



Safety Net Scenarios that are more Difficult

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With most group exercises and most Immanuel Approach sessions, if the recipient has had time to share her pain story, if she feels heard and understood by the facilitator, and if they have been rummaging around in traumatic memories without resolution, when they get to the end of the available time the recipient will be more than happy to cooperate with the facilitator in deploying the safety net – she will be more than happy to let the facilitator help her get back to her original positive memory and connection with Jesus.

However, there are several situations in which deploying the safety net is more difficult:

1. Long pain story and/or triggers: Some people have long pain stories, and they will want to keep talking about their pain until they feel heard and understood.¹ Another fairly common scenario is for the recipient to talk and talk and talk about the pain around an experience of being triggered.² So if a person is in a group training setting, she's participating in a twenty to thirty minute safety net or healing exercise, and she ends up telling a long pain story or talking about the pain around a trigger, she will often still be talking about her pain when the available time for the exercise expires.

In these scenarios, it will feel painfully mis-attuning when the facilitator directs the recipient to change gears to deploy the safety net – the recipient is in the middle of wanting someone to hear and understand the size of her pain, and the facilitator essentially says, "I'm sorry, we're out of time. Now you need to stop talking about your pain and think happy thoughts." The usual internal response to this kind of mis-attunement bump is something along the lines of: "Arghhh!"

The good news is that these people respond surprisingly well to an enhanced safety net, which includes an additional component of validation, attunement, and reassurance at the front end. When it is time to deploy the safety net and take the recipient back to her initial positive memory and connection with Jesus, you very deliberately validate her pain, attune to the discomfort of changing gears, and you reassure her that the Lord has a plan to address her pain in some other context.

For example, let's say that I am facilitating for a person who is still describing her painful memory as we approach the end of the available time. She has never before felt fully heard and understood regarding this experience, and it feels really good to her to perceive that I am really with her, that I am hearing her, and that I really seem to get it. And now I am faced with the difficult task of deploying the safety net. I definitely do not want to start with, "I'm sorry, we're

¹If the recipient has never previously felt fully heard and understood regarding her pain, she will *especially* want to keep talking about the pain until she *does* feel fully heard and understood.

²No matter how long we talk about the details around an experience of being triggered, it never feels fully satisfying because the underlying traumatic memories are still buried and unaddressed. So we keep talking...and talking...and talking, trying to get to that feeling of full resolution that never comes.

out of time. Now you need to stop talking about your pain and think happy thoughts.” My version of the validation, attunement, and reassurance at the front end of the advanced safety net would be something like this:

“I’m so sorry, but we’re coming to the end of our time. This is going to be hard – this is going to feel really bad – but I’m asking you to do it anyway. We need to shift gears and go back to your initial positive memory and connection with Jesus, so that we can get the plane back on the ground.”

”I want to reassure you – I understand that this painful memory place is very important and needs to be cared for. We’re not trying to dismiss, ignore, invalidate, or minimize this memory or the pain in this memory, and we’re not trying to just stuff it back down so that we can forget about it. *I am 100% certain* that Jesus has a plan for healing this memory, and I *really* encourage you to find a facilitator who can help you do that after this conference is over. But for right now, in this group setting, we need to ‘switch gears’ and help you use the positive-memory safety net so that you can get back to a good place for the end of the exercise.”

Obviously the details at the end can be modified slightly to fit other settings, such as individual therapy sessions instead of group training exercises. For example: “But for right now, with our time coming to an end, we need to ‘switch gears’ and help you use the positive-memory safety net so that you can get back to a good place, so that you can go home and take care of your children.” Or “so that you can get back to an okay place for the rest of the day.” etc.

Also, these people’s relational circuits will be particularly strongly off when you start, so coaching will need to be especially persistent and detailed. Multiple memories may also be needed to build appreciation momentum.

2. Deep into painful memories: Sometimes, as the recipient and facilitator approach the end of an Immanuel Approach session or the end of a group training exercise, the recipient will be deep into intense painful memories, and instead of wanting to take a break and go back to the initial positive memory and connection with Jesus she will want the facilitator to stay with her in the painful memories until they are resolved. In these scenarios, the recipient will be very unhappy about deploying the safety net. The recipient will be especially reluctant to cooperate with the safety net if she is connected to a child part inside a traumatic memory.

Her response to your invitation to deploy the safety net will be something along the lines of, “I don’t want to go back to positive memories – I want you to stay here with me in this painful, traumatic place, and work with me until I get healing.”

More good news is that these people also respond surprisingly well to the enhanced safety net, with it’s additional component of validation, attunement, and reassurance. Just as with the first scenario, their relational circuits will be strongly off-line, so safety-net coaching will need to be especially persistent and detailed; and again, the facilitator may need to use multiple positive memories to build appreciation momentum; but the enhanced safety net *will* work and the session will end with the plane safely back on the ground.

These first two scenarios are currently the *second* biggest challenge for group training exercises and for lay-ministry sessions. In a group of two hundred, as the time for the safety net or trauma-work exercises come to a close there will still be eight or ten, or maybe fifteen

recipients who will still be talking about their pain and wanting to be heard, or who will be deep into painful memories and wanting the facilitator to stay with them in that place.³ Without the enhanced safety net, the whole situation will be moderately bumpy and messy for these exercise groups, and everyone involved will have a moderately unpleasant experience. Again, the good news is that these recipients *will* respond to the enhanced safety net. With the special, strategic validation, attunement, and reassurance (and sometimes a bit of additional coaxing and encouragement), they will eventually cooperate with the safety net and let the facilitator get the plane back on the ground.

(Slide 10.0) 3. Deep into painful memories and intensely blended with internal child part:

Sometimes, as the recipient and facilitator approach the end of an Immanuel Approach session or the end of a group training exercise, the recipient will be deep into intensely painful memories *and also intensely blended with an internal child part who is more in the driver's seat than the usual adult ego state*. Instead of wanting to take a break and go back to the initial positive memory and connection with Jesus, the recipient in this situation will want the facilitator to stay with her in the painful memories until they are resolved.

In these scenarios, the recipient's response to your invitation to deploy the safety net will be something along the lines of, "I demand that you to stay here with me until I'm okay, and I refuse to cooperate with any plan that will just shut me down and leave me behind, while adult _____ just goes back to her happy place!"⁴

The good news is that maybe half of these people will (eventually) respond to an extra-rigorous application of the enhanced safety net. In these situations I use the direct eye contact technique to establish connection and engage directly with the internal part, I often have to repeat the validation, attunement, and reassurance piece several times before the person is able to receive it, and the person often needs quite a bit of additional coaxing and encouragement in order to (eventually) be able to allow me to help her get the plane back on the ground (that is, take her back to her initial positive memory and connection with Jesus).

The bad news is that maybe half of these people need additional advanced interventions/resources beyond the enhanced safety net.

More good news is that (so far), all of these people have eventually responded to direct eye contact, working directly with the internal part to help her find a way to connect with Jesus, and then helping the internal part to work directly with Jesus in finding a plan that includes cooperating with the safety net as a *temporary* coping resource in a larger plan for healing the

³With respect to lay-ministry sessions: if you are working with many different people, my estimate is that you will need to use the advanced safety net with maybe one out of fifteen to one out of twenty of the recipients you work with.

⁴The internal part may also communicate this message indirectly. For example, she will just ignore your attempts to deploy the safety net, and keep going deeper into the details of the traumatic memory. In one such scenario that I was involved in, when I tried to coach the recipient to describe and connect with her initial positive memory, she responded with "I just see red, and I just keep hearing the word, 'Blood.'" In these situations, it is a tremendously helpful first step towards a good outcome for the facilitator to recognize that the recipient is intensely blended with a dissociated part inside a traumatic memory, and that the part is (at least initially) refusing to cooperate with the safety net.

traumatic memories.

This scenario presents the *number one* challenge for group training exercises and for lay-ministry sessions. In a group of two hundred, as the time for the safety net or trauma-work exercises come to a close there will be one or two recipients who will be stuck in a painful memory, and blended with a dissociated part that (at least initially) refuses to cooperate with the safety net and insists that the facilitator stay with them in the painful place until it is resolved.⁵ Without the enhanced safety net and other additional resources, the whole situation will be intensely bumpy and messy for these exercise groups, and everyone involved will have an intensely unpleasant experience. As just described, some of these recipients will (eventually) respond to an extra rigorous application of the enhanced safety net, and some of them will require interventions and resources even beyond the enhanced safety net.

The current challenge for the Immanuel Approach community is to find ways to care for these deeply traumatized people; and at the same time, not allow this concern to shut down the Immanuel Approach for the vast majority of recipients who *are* able to participate in group exercises and/or lay-ministry sessions without this problem coming into the picture.

This material regarding the three more difficult safety-net scenarios just became much more clear to me in the last six months, as I was preparing for the recent wave of conferences. As of right now:

*I am including this teaching material regarding intermediate-advanced safety net issues in all Immanuel Approach training that includes working with trauma – even basic training that includes working with trauma. This material is a bit intimidating for beginners, but I think it’s better than having people inoculated against the Immanuel Approach by having bad experiences when they encounter the three scenarios just describe, but without the benefit of the enhanced safety net.

*In any situation that includes trauma-work group exercises, for every hundred participants I make sure that there are one or two ministry people/teams that can handle advanced Immanuel Approach work with dissociated parts.

I would encourage these same measures for anyone providing Immanuel Approach training.

Shalom for my body:

When deploying the enhanced safety net, decreasing the intensity of the negative emotions will always be helpful. To this purpose, the Shalom-my-body exercises developed by Dr. E. James Wilder and Pastor Ed Khouri are a strange, but amazingly simple, safe, and effective resource.⁶

⁵With respect to lay-ministry sessions: if you are working with many different people, my estimate is that you will encounter this scenario in maybe two out of a hundred of the recipients you work with. Half of these recipients will eventually respond to an extra rigorous application of the advanced safety, and half of them will need additional advanced interventions/resources.

⁶They named these interventions “Shalom My Body” because applying them brings peace (shalom) to our bodies. Note that I have slightly modified the name of these calming exercises, from “Shalom My Body” to “Shalom for My Body.”

As you go through the instructions (below), you will probably notice that components focusing on the physical body are prominent. This has been done very deliberately. The physical body interventions have been designed to be as simple and concrete as possible, so that we can apply them even when we are intensely upset and our brains are significantly impaired by being in non-relational mode. Furthermore, interventions focusing on the physical body can produce surprisingly dramatic benefits for the whole body-mind-spirit system. Our bodies, minds, and spirits are so intimately connected that calming one will usually also produce powerful calming effects for the others.

The physical components of these techniques may seem a little odd, but this is because they have been designed to produce very specific patterns of stimulation to the sympathetic and parasympathetic nervous systems.⁷ The end result is to produce a physiological “relaxation response” that helps to calm intense emotions by calming the physical reactions associated with the emotions.⁸

One advantage of the shalom-for-my-body techniques is that they can usually be used effectively in two to three minutes, whereas most other calming interventions often require ten to twenty minutes. And there are some crisis situations in which an intervention that can be applied in a couple minutes will actually get used, whereas a calming technique that requires ten to twenty minutes will not be realistically feasible. A second advantage of the shalom-for-my-body techniques is that they are usually effective even without initial practice sessions. In contrast, most people find that they need to invest in a number of practice sessions before other calming interventions (such as meditative prayer, deep breathing, and progressive muscle relaxation) become effective. The shalom-for-my-body techniques, however, become effective as soon as you do them correctly, and most people can learn them in a matter of minutes. The only need for practice is to repeat them a few times when you first learn them, so that you will remember how to do them when you need them.

As I have observed myself and others using the shalom-for-my-body exercises, I have noticed that this intervention is especially effective for rapidly reducing the fight-or-flight fear and/or anger associated with traumatic memories; and reducing the intensity of this fight-or-flight fear and/or anger makes it much easier for recipients to both cooperate with and benefit from every one of the components of the enhanced safety net (the special validation, attunement, and

⁷The *sympathetic* nervous system is responsible for *activating* the many aspects of physical arousal associated with intense emotions. For example, when we encounter danger, the sympathetic nervous system activates the physiological changes associated with the fear and anger of the fight-or-flight response—the increased alertness, the increased muscle tension, the increased blood flow, and a variety of other physical reactions that prepare our bodies to either fight or flee. As the direct counterpart of the sympathetic nervous system, the *parasympathetic* nervous system is responsible for *calming* the many aspects of physical arousal associated with intense emotions.

⁸The “relaxation response” is essentially the opposite of the sympathetic stimulation associated with the fight-or-flight response. Measurable physiologic changes associated with the relaxation response include decreased blood pressure, decreased heart rate, decreased respiration rate, decreased lactate levels in the blood, and EEG changes indicative of a calming effect with respect to brain activity. For a very understandable discussion of Dr. Benson and colleagues’ extensive work with the relaxation response, see H. Benson, and M. Z. Klipper, *The Relaxation Response*, updated and expanded edition (New York: Harper Collins, 2000).

reassurance, returning to the initial positive memory, deliberate appreciation, and reconnecting with Jesus).⁹

Instructions for the Shalom-for-My-Body Exercises:¹⁰

(Note: Your learning experience will be greatly enhanced if you study these written instructions in combination with viewing the video clips of Dr. Wilder and me demonstrating the exercises. These clips can be accessed from either the Outsmarting Yourself website, www.outsmartingyourself.com, or from the Outsmarting Yourself companion DVD.)

1. Make sure that you have enough space around you so you can extend your arms and lean back in your chair without hitting anybody or anything.
2. The first part of this exercise has two variations, one for anger and one for fear. If you are feeling angry, begin the Part One: Hands Up exercises with your nostrils flared, an angry expression on your face, and inhaling through your nose. If you are feeling fearful, begin the Part One: Hands Up exercises with your eyes wide open, a frightened expression on your face, and inhaling through your mouth.

Part One: Hands Up

3. Choose the expression you will use for this part (angry, with nostrils flared; or fearful, with eyes wide open), and then do the following three things simultaneously:
 - a) Inhale sharply.
 - b) Throw your head back.
 - c) Throw your arms up and to the sides, as if in response to someone saying “Stick ’em up!”
4. Now do the following four things simultaneously:
 - a) Slowly bring your head forward (return to normal position).
 - b) Breathe out slowly.
 - c) Say out loud, “Whenever I am afraid, I will trust in you, oh Lord.” (For anger, use “Whenever I am angry, I will turn to you, oh Lord.”)
 - d) Slowly lower your hands to your lap.
5. Repeat the *Part One: Hands Up* exercises four to six times.

Part Two: Yawn Left and Right

6. Turn your head to the left.
7. Yawn and inhale slowly (sometimes wiggling your jaw as you yawn triggers a real yawn).
8. Slowly bring your head back to facing forward, and as you turn your head forward say, “Whenever I am afraid, I will trust in you, oh Lord.” (For anger, use “Whenever I am angry, I will turn to you, oh Lord.”)

⁹See appendix E in *Outsmarting Yourself* for additional discussion of the theory behind the shalom-for-my-body exercises, and also for information regarding additional resources by Wilder and Khouri.

¹⁰Adapted from material received in personal e-mails (August 2010) from Dr. E. James Wilder and Pastor Ed Khouri. Used with permission.

9. Turn your head to the right.
10. Yawn and inhale slowly (again, wiggling your jaw may trigger a real yawn).
11. Slowly bring your head back to facing forward, and as you turn your head forward say, “Whenever I am afraid, I will trust in you, oh Lord.” (For anger, use, “Whenever I am angry, I will turn to you, oh Lord.”)
12. Repeat the *Part Two: Yawn Left and Right* exercises three or four times.

Part Three: Chest Tap and Rub

13. Rest your fingertips near the top of your chest, with your fingers slightly curved and each hand about two inches out from the center of your chest.
14. Start tapping alternating hands on your chest at about the speed of your heartbeat (you can get a feel for the speed of your heartbeat by placing the fingers of one hand on the large artery in your neck, immediately below your jaw and to the side of your windpipe).
15. As you inhale, do the following two things simultaneously:
 - a) Breathe in deeply, smoothly, and a bit faster than normal.
 - b) Steadily increase the speed you are tapping.
16. As you exhale, do the following three things simultaneously:
 - a) Breathe out slowly and smoothly.
 - b) Use your fingertips to gently massage the place on your chest where you were tapping.
 - c) Say out loud, “Whenever I am afraid, I will trust in you, oh Lord.” (For anger, use, “Whenever I am angry, I will turn to you, oh Lord.”)
17. Repeat the *Part Three: Chest Tap and Rub* exercises three or four times.