



Eileen: “Immanuel Intervention” (Intermediate) – Explanatory Comments

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The main purpose of the video/DVD “Eileen: ‘Immanuel Intervention’ (Intermediate)” is to provide live ministry session examples of the principles, techniques, and process described in our essays and presentations about the Immanuel approach. This video/DVD will probably be encouraging and educational for any viewer, but it will be much more valuable if you have first read the essays on the “Getting Started” page of our Immanuel approach website (www.immanuelapproach.com). If time constraints preclude reading all of the essays, I would encourage you to at least read the two introductory essays before seeing the “Eileen: ‘Immanuel Intervention’ (Intermediate)” live ministry session.

Note: this session demonstrates **Basic and Intermediate** “Immanuel Intervention” principles, techniques, and process.

Session summary: In this 2005 session, Eileen works with classic “type A,” or “absence,” wounds – wounds caused by the absence of necessary good things. She goes to early childhood memories where she longed for and needed emotional connection with her mother, but instead of receiving positive attention and emotional connection, she felt chronically unseen, ignored, or unwanted. Several blockages hindering her from connecting with Jesus are identified and resolved, and then she is able to receive beautiful healing, in which the Lord cares for and fills places where she had previously always felt empty and unsatisfied. At the seven-month follow-up interview she describes a number of dramatic lasting benefits, including complete resolution of a life-long pattern of compulsively trying to fill the empty, unsatisfied places with ice cream.

Deleted Material: A number of significant edits were required at the beginning of the session to remove material that referred to earlier sessions and would require a lot of explanation, or to remove material that was not appropriate for a training tape released to the public. However, very little material has been removed after the point where the actual Immanuel Intervention begins, and *no* material has been removed from 16:21 to the end of the session.¹

Context for “Immanuel Intervention”: Due to the loss of substantial edited material from the first part of the session, the beginning of the session is a bit confusing, and the context for the “Immanuel Intervention” portrayed in this video/DVD may not be entirely clear. I had facilitated several prior Theophostic²-based sessions for Eileen, and we had encountered several points in her healing work where the process had become stuck. This session was the first time I had worked with Eileen after developing our “Immanuel, Emotional Healing, and Capacity” material. As I thought about her earlier sessions in the context of this new material, I realized that her healing process had probably become stuck due to capacity problems. I therefore went into this

¹ In case you are wondering why I bother to comment on material that has been deleted: when I view live sessions for education/training purposes (as opposed to viewing sessions for inspiration and encouragement), I want to know whether I am seeing the complete, unedited session, or whether material has been removed. If any material has been removed, I find it valuable to have at least summary information regarding what has been deleted.

² Theophostic[®] is a trademark of Dr. Ed Smith and Alathia Inc., Campbellsville, KY.

session with the thought that we might be able to resolve these capacity problems by using “Immanuel Interventions” to help her connect with Jesus in the places where she had been stuck.

The issue in this session turned out to be choice, as opposed to limited capacity: After explaining my thoughts regarding limited capacity, Immanuel Interventions, and the possibility that Immanuel Interventions might resolve problems with limited capacity in the memories where she had been stuck in previous sessions, this session ended up going to completely different memories. I still think that limited capacity was the reason she had become stuck in the previous sessions, and I still think that using Immanuel Interventions to resolve capacity problems would enable her to move forward with the memories that had come up in the earlier sessions, but in this session she went to completely different memories where limited capacity was *not* the problem. We know that limited capacity was *not* the problem because she was able to go to these memories fairly easily, she was able to connect with them emotionally, she was able to stay emotionally connected while she worked with these memories, and she was able to do all of this *before* perceiving the Lord’s presence or receiving His help. As discussed below, the issue in this session turned out to be choice. Eileen needed to make a choice regarding how to relate to Jesus – she needed to choose whether she would continue to focus on her mother’s attention as the only possible solution, or whether she would turn to Jesus.

Instead of: Immanuel Intervention enabling Eileen to connect with Jesus, connection with Jesus resolving capacity problems, and resolution of capacity problems enabling Eileen to work with previously overwhelming memories; the process in this session was: Immanuel Intervention helping Eileen *choose* to let go of her mother and turn to Jesus, *choice* to turn to Jesus enabling Eileen to connect with Jesus, and connection with Jesus resolving deep wounds from lack of attention from her mother.

Beginning of session includes “first time explanation”: This was the first time Eileen had heard about Immanuel Interventions, so this session included a fair amount of explanation. Obviously, much less explanation would be necessary for someone who has seen our presentations about Immanuel Interventions.

Opening Prayer: You may have difficulty following my opening prayer. Looking at the sample “Opening Prayer and Commands” on the Ministry Aids page of our website should be helpful if you want to decipher the specific words (I now usually use an abbreviated version, as I do in this session, but looking at the sample should still be helpful).

“Child parts,” dissociation, and DID: The viewer will notice that both Eileen and I talk about “parts,” and that she sometimes talks as if she is *inside* the perspective of the child in the memory. It is important to understand that having “internal child parts” does *not* automatically lead to the diagnosis of Dissociative Identity Disorder (DID) – perceiving “internal child parts” does *not* mean that Eileen therefore must have DID.

First, there are phenomena other than dissociation that can lead to the subjective experience of perceiving “internal child parts.” For example, one can carry an unresolved traumatic memory in a memory *package* that includes not just the autobiographical content of the memory, but also the overall subjective experience of being *inside the child ego-state present at the time of the memory*. When this memory package is open and activated, the person will not only “remember” the explicit, autobiographical story content of the memory, but will also have the subjective experience of being *inside* the ego-state of the child in the memory. And no other indicators of dissociative phenomena will be present. For example, there will be no amnesic barriers (the

person will report that the event has always been available to her voluntary, conscious recall, and the event will continue to be available to her voluntary, conscious recall after the session), and the different pieces of the memory, including the emotions, will all be present and connected.³ The subjective experience of being inside the child in the memory *does also* occur when one has dissociated internal child parts, but the important point here is that dissociation is not the *only* phenomena that can cause this subjective experience of “internal child parts.”

Secondly, there is a wide range of dissociative phenomena. My perception, from my own clinical experience and from reviewing the literature, is that dissociation is actually quite common – many of us have mild to moderate dissociative phenomena associated with a few of our most intense traumatic memories. But full Dissociative Identity Disorder includes much more intense and pervasive dissociative phenomena, and is much less common. Even if someone *does* have *dissociated* internal child parts, she does *not* necessarily have Dissociative Identity Disorder.

It is important that lay ministers learn about dissociation, and there are many lay ministers that do good work with dissociative phenomena, but the terms “Dissociative Identity Disorder” and “DID” are often used inappropriately, resulting in unnecessary confusion and in loss of credibility for Christian emotional healing ministry. I therefore encourage lay-ministers to refrain from using these terms *unless the person in question has been diagnosed by a qualified professional who has carefully reviewed the diagnostic criteria.*

Internal Child Part Not Participating In/Agreeing With Prayer: As the viewer will notice, Eileen did *not* perceive the Lord’s presence in response to her first prayer, “Lord, help me to perceive Your presence.” In response to asking the Lord to show her what was in the way, Eileen got the sense that her pride was in the way, and from “inside” the child in the memory, reported: “I’m too proud to ask for help, because help was never given....I’m not going to ask any more....I could ask, but it isn’t going to happen....” (Time on tape: 17:25). This comment makes it clear that, even though adult Eileen had asked “Lord, help me to perceive Your presence,” *the internal child part in the memory had not participated in/agreed with this prayer.* I have observed this to be a very common blockage hindering people from being able to perceive the Lord’s presence, and many people have become able to perceive the Lord’s presence as soon as this problem has been resolved. With respect to this session, my perception is that Eileen became able to perceive the Lord’s presence as soon as this internal child part truly became willing to participate in the Immanuel Intervention, and actually agreed with the prayer asking Jesus to help her perceive His presence (time on tape: 24:22).

“What if I ask?”: When I realized that this child part was not participating in our prayer, my first response was to ask if it would help for *me* to be the one to make the request (time on tape: 18:48). One of our colleagues viewing this tape did not quickly understand why I did this, so I thought it might be helpful to explain my thinking behind this suggestion. It seemed clear to me that the child part we were working with was transferring her thoughts and feelings from experiences with her mother onto the Lord, and that she did not want to ask Jesus for help because she did not want to feel the shame and disappointment of asking and being ignored. I thought that *maybe* this internal child part would perceive the feared rejection and disappointment to be less personal and painful if *I* would be the one to ask the Lord for help. This may seem silly to some of you, but I have seen similar situations where this small and simple

³ I am not aware of any research supporting these statements about non-dissociative “internal child parts,” but I have personally had this experience on a number of occasions, and I have observed many emotional healing sessions where non-dissociative internal child parts appeared to be present.

intervention seemed to solve the problem.

Resolving lies: In case it got lost in the flow of the session, note that an important part of the healing in this session is Jesus bringing truth, both words and actions, that resolves various lies. For example, at several points in the session, Eileen makes comments along the lines of “I’m not wanted,” and she also clearly expresses other lies, such as “I don’t have value because I’m a girl.” (22:52) Jesus then addresses these lies, with comments such as: “I was with you when you were born and I wanted you to come to life...” (55:05) and also by *demonstrating* the opposite (for example, by picking her up and holding her in His lap). And the thoughts and feelings that Eileen reports from after the session, such as “I feel loved, [and] wanted...” (70:49) are *fruit evidence* that the lies had truly been resolved.

Lies not immediately resolved by truth from Jesus: Many viewers may have noticed that Eileen’s “I’m not wanted” lie does *not* seem to resolve with the initial words from Jesus, even though they are very clear and direct: “I’ve loved you from the beginning of time,” and “I was with you when you were born, and I wanted you...” When it appears that Jesus is speaking truth, but the recipient does *not* immediately receive His words as healing and transformative, it is important to ask Jesus for help in discerning the reason for the lack of efficacy.

One possibility to consider is that the words/thoughts are not really coming from Jesus. When I first noticed this phenomena in sessions I was facilitating, I assumed it always indicated a counterfeit Jesus. After all, doesn’t Jesus always speak with complete authority? In the gospel story where Jesus rebukes the waves and commands the wind to be still, did the wind and the waves argue, or take time to decide whether or not to obey, or decide to comply only partially? No. They said, “Yes Sir!” and there was such an immediate and dramatic calm that the disciples were in awe, and said to one another, “Who is this, that even the wind and the waves obey Him?”⁴ So I figured that if someone claims she is hearing from Jesus, but the words/thoughts she is hearing don’t seem to have much effect, then the words/thoughts must not really be from Jesus. And in many situations it eventually became clear that this was indeed the case – with careful troubleshooting and investigation, we eventually identified that a demonic spirit was pretending to be Jesus, that an internal part was trying to “help” by speaking for Jesus, or that the person was just “hearing” her own thoughts, as she tried to guess what Jesus might say.

However, there have also been sessions, like this session with Eileen, in which the true Jesus was indeed present and speaking, but the recipient was not initially able to receive healing and transformation from His presence and words. In the session presented here, Eileen wasn’t able to fully receive Jesus’ presence and truth until she resolved various blockages that were in the way.⁵ My assessment at this point is that this same situation has been present in all of the other sessions in which the recipient was truly perceiving the Lord’s presence, but was not initially able to receive the full benefit of His presence and help – one or more blockages are initially in the way, and the person was not able to receive the full benefit of Jesus’ presence and help until the blockages were identified and resolved. So if you are facilitating a session and notice that the recipient does not immediately receive Jesus’ presence and help as healing and transformative,

⁴ Mark 4:35-41.

⁵ Before she could receive transformation and healing from Jesus’ presence and words, she had to remove blockages by choosing to accept that she didn’t get what she needed from her mother, choosing to turn away from trying to resolve the lie by finding some way to make her mother want her, and choosing to turn to Jesus for healing.

ask Jesus for help in discerning whether or not the perceived presence is truly Him, and ask Him for help in identifying and resolving any blockages that are hindering the recipient from receiving the full benefit of His presence and help.

I also think it is interesting and significant that Jesus chose to begin speaking truth, even though He knew it would not yet be fully received. Over the past eight years since this 2005 session with Eileen, I have seen Jesus do this in many other sessions as well. As I have observed these sessions closely, and thought about them carefully, my perception is that the Lord knows exactly what He is doing, and often comes back and uses this as part of the process (for example, Jesus observes that the person does not believe Him and asks her why she doesn't believe Him, and this leads to important issues being identified and resolved).

Jesus Has Perfect Discernment With Respect to Capacity vs Choice: How can I tell whether a person is truly stuck due to lack of capacity, and *needs more help to be able* to take the next step forward, or whether the person is *already able* to take the next step forward, and needs to be challenged to *choose*? As I discuss in the “Immanuel, Emotional Healing, and Capacity” presentations, this can be a very difficult judgment call. Jesus, on the other hand, has perfect discernment, and He doesn't seem to have the least bit of anxiety or difficulty regarding these questions (this is one of the reasons I am so grateful when the person receiving therapy/ministry can perceive Jesus' Immanuel presence – sessions are so much easier when Jesus handles these tough judgment calls).

For example, at one point in this session, Eileen could see Jesus sitting at the kitchen table, but He did not come to her or initiate any other kind of help. I was puzzled regarding why Jesus wasn't doing more to help her, but Eileen had the clear sense that Jesus was waiting for her to do something, and she commented spontaneously: “He's not doing for me what He knows I could do...,” and “He's watching to see what's going to happen, waiting for me to do what He knows I'm able to do...,” (time on tape: 25:45 and 27:05, respectively). After thinking carefully about the rest of the session, my perception is that Jesus especially wanted her to *choose* to ask Him for help, to *choose* to turn to Him, and to *choose* to go to Him, and He knew that quickly going to her and picking her up would have enabled her to avoid these important choices.

Good call, Jesus!

A Common Blockage – Focusing On Another Solution: A dynamic that often hinders Immanuel interventions is the person trying to fix the problem in some way other than accepting what did happen, standing straight in the pain, and then turning to Jesus and asking for His help. Sometimes this prevents the person from even perceiving the Lord's presence – for example, the person is so focused on some other solution that she doesn't see Jesus standing right beside her – and at other times the person can perceive the Lord's presence, but focusing on some other solution hinders her ability to receive from Him.

Eileen's session provides a clear example of this dynamic. For example, notice how she made *present tense* statements such as: “I need her to want me....I've been waiting a long time for her to notice me and want me....I want her to want me,” (42:42) and “there should be something that I can do to make her want me.” (46:10) Instead of accepting the painful truth of what actually happened in her childhood: “my mother did not see me, she did not notice me, she did not give me the attention I needed,” and then turning to Jesus for help, she was still trying to get her mother to see her and want her. And as the session progressed, it became increasingly clear that her persistent focus on trying to fix the problem by getting attention from her mother was directly

interfering with her ability to receive healing from Jesus. For example, at 34:16 she reports: “My mother is right here, but it seems like He’s way over there, and *I have to leave her if I’m going to go over there [to be with Jesus]...I keep hoping that she’s going to pay attention to me. I want her,*” and at 43:10, she makes the very clear, direct statement: “It feels like I have to make a choice between her and You [Jesus].”⁶

Note also that one of the last things she did before finally being able to receive healing from Jesus was to renounce trying to fix the problem herself – to renounce trying to make people want her (51:00).

Beautiful Moment: I thought it was an especially beautiful moment when Eileen reported: “He’s holding me, and I can feel His heart beating” (time on tape: 59:30).

Jesus Fills/Heals Type “A”⁷ Trauma (absence wounds): Some believe that emotional healing ministry can only provide rapid resolution for type “B” trauma (wounds from the *presence* of *bad* things that *shouldn’t* have happened), and that type “A” trauma (wounds from the *absence* of *good* things that *should* have happened) can only be healed by slower processes in the context of relationships in the present. We agree that the Lord *sometimes* heals type “A” trauma through slower processes in the context of relationships in the present, but this session seems to provide an example of the Lord *rapidly healing type “A” trauma* in the context of Immanuel interactions with the person receiving ministry.

Eileen describes a classic type “A” trauma picture, with herself as a small child wanting and needing emotional connection with her mother, but instead of receiving positive attention and emotional connection, she was chronically unseen, ignored, or unwanted. From inside of her childhood memories, Eileen comments: “I’m three, and I’ve been this way a long time, because she really hasn’t taken care of me at all,” (28:07) “It’s like she doesn’t know I’m here...,” (28:45) “It just feels like absence. I see her, but she’s absent,” (28:58) and “I’ve been waiting a long time for her to notice me and want me.” (42:42) Reflecting on these same memories from the perspective of her adult self, Eileen reports: “My mother...was a very depressed person, and very withdrawn,” (32:00) “She never wanted me,” (35:26) “She didn’t even hear me... She was somewhere else... She wasn’t there,” 35:45 “I don’t think my mother ever said [‘I love you’],” (38:25), and “I don’t think my mother ever held me – I don’t think that ever happened with her.” (59:43)

Jesus not only addresses *lies associated with* this type “A” trauma (for example, speaking to

⁶ It is appropriate for a three year old girl to want her mother, and Jesus never makes a real, chronological child choose between Himself and her parents. The problem is that this child part of adult Eileen, in 2005, is *still* trying to fix the problem by trying to get attention from her mother – she is trying to fix the problem by trying to make the past be different than it actually was. In order to go to Jesus and receive healing, Eileen in 2005 *does* need to make a choice between her mother and Jesus – she needs to *choose* to turn away from trying to get her needs met from her mother, and to *choose* to go to Jesus for healing.

⁷ The concepts of “type A,” or “absence trauma” (trauma from the absence of good things that you needed but didn’t get), and “type B” trauma (trauma from the presence of bad things) come from *The Life Model: Living From the Heart Jesus Gave You*, by James Friesen, E. James Wilder, and others (Shepherd’s House, Inc: Van Nuys, CA), 2000. See p.42 and following for their definitions and commentary. For more of our thoughts about type “A” trauma, see “Theophostic[®]-based ministry and type ‘A’ trauma” on the “Articles and FAQs” page of www.kclehman.com.

Eileen’s “I’m not wanted” lie), but *He also gives the little girl in the memory the things that she did not get from her mother*. Where her mother did not notice her or want to be with her, Jesus focuses on her intently and is *glad to be with her*.⁸ Where her mother never said “I love you,” Jesus says “I have loved you...from the beginning of time.” (38:00) Where her mother never held her, Jesus picks her up, sets her on His lap, and holds her so closely that she can feel His heart beating. (58:30)

And the “fruit” from the session confirms that these Immanuel experiences did, indeed, resolve at least some portion of her “lack of connection with mother” absence wounds. Several dramatic data points indicating resolution of these absence wounds are the sudden elimination of her lifelong craving for ice cream, the *specific words* she used to describe her previous relationship with ice cream, and the *specific words* she used to describe her subjective experience of the sudden change. In a brief phone conversation shortly before the follow-up interview, Eileen commented to me:

“I have craved ice cream all my life....I could eat an enormous amount of ice cream, and I always kept 4 half gallons in my fridge....It was a comfort food. ***It would [temporarily] satisfy some kind of craving deep inside of me.***⁹ Since the session, I don’t even want it. *This change started immediately after the session, and it has continued ever since.* I keep waiting for it to change [back to the way it used to be], but it hasn’t....”

And then in the follow-up interview, Eileen comments:

“On some very deep level I’ve been comforted by something other than ice cream, and I don’t need ice cream any more.” (time on tape: 66:38).

In the follow-up interview, Eileen also reports:

“When I left here [after the session] in May, I went to the park and wrote down some things, and this is the list of the things I wrote: ‘I feel *loved, wanted, ...cared for, connected, wonderful, not hungry, not tired, content, I belong, ...peaceful, joyful.*’ Those are the things I wrote when I left here.” (time on tape: 70:49)

These data points, and similar observations from other sessions,¹⁰ have convinced me that Jesus sometimes heals/fills significant absence wounds in the course of *only one or several sessions* (as opposed to only working through much slower processes). My observation is that it often *is* a very slow process for a person to heal/fill absence wounds *by receiving from other people in the context of relationships in the present*, but that a person can heal/fill absence wounds much more

⁸ I think there are many indicators, throughout the session, that Jesus is “glad to be with” Eileen, and some of the clearest indicators are her comments about “the smile.” At 26:30, Eileen comments “When I...saw Him, *I felt a smile,*” and she then goes on to make periodic comments about this smile throughout the rest of the session. A smile is one of the simplest, clearest “glad to be with you” indicators, *in either direction*. If you’re glad to be with me, you will smile spontaneously when you see me, and if I see on your face that you’re glad to be with me, I will usually smile spontaneously in response.

⁹ People with absence wounds often describe a chronic sense of longing that they are constantly trying to fill, and/or a chronic sense of craving that they are constantly trying to satisfy.

¹⁰ See the “Father-son Wounds” video and explanatory comments for another example of Jesus rapidly resolving absence wounds in the context of Immanuel interactions with the person.

quickly by receiving *directly from Jesus in the context of the original childhood absence wound memories.*

Stable, Lasting Weight Loss: At the May 2006 follow-up interview (a full year after the initial session), Eileen reports that her weight is now stable at a point ten pounds *below* her weight at the time of the session recorded in the video. Eileen reports first noticing that her weight was down ten pounds in the fall of 2005, and states that she has remained stable at this lower weight for the past nine months. Most significantly, Eileen reports that she lost this weight without any change in her diet other than the difference regarding ice cream, and she states that her weight seems to remain at this new, lower set point without any effort on her part. As far as we can tell, her previous compulsive use of ice cream as comfort/self-medication for attachment pain had increased her set point weight by ten pounds, and eliminating this high calorie self-medication resulted in an effortless weight loss to a new, lower, stable set point.

Dr. Ed Smith and Theophostic® Prayer Ministry: We strongly recommend that anyone involved in the field of emotional healing study the Theophostic® Prayer Ministry approach as developed by Dr. Ed Smith. We have greatly benefitted, both personally and vocationally, from studying Dr. Smith’s training materials, and from watching Dr. Smith work at his apprenticeship training seminars. For further information on Theophostic® Prayer Ministry, and to buy Theophostic® training materials, go to www.theophostic.com.

Please note that we respect Dr. Smith tremendously, and value our friendship with him, however, neither we nor this tape are in any way officially connected with or endorsed by Dr. Smith or Theophostic® Prayer Ministries.

“Theophostic®-based” therapy/ministry: To describe the healing approach demonstrated in this session with Eileen, we have developed the term “Theophostic®-based” therapy/ministry. We use the term “Theophostic®-based” to refer to therapies/ ministries, such as ours at the time of this session, that are built around a core of Theophostic® principles and techniques, but that are not exactly identical to, or limited to, Theophostic® Prayer Ministry as taught by Dr. Ed Smith. For example, a “Theophostic®-based” therapy/ministry might include dealing with curses, spiritual strongholds, generational problems, and suicide-related phenomena, and/or incorporate journaling, spiritual disciplines, community, and medical psychiatry – and these issues and techniques are not a part of what we understand Dr. Smith to define as Theophostic® Prayer Ministry.

Current (2/2013) relationship between the Immanuel approach and Theophostic: My perception is that the Immanuel approach and Theophostic® Prayer Ministry (TPM) share many of the same foundational principles. Many aspects of the process are also similar. I started with Theophostic® Prayer Ministry, and progressively developed the Immanuel approach as I modified my understanding and techniques so that they would address the priority of intimacy with God over relief of symptoms, so that they would establish perception of Jesus’ tangible presence and an interactive connection with Him as the foundation for the process, so that they would address issues related to capacity, so that people (and especially lay ministers) could learn them more easily and safely, and so that they would also incorporate new understanding regarding the pain processing pathway. For a much more detailed description of my journey from Theophostic® to the Immanuel approach, and for additional discussion of how they are related, see “Brain Science, Psychological Trauma, and the God Who Is with Us ~ Part I.”

More information: For more information from Karl Lehman M.D. and Charlotte Lehman

M.Div, including our teaching about the Immanuel approach to emotional healing, our assessment and recommendations about Theophostic[®] Ministry, our teaching about how Christian emotional healing can fit into professional mental health care, and much more, please help yourself to the free information on our websites, www.immanuelapproach.com, www.kclehman.com, and www.outsmartingyourself.com.