that I'm speaking English." Similarly, recipients can fail to report implicit memory thoughts and emotions, such as "this won't work for me because I don't deserve to get healed," or "this problem can't be fixed – it's beyond repair," or "It's hopeless – there's nothing I can do about it," with associated feelings of discouragement and despair, because they can feel so much like part of the background reality. Or the recipient dismisses them because "they're just coming from my own mind" (as opposed to being perceived as guidance from God).

People also have distorted implicit memory thoughts and emotions that you might think would be easier to spot, such as "God is angry and distant, so why would I want to talk to Him?," "I'm dirty and shameful – I don't want God to be here because I don't want Him to see me," or "I don't want God to come because He will just yell at me." But even these more obvious trauma-based distorted thoughts can be surprisingly sneaky. When they quietly slide forward as invisible implicit memory, and feel so compellingly true in the present, it can be surprisingly difficult to spot them as distorted memory content.

Again, it's important for the recipient to describe *whatever* comes into her awareness, since the importance and meaning of implicit memory material often isn't recognized until she

describes it to the facilitator. For example, as I describe my "It's hopeless – there's nothing I can do about it" thoughts and the associated discouragement, I suddenly recognize that these are thoughts and feelings I often had in my childhood – these are the thoughts and feelings I had when I couldn't learn to read because of my dyslexia.

- E. Images that are not coming from the recipients personal lived experiences: In some sessions the recipient will perceive images that are not coming from autobiographical memory. I have seen God send a wide variety of images that have provided a wide variety of blessings and help. For example, I have seen the Lord send images of the recipient's grandfather as a child, providing information that proved to be powerfully healing and that the recipient had no other way of knowing, and I have seen God send a variety of symbolic images that have provided guidance, encouragement, and healing truth. I have seen an amazing variety of images generated by internal parts, with some images being sent with the purpose of distracting or blocking us from a course of action that the part perceived to be potentially painful, and other images sent for the purpose of communicating and/or helping. (Note that images from internal parts can include strange images, such as cartoon characters engaging in all manner of odd or interesting activities). I have seen demonic spirits generate an unpleasant assortment of confusing and/or frightening images. And I have seen a wide variety of non-autobiographical images that turned out to be coming from the recipient's nonconscious mind. An amazing array of images that are clearly not from autobiographical memory, but that need to be reported to the facilitator – both to bring them through the front of the recipient's brain and to benefit from joint discernment – in order to determine what they mean and what to do with them.
- **F. Guardian lie fears:** The recipient will often experience thoughts and emotions that represent guarding lie fears. That is, fears that are based on distorted beliefs and that stand in the way of moving forward with the healing process. For example, the person may feel intense fear of continuing with the process, and have the thought, "If I remember this I will die." Or the recipient may feel fear of continuing the process, and have the thought, "I'm afraid of what we might find." Or the recipient may feel intense resistance to continuing, and have the thought, "I'm afraid that I'll invite God to be with me, but He won't show up and then the disappointment will be unbearable." Or "I'm worrying that I'm making this up, and if I describe what's coming to me you will wrongly think badly about my grandfather." And sometimes the recipient will pause, waiting...and waiting...and waiting waiting to move forward with the process until the blocking fear somehow resolves itself. However, it is very important for the recipient to just go ahead and report the whole guardian lie package, since these blocking fears usually don't resolve until the recipient describes them out loud and then works with the facilitator to engage in troubleshooting.

At other times the recipient will just say something like, "I think it's time to stop," or "I don't want to do this anymore." In these situations it's important that the facilitator know about guarding lie fears, so that she can provide coaching along the lines of, "You can certainly stop at any time you decide to do so, but before we stop I would like to mention one possibility. Sometimes a person will have a fear that gets in the way of going forward, such as (give some examples), and if this is what you're experiencing right now I would encourage you to at least get words for your fear(s), and then talk to Jesus about them, before stopping. Again, you can certainly stop if you still want to."

G. Physical sensations: Physical sensation clues seem especially easy to miss (many people have never learned that important clues can come forward as physical sensations, and even

people who already know about this have often not had much practice with checking this "channel"). I have seen many situations where the person is convinced that nothing is happening, but then when I coach her to specifically scan for physical sensations, "Well, now that you mention it, I am noticing that my wrists are sore," as she starts rubbing her wrists. And then when she deliberately focuses on this, "Wow. Now I'm remembering the time my brothers tied my hands behind my back, as part of a game of cowboys and Indians, but then they forgot all about me and went into the house for a snack...."

NOTE: It can be helpful to know about the different ways in which clues can present, and to practice deliberately checking for them, but it's important to remember that even deliberately checking all of the channels does not fully compensate for the way our brains have been designed to work best in community. Understanding and practice with respect to the different modalities make it easier for the recipient to spot clues, but even with recipients who have this understanding and practice, it's still important to repeatedly coach the person to "describe whatever comes into your awareness, regardless of whether it makes sense or feels important." As with my experience with memories of being two years old at the Wetzel's house, you can have dramatic clues presenting in the most obvious modalities, all sitting right in front of you, but still not feel their importance or recognize their meaning (until you describe them out loud to the facilitator). Coaching the recipient to deliberately check all channels will help her to focus her attention on content that may have previously been in the periphery of her internal awareness, but she may still fail to report it because she still does not feel it's importance or recognize how it fits into her story.²

V. Jesus' hand is quicker than the eye: Some recipients don't "see," "hear," or "feel" anything at the moment of healing, and often don't even realize that they have received healing. In fact, in many of these situations the recipient eventually begins to complain that nothing is happening and that the process isn't working. If the facilitator suspects the possibility of quiet healing (for example, she notices a decrease in the recipient's distress), she can expose the healing by coaching the recipient to carefully check regarding whether any of the negative aspects of the original traumatic memory have changed. And when he does this the recipient will discover that a new truth has replaced an old lie, or that some other aspect of the traumatic memory has been "mysteriously" resolved. My own experience provides a good example. I have had several sessions in which Jesus resolved some aspect of a traumatic memory, but I didn't have the slightest awareness of this new reality and actually started complaining to Charlotte: "It's not working. We're asking Jesus what He wants me to know about this lie, and I don't see, sense, or feel anything." But when she encouraged me to look back at the lie to see whether it still felt true, I realized that Jesus' hand had once again been quicker than my eye. The Lord had removed the lie and replaced it with truth, even though I hadn't seen, sensed, or felt the actual process of Him making the switch.3

² To some extent, *deliberately focusing your attention* on a specific channel, and being able to *feel the importance of the content and recognize it's meaning* are separate neurological issues/phenomena. They interact, so that focusing your attention in the right place can *help* with the importance/meaning blind spot, but the focus-of-attention neurology will not *fully* resolve the importance/meaning blind spot. Again, the only way to avoid missing important clues is to describe the content out loud to another person, so that the content is sure to get pulled through the parts of your brain that enable you to feel it's importance, to recognize it's meaning, and to understand how it fits into your personal story.

³ Note that in this example Charlotte resolved the problem by suggesting that I check to see if the lie still felt true. However, careful, thorough use of the "Describe *whatever* thoughts, images, etc." technique

VI. "Describe nothing": When the recipient reports, "I'm not getting anything," or "Nothing's happening," I sometimes respond with "Describe nothing" as a light-hearted way of reminding them that the Lord always provides us with guidance when we ask, that our minds are never blank, and that the challenge is to recognize and report the clues that must be present but that don't yet feel important or make sense.

VII. The recipient's mind is truly blank: I often say that a person's mind is never blank or empty. The person may not perceive her mental content to be important, but there's always something there. The one exception I am aware of is an abnormal, artificial blankness, or emptiness, caused by demonic spirits and/or internal parts in order to block the prayer for emotional healing process. When the recipient is experiencing this unusual blankness/emptiness, she will respond to my usual "our minds are never blank" comments with something like "No — my mind really is blank. It's just empty. It's weird." Every time one of my clients has reported this phenomena, there have been demonic spirits causing the blankness/emptiness in an attempt to hinder the healing work and/or internal parts causing the blankness/emptiness in an attempt to protect the person from going to painful memories. It has always been possible to resolve these blockages, but the interventions have often included advanced principles and techniques (see chapter (**fill in**) for discussion of advanced troubleshooting, and also www.kclehman.com for the essay about the direct eye contact technique for working with internal parts, for other essays about working with internal parts, and for essays about dealing with demonic interference).

VIII. Ask if there is anything the recipient is afraid and/or embarrassed to share: As just discussed in great detail, in many situations the recipient does not report important clues because she does not *feel* them to be important and/or perceives them to be nonsense, and we address this problem by repeatedly coaching her to describe "whatever" comes into her awareness "even if it doesn't feel important or make sense." However, there are also situations in which the recipient chooses to not report important clues because it feels intensely unsafe and/or unbearably embarrassing to talk about the content that has come into her awareness.

For example, in one session I was facilitated a demonic spirit came forward as we approached a particularly strategic healing target. This demonic presence came forward with intense anger, with thoughts like, "I hate you doctor Lehman," and with an intense desire to hurt me. But this patient did not immediately recognize the true source of these thoughts and emotion. That is, when these thoughts and emotions first came forward the recipient initially felt like they were coming from his own heart and mind. Understandably, this patient was very reluctant to share this, and was afraid that it would harm our therapeutic relationship if he told me that he was feeling intense anger towards me, that he was thinking, "I hate you," and that he felt like he wanted to hurt me.

Many recipients are reluctant to report certain memories that come forward because they are afraid the facilitator will think badly of their families. I have facilitated many sessions in which the recipients had been traumatized by woundedness and dysfunction in their parents and siblings, but they still loved their families and correctly realized that their parents and siblings had good hearts underneath their woundedness and dysfunction. When these memories came

also would have worked. If I had rigorously described exactly what was in my mind, it would have included a picture where the lie didn't feel true any more, and if we had been paying attention we would have recognized this.

forward, with the recipients being traumatized by negligent and/or toxic behavior on the part of their families, the recipients initially withheld important parts of the stories because they were afraid that I would misunderstand and judge their loved ones (they were afraid I would not be able to see the good hearts underneath all of the woundedness and dysfunction).⁴

Survivors of childhood abuse provide another common example. If the recipient was abused as a child, she may have heard the perpetrator say things like, "Remember, your job is to warn me if anybody is coming so that we won't get caught." The recipient may have been punished and yelled at for telling the truth: "How DARE you say such a thing about your grandfather! Why do you make up such crazy lies? If you ever say anything like this again I will...." And she may have been directly and explicitly threatened by the perpetrator: "I will come back and do it again if you tell anyone," or "I will kill your mother if you tell anyone." People who survive memories like these will almost always come away with distorted fearful beliefs along the lines of "I will get hurt if I tell anybody about this," or "It's not safe to talk about this."

And many people are loath to describe any kind of mental content that includes sexually explicit details. For example, Jesus may want to bring forgiveness and healing for guilt and shame that have haunted memories of sexually promiscuous college partying, but when these memories come forward the recipient might assume that he will have to talk about the specifics in order to work through the memories, and feels like he will experience unbearable shame as he describes the mortifying details. Or God may want to bring healing for a sexual assault trauma, but when the memory comes forward the recipient might assume that she will have to talk about the specifics in order to work through the memory, and feels that describing the details will be unbearably shameful. Or the Lord may want to bring healing for memories of childhood sexual abuse, but when the memories come forward the recipient might assume that she will have to talk about the specifics in order to work through the memory, and feels that describing the details will bring unbearable shame.

Again, this is an important phenomena that can cause the session to bog down, but it's different from the *accidental* withholding of information described in chapter 17, and coaching the recipient to describe "whatever" comes into her awareness, "even if it doesn't feel important, even if it doesn't make sense, and even if it's not yet nicely packaged" won't resolve the problem. The simplest intervention for addressing this concern is to talk about the phenomena as a "theoretical" problem that can sometimes hinder emotional healing work, to describe the simple options below for addressing it, and then to find the gentlest possible way of asking whether there is any content that the recipient is deliberately withholding due to fear and/or shame (for example, "Do you think this problem we just talked about might be affecting your healing work?). If the recipient acknowledges that this is indeed happening, then you can coach

⁴ The reluctance to describe this kind of memory can be exacerbated if the recipient's family members have personal friendships with the facilitator, as is especially common when friends and family are facilitating Immanuel approach sessions for each other.

⁵ It's important to describe the options for addressing the problem *before* asking whether there is anything that the recipient is deliberately withholding, so that she understands the larger purpose as opposed to feeling like you are asking the question in order to catch her doing something wrong.

⁶ If the recipient's healing work is not flowing forward smoothly and you suspect that there might be important clues that she is afraid and/or ashamed to tell you about, one way to address this whole package is to make a copy of this part of chapter 18, and then offer it to the recipient with an explanation

her through one of the following three simple interventions for addressing the concern.

With a recipient who is afraid to describe the content that's coming into her awareness, we ask Jesus to help her get a clear focus regarding exactly what she is afraid of, and we are then almost always able to identify specific fears blocking the way forward. For example, "I'm afraid you will think my parents are terrible people if I tell you about this memory," or "I'm afraid you will be offended and stop working with me if I tell you about the thoughts and feelings that I'm having right now," or "I'm afraid that I'll get in trouble and that terrible things will happen if I tell anybody about this stuff." I then coach the recipient to engage with Jesus regarding her fears, she talks directly to Jesus about her fears and asks for His guidance and help, and then the blocking fears almost always resolve and her healing work begins to move forward again.

With a recipient who is deliberately not reporting certain information because it feels too embarrassing, I coach her to describe the content in general terms that feel much less shameful, but that still give me enough information to be able to facilitate effectively. For example, if a person feels that it is too embarrassing to talk about the details of the sexual abuse memories that are coming forward, she can just report that she is remembering being sexually abused (with no additional specifics), and then talk about the associated issues that need to be addressed (such as distorted beliefs, shame, self hatred, helplessness, confusion, bitterness, etc) as the focus of the healing work. Or if it feels too embarrassing to even mention sexual abuse, she can just report that she is remembering painful events from her childhood, and then focus on the associated issues that need to be addressed. I have done this on many occasions, and it is consistently effective. (This actually makes sense, since the embarrassing specifics of the memories aren't really important with respect to healing – it's the distorted beliefs, shame, self-hatred, confusion, etc that need to be worked through in order to complete the processing tasks and resolve the trauma.) Furthermore, the recipient can stand with Jesus in the present and look back at the memories without my needing to know the details, she can go back to the memories and allow Jesus to be with her in the memories without my needing to know the details, and she can talk (silently) directly to Jesus about any details she feels the need to discuss without my needing to hear what she's saying.

Finally, in some situations the recipient won't feel comfortable with either of these interventions. For example, if she's working with a very inexperienced facilitator or working in a practice group with people that she doesn't know well, she might decide that she wants to be with trusted friends and/or an experienced facilitator in order to work with such intensely frightening and/or vulnerable content. In these situations the recipient can simply let the facilitator (or practice group) know that she has encountered content that she knows is important, but that she doesn't want to work with it in the present context. The facilitator (or group) can then help her go back to her initial positive memory and connection with Jesus, and in that context she can talk with Jesus regarding whether to pick some other target or whether to just end the session.

Regardless of which option she decides to choose, it's very important for the recipient to let the other(s) know what's going on so that they can provide appropriate support, and also so that so

along the lines of "Sometimes important clues get held back because the person is afraid or ashamed to share them, and Dr. Lehman recommends asking about this possible hindrance if the healing work isn't moving forward smoothly and easily. Why don't you look at this, and then we can discern together regarding whether this might be hindering your healing work? One really important piece that I want to make sure you notice is that there are a couple of simple, gentle interventions that can usually take care of the problem."

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they don't mistakenly conclude that the process isn't working.

For discussion of additional examples and principles regarding the problem of withholding information due to fear and/or shame, an also discussion of more advanced interventions, see **chap on advanced trouble shooting,** and the essay, "Not Reporting Everything – An Especially Sneaky Form of Interference."

⁷ Karl D. Lehman, "Not Reporting Everything – An Especially Sneaky Form of Interference," last modified November 14, 2013, http://www.kclehman.com. **Update this reference if it has changed by publication – e.g., moved to immanuelapproach website.**