

Cumulative FAQ Document

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Brief, careful answers to more than sixty of the most common and/or strategic and/or interesting questions that have come up in the Q & A times from various training settings over the past twenty-five years.

Q & A Table of Contents/Outline

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- E. What is the Immanuel Approach lifestyle?

II. Biblical/Theological Questions

- A. Is the Immanuel Approach consistent with and supported by scripture? (See the “Foundational General Questions” section above.)
- B. Shouldn't we just leave the past behind us, as the apostle Paul advises?
- C. What do I say to those who believe that God Only Speaks to Us Through the Bible?
- D. How do I respond to those who think we are claiming divine revelation equal to scripture?
- E. What about plain old sin?
- F. Does the Catholic church consider the Immanuel Approach to be orthodox?

III. Can the Immanuel Approach Be Used With _____ (Fill in the Blank)?

- A. Can the Immanuel Approach be used with children?
- B. Can the Immanuel Approach be used with non-Christians?
- C. Can the Immanuel Approach be used with people with clinical mental illnesses? In the care of people taking psychiatric medications?
- D. Specifically, can the Immanuel Approach be used as part of the treatment for:
Attention deficit and hyperactivity disorder?

Autistic spectrum disorders?
Bipolar disorder?
Major depression?
Obsessive compulsive disorder?
Schizophrenia?
Traumatic brain injury (TBI)?

- E. Is the Immanuel Approach effective for attachment trauma?
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- G. Does the Immanuel Approach work with narcissists?
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- K. Can I use the Immanuel Approach with people in jail or prison? (See "What Special Considerations Should I Keep in Mind when Working with Jail/Prison Inmates?" in the "Practical Questions Regarding Facilitating Sessions (Intermediate)" section, below.)
- L. Are there any situations in which the Immanuel Approach does not work?

IV. Similarities and Differences Between the Immanuel Approach and Other Approaches to Emotional Healing

- A. Could you talk about how other models/methods of inner healing are the same or different from the Immanuel Approach? For example, Restoring the Foundations, Theophostic, Sozo, Elijah House, etc.?
- B. Isn't the Immanuel Approach really just the same as other techniques for connecting with God (such as listening prayer) and other approaches to emotional healing (such as Theophostic® or Sozo)?
- C. What is unique/new/different about Immanuel Approach? (See the "Foundational General Questions" section above.)
- D. How do I know if I am receiving/facilitating/teaching genuine Immanuel Approach?
- E. Is the Life-Model "Passing the Peace" process the same as the Immanuel Approach?

V. Working With Spouse/Family/Friends

- A. What about using the Immanuel Approach with my children (or grandchildren, or nephews/nieces)? (See “Can the Immanuel Approach be used with Children?” in the “Can the Immanuel Approach be Used with _____ (Fill in the Blank)?” section above.)
- B. How do you help your kids with healing when you know you’ve done things that have caused emotional damage? How can you be the one to help when you’ve caused the pain?
- C. What about the Immanuel Approach for couples?

VI. Practical Questions Regarding Facilitating Sessions (Basic Level)

- A. How can I tell if the recipient is perceiving and interacting with the genuine presence of Jesus, or whether she is just making things up with her own mind? And how do I discern when the recipient is perceiving and engaging with some other presence that is not actually Jesus? (Basic-level comments)
- B. How much time should I plan on for ongoing ministry sessions?
- C. **What about safety-net memories with tiny splinters?**
- C. How does one discern the best agenda for an IA session? (Basic-level comments)
- D. What about people who have not yet had an experience with Jesus’ tangible presence, so that they don’t have an initial positive Jesus-memory to start with?
- E. What do I do when the recipient is so mad at Jesus that they don’t want to work with Him?
- F. When should I take responsibility for leading the session? How much direction should I provide?
- G. Sometimes facilitators seem very directive, rather than letting Jesus lead the session. They take the place of Jesus and speak for Him. Are there precautions to make sure one doesn’t move into control and manipulation?
- H. What do I do when I get triggered during a session?
- I. How do I recover when I am failing as a facilitator and the session has already turned into a big mess? I’m afraid to start in case this happens and I won’t know what to do.

VII. Practical Questions Regarding Facilitating Sessions (Intermediate)

- A. How can you tell if the recipient is perceiving and interacting with the genuine presence of Jesus, or whether she is just making things up with her own mind? And how do you discern when the recipient is perceiving and engaging with some other presence that is not actually Jesus? (Intermediate-advanced-level comments)
- B. How much time should I plan on for ongoing ministry sessions? (See the same/parallel question in the “Practical Questions Regarding Facilitating Sessions (Basic Level) above)

- C. How does one discern the best agenda for an IA session? (Intermediate-level comments)
- D. Is it ever okay to just go straight to working with a trigger and/or traumatic memory, as opposed to always needing to start with an initial positive memory and connection with Jesus?
- E. Is it important to choose an actual memory to focus on for the initial appreciation and connection with Jesus, or can recipient go to an imaginary place?
- F. Self-pity: It seems like some recipients get stuck in self-pity, and that this gets in the way of moving forward with the Immanuel Approach. How do I help with this?
- G. What about physical touch in Immanuel Approach sessions?
- H. What do I do when both I and the recipient are initially convinced that she is interacting with the genuine presence of Jesus, but then partway through the session she reports that Jesus is starting to say and/or do things that are strange and/or confusing and/or disturbing?
- I. Many of the people who come to our healing ministry have thoughts about committing suicide. Can we use the Immanuel Approach with these people, and will it help with respect to their suicidal ideation?
- J. When should lay-ministers ask for help (obtain consultation from/make referrals to mental health professionals)?
- J. What special considerations should I keep in mind when working with someone in jail or prison?
- K. Have you ever used EMDR with the Immanuel Approach?

VIII. Working with Internal Parts

- A. Does each internal part need to be led to Christ?
- B. How do you handle a client with two or three different parts that are so intensely at war with each other that they continually hijack his system and keep him from being able to talk to Jesus?
- C. What do you do when one or more internal parts are so mad at Jesus that they won't work with Him?
- D. How does one distinguish between demonic spirits and internal parts?
- E. Does the Immanuel Approach bring about natural/spontaneous integration of internal parts, or does the facilitator need to initiate and guide this process?
- F. Are internal parts (both child parts and non-child parts) always/only/necessarily dissociative phenomena?

F. How do you work with people who seem to have internal parts, but who are very uncomfortable with the whole idea of internal parts?

F. For the direct eye contact technique, is there an optimal distance to be from the client? Or a range of distances that works?

IX. Questions from Recipients

A. How long will it take to get healed?

B. How do I decide what to work on? (refer to this Q addressed elsewhere)

C. What Homework Can I Do to prepare for IA work?

D. Can I facilitate for myself/do the Immanuel Approach on my own?

E. How/where can I find someone to facilitate Immanuel Approach sessions for me?

F. Am I really making progress, or have I just been imagining it?

X. Questions About IA Community

A. How can IA community help with building and sustaining an IA lifestyle?

B. They are doing _____ (fill in the Blank) differently. Are they still doing the Immanuel Approach?

C. I have a concern about somebody in the IA community. Can you talk to them?

D. How can I help spread the Immanuel Approach?

E. Do you offer scholarships/discounts for Immanuel Approach training/materials?:

XI. Additional Training

A. How/where can I get additional training regarding the Immanuel Approach?

B. Do you offer continuing education credit (CEUs) for Immanuel Approach training?

C. How can I become an Immanuel Approach trainer?

XII. Specific Training Resources

A. Do you have a “cheat sheet” that summarizes the Immanuel Approach process very briefly something that just briefly reminds the facilitator of the key components of the Immanuel Approach?

B. What are the best resources to purchase for starting an Immanuel Approach ministry at my

church?

- C. Do you have Immanuel Approach materials that have been translated into other languages?
- D. Is Dr. Lehman available for consultations?

XIII. Questions from Trainers

- A. Is it okay to use a recent upsetting event as the initial target for teaching demos and/or practice exercises?
- B. How much time should I plan on for teaching demos?
- C. What about “extras” that we want to include in our Immanuel Approach teaching/training?

XIV. Practical Logistics (Billing Insurance, Informed Consent, etc)

- A. Can Immanuel Approach sessions be provided via phone/Skype/Zoom?
- B. As a mental health professional, is it appropriate for me to bill insurance for Immanuel Approach sessions?
- C. Should I obtain informed consent from my clients?
- D. Is the Immanuel Approach psychotherapy or prayer ministry?
- E. Shouldn't lay people offer Immanuel Approach sessions for free? Or, to put this another way, is it okay for lay people to charge for facilitating IA sessions?
- F. How do lay facilitators identify themselves?
- G. Is it legal for lay people to charge for facilitating IA sessions?
- H. What kind of reimbursement do lay facilitators receive?

XV. Miscellaneous General Questions

- A. Does the Immanuel Approach use guided imagery?
- B. Is Immanuel Approach visual imagery created by my imagination?
- C. Questions regarding anger: Is anger inherently sinful? Is there an appropriate, healthy function for anger? Are anger and judgment the same thing?
- D. Do you ever see physical healing with the Immanuel Approach?
- E. Does an Immanuel lifestyle really need to include regular, deliberate, proactive trauma work?

F. Is the Immanuel Approach psychotherapy or prayer ministry?

XVI. Advanced Topics

- A. What do I do if I encounter something strange/unusual – something I’ve never seen before, and I have no idea what it is?
- B. How do you help a recipient who is working on infant attachment trauma absence wounds, and says something along the lines of, “I don’t want Jesus, I want my mother!!”
- C. What are your thoughts regarding SRA and DID (Satanic Ritual Abuse and Dissociative Identity Disorder)?
- D. Additional thoughts for those who are dealing with especially difficult situations.

Frequently Asked Questions

I. Foundational General Questions

A. Is the Immanuel Approach consistent with and supported by scripture?

As the Immanuel Approach has become more widely known, people have appropriately raised the question, “Is it biblical?” Our perception is that the Immanuel Approach, for emotional healing and for life, is clearly consistent with and strongly supported by the Christian scriptures. For a much more thorough discussion of this question, see chapter 35, “The Biblical Basis for the Immanuel Approach,” in the big lion book.

B. Is there empirical research verifying effectiveness of Immanuel Approach? As of February 2023, Dr. Emily Hervey, licensed clinical psychologist and Adjunct Professor at Regent University, has published a quantitative study supporting the effectiveness of the Immanuel Approach¹ and is preparing to submit a second, similar study for publication.² Furthermore, Kristine Bresser completed a quantitative study supporting the effectiveness of the Immanuel Approach as her doctoral dissertation at Regent,³ and Dr. Mark Hattendorf

¹Emily G. Hervey, “Spiritually Oriented Trauma Healing in Nigeria: A Program Evaluation to Assess Trauma-Symptom Reduction and Spiritual Growth,” *Journal of Psychology and Theology*, Vol. 0, No. 0 (Feb 2023): <https://doi.org/10.1177/00916471221150402>. Note: The abstract does not mention the Immanuel Approach, but the full article clearly describes including the Immanuel Approach as the primary intervention for the treatment of trauma.

²Emily G. Hervey, “The Effects of a Spiritually Integrated Trauma Healing Program on PTSD Symptoms and Spiritual Well-Being in Nigeria,” in review. Note: The abstract for Dr. Hervey’s study does not mention the Immanuel Approach, but the full article clearly describes including the Immanuel Approach as the primary intervention for the treatment of trauma.

³Kristine Bresser, *A quantitative study of a faith-based trauma healing intervention among Kenyans*. [Doctoral dissertation, Regent University]. (Ann Arbor, MI: ProQuest Dissertations Publishing, 2022.) <https://www.proquest.com/dissertationtheses/quantitative-study-faith-based-trauma-healing/docview/2645791129/se-2>

completed a qualitative study of the Immanuel Approach for his doctoral dissertation at Regent.⁴ Which is all very encouraging. However, these are only a small handful of studies, the Immanuel Approach was included as part of a larger faith-based treatment program in the studies by Dr. Hervey and Dr. Bresser (as opposed to being studied as a stand-alone intervention), and the studies by Hervey and Bresser focused on treatment for only PTSD. However, this is only one study, the Immanuel Approach was included as part of a larger faith-based treatment program (as opposed to being studied as a stand-alone intervention), and the study focused on treatment for only PTSD.

Fortunately, there are also other sources of evidence demonstrating the effectiveness of the Immanuel Approach. In addition to this initial empirical research, we also have carefully documented case studies that show consistent, strong positive results. Furthermore, there is *indirect* support for the effectiveness of the Immanuel Approach based on similarities between the Immanuel Approach and psychotherapy modalities that *have* been verified as effective by empirical research, and there is more indirect support based on theoretical considerations.

Case study evidence supporting efficacy: Regarding case study support, it is a very common practice—in all branches of medicine, in mental health care, and in emotional healing ministry—for care providers to use a new treatment method on the basis of positive case study results, even though the effectiveness of the new intervention has not yet been confirmed by empirical research. There are usually many years between the case study description of a new treatment method and confirmation of the new method with empirical research. In fact, empirical research, such as blinded, controlled studies, is often undertaken only after many practitioners have begun to use a new treatment on the basis of case study reports, and enough patients display positive results to justify embarking on more systematic research (which is tedious, time-consuming, and *very* expensive). In the history of medicine and mental health care, many millions of patients have been effectively treated with new interventions even though the new interventions had *not* yet been confirmed by empirical research, but rather were only supported by positive case studies.

With respect to the Immanuel Approach, my colleagues and I have a growing pile of carefully documented case studies showing dramatic, long-lasting positive results. For example, the Live Ministry Session DVDs, such as *Renaë: Healing Helps Parenting, Rita #3: Jesus Is Better than Candy, Maggie #3: Labor & Delivery Trauma, Ian: “I’m Not Enough,”* and *“Eileen: Immanuel Interventions (Intermediate)”* provide examples of carefully documented Immanuel Approach case studies with observable, long-lasting positive results. Also, most of the true story examples in the big lion book come from carefully documented case studies that include observable, long-lasting positive results.

Similarities to therapy modalities that do have empirical research support: Regarding indirect support, the Immanuel Approach shares a number of important principles and techniques with psychotherapy interventions that *do* have strong empirical research support. At the time of this writing (October 2021), extensive medical and psychological research shows that EMDR (Eye Movement Desensitization and Reprocessing), exposure therapy, and cognitive-behavioral therapy significantly reduce the signs and symptoms of a number of mental illnesses, including

⁴Mark Elliott Hattendorf, *Immanuel: Narrative Case Studies Exploring Inner Healing in Clinical Settings* [Doctoral dissertation, Regent University]. (Ann Arbor, MI: ProQuest Dissertation Publishing, 2014).

Post-Traumatic Stress Disorder (PTSD), Obsessive Compulsive Disorder (OCD), and panic disorder.⁵ And the Immanuel Approach includes many of the most important principles and techniques from each of these other modalities. For example:

- Currently, with the new iterations of cognitive-behavioral therapy and exposure therapy specifically developed for PTSD, cognitive-behavioral therapy, exposure therapy, EMDR, and the Immanuel Approach all recognize the importance of traumatic memories. And they all explicitly, deliberately work to help the recipient resolve the traumatic memories as a central part of the therapeutic process.
- With the new iterations specifically developed for PTSD; cognitive-behavioral therapy, exposure therapy, EMDR, and the Immanuel Approach all recognize the importance of distorted, false negative cognitions (lies), they all recognize that the distorted, false negative cognitions are anchored in root traumatic memories, and they all work very deliberately to resolve these distorted erroneous cognitions.
- With the new iterations specifically developed for PTSD, exposure therapy, the Immanuel Approach, and EMDR all recognize the special power of *experiential* truth in resolving the distorted, false negative cognitions.
- With the new exposure therapy iteration specifically developed for PTSD, exposure therapy, EMDR, and the Immanuel Approach all apply principles and techniques coming out of recent research regarding memory reconsolidation.⁶
- Establishing a “safe place” to go back to, as a psychotherapy safety net, is a technique that the Immanuel Approach shares with EMDR (and also with many other psychotherapy approaches that focus especially on resolving psychological trauma).

So, if these other psychotherapies have strong research support for efficacy, and the Immanuel Approach includes many of the most important principles and techniques from these psychotherapies, then the empirical research demonstrating that these other psychotherapies are effective would predict that the Immanuel Approach will *probably* also be effective. Therefore,

⁵See, for example, Carl Sherman, “Two Modalities Rival Prolonged Exposure for PTSD,” *Clinical Psychiatry News*, April 2002, page 40; Edna B. Foa, T.M. Keane, and M.J. Friedman eds. *Effective Treatments for PTSD: Practice Guidelines from the International Society for Traumatic Stress Studies*. (New York: The Guilford Press, 2000); and James C. Ballenger, “Current treatments of the anxiety disorders in adults,” *Biol-Psychiatry*, Vol. 46 No. 11 (December 1999), pages 1579–94. See also “The Immanuel Approach & EMDR: FAQs and Common Misunderstandings” in the Special Subjects/Advanced Topics section on the Resources page of www.immanuelapproach.com for additional discussion of the research regarding EMDR.

⁶For a brief discussion of these principles and techniques coming out of memory-reconsolidation research, see “The Place of the Immanuel Approach In the Treatment of Clinical Disorders.” (available as a free download from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com). For a much more detailed discussion of recent research regarding memory reconsolidation, and the implications of this research for psychotherapy, see Bruce Ecker, Robin Ticic, and Laurel Hulley, *Unlocking the Emotional Brain: Eliminating Symptoms at Their Roots Using Memory Reconsolidation* (New York: Routledge, 2012).

the empirical research demonstrating that these other psychotherapies are effective provides strong *indirect* support for the efficacy of the Immanuel Approach.⁷

Support for the Immanuel Approach based on theoretical considerations: Medical and mental health professionals often make treatment decisions based on theoretical considerations, even though there is not yet empirical research proving that the specific treatment in question is effective for the specific application in question. For example, there is strong theoretical and case study support for Immanuel Approach principles and techniques being effective for resolving the psychological effects of traumatic events. And there is also a lot of data indicating that unresolved psychological trauma contributes to many mental illnesses, such as dysthymia, depression, eating disorders, anxiety disorders, addictions, somatization disorders, attachment disorders, personality disorders, and the obvious posttraumatic stress disorder (PTSD).⁸ Putting these two pieces together – if unresolved psychological trauma contributes to these mental health problems, and Immanuel Approach principles and techniques are thought to be helpful in working with psychological trauma, then it is reasonable to include the Immanuel Approach in the overall treatment plan for people with these mental health concerns.

This approach is a long established and widely accepted practice in medicine and mental health care, and it has resulted in good outcomes in many individual cases, as well as leading to many important discoveries. For example, the cure for malaria was discovered when Jesuit priests at missions in the foothills of the Andes mountains observed that the Native Americans drank powdered cinchona bark in hot water to calm their trembling muscles when they were shivering from cold exposure. It occurred to the priests that cinchona might therefore also be helpful for the intense shivering that is associated with malaria, and they tested the powdered bark on several patients suffering from malarial fever. They were pleased when this treatment proved helpful in controlling the shivering, but much more excited to discover that it also cured the underlying illness!⁹

Published case studies provide a large supply of additional examples, since many of the case studies that appear in medical journals are examples of treatment plans *that do not yet*

⁷For intermediate-length additional discussion of the principles and techniques that are shared between the Immanuel Approach and research-supported psychotherapies, see “Cognitive Therapy and the Immanuel Approach,” “The Immanuel Approach and EMDR: FAQs and Common Misunderstandings,” and “Exposure Therapy and the Immanuel Approach.” (These three essays are available as free downloads from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com.) And for *very* detailed Immanuel Approach case studies and extensive discussion of the principles and techniques that the Immanuel Approach shares with well established psychotherapies, see Dr. Mark Hattendorf’s 466 page doctoral thesis, *Narrative Case Studies Exploring Inner Healing in Clinical Settings*. (Mark Elliott Hattendorf, Immanuel: *Narrative Case Studies Exploring Inner Healing in Clinical Settings* (Ann Arbor, MI: ProQuest LLC, 2014)).

⁸See Karl D. Lehman, *Mind and Brain: Separate but Integrated* (Evanston, IL: Immanuel Publishing, 2023), chapter twelve, for a brief summary of the extensive evidence indicating that unresolved psychological trauma contributes to these many mental health problems. And see Allan N. Schore, *Affect Dysregulation and Disorders of the Self* (New York, NY: W.W. Norton & Company, 2003) for an exhaustive discussion of the many neurophysiological ways in which psychological trauma contributes to mental illnesses.

⁹Rocco, Fiammetta. *The Miraculous Fever-Tree*. (New York, NY: HarperCollins), 2003, pages 60-63.

*have published empirical research support, but rather are based on theoretical considerations, and that have been chosen for publication because they appear to have resulted in good outcomes.*¹⁰

Recent research regarding memory-reconsolidation: The strongest theoretical support for the Immanuel Approach comes from recent research regarding memory reconsolidation. In discussing this important new research, let me start with summarizing a couple of long-established brain-science phenomena that provide context:

- Learning that occurs in the presence of the intense emotions associated with painful experiences is rapid, strong, and easy to demonstrate. For example, you can take a guinea pig, a monkey, or an undergraduate trying to make some extra spending money by participating in a psychology research project, and run them through a handful of training trials in which you play a specific audio tone and then administer a painful electric shock. And then a day later, a month later, or a year later, you can demonstrate that the experimental subjects remember the learned association by playing the audio tone and observing that they immediately experience distress – the college student will actually describe feeling anxiety/fear, all of the experimental subjects will display behavior indicative of anxiety/fear, and they will all manifest bio-indicators of anxiety/fear (such as increased respiration, increased pulse rate, increased blood pressure, and increased sweating).
- Once this learning associated with pain and intense emotions has been consolidated into long-term memory, it can be managed, and even completely suppressed (temporarily), but it can no longer be truly, permanently resolved, erased, or replaced. This conclusion has been based on extensive research on a phenomenon called extinction. Extinction is the process of eliminating a learned response by running the experimental subjects through a new set of training trials that carry the *opposite* meaning from the initial trials. (For example, extinction training for our guinea pig, monkey, and college student would be to run them through repeated trials in which they hear the audio tone, but then *do not* receive an electric shock.) And a very significant, very consistent finding from the many, many studies examining extinction is that extinction training *does not actually erase or replace the initial learning*, but rather only temporarily suppresses it. Even though the initial learned response would seem to completely disappear in response to repeated extinction training trials, it would always eventually return (unless regular refresher extinction trials were continued indefinitely).¹¹

¹⁰See, for example, Taylor F., Cahill L., “Propranolol for reemergent posttraumatic stress disorder following an event of retraumatization: a case study,” *J Trauma Stress*. 2002; Vol 15, pages 433-437. MANY similar examples can be obtained by even a cursory review of mainstream medical and mental health journals.

¹¹For a review of the research regarding memory consolidation, and how it “proves” the “impossibility” of reprocessing, replacing, or erasing emotional learning once it has been consolidated, see James L. McGaugh, “Memory—A Century of Consolidation,” *Science* Vol. 287 (Jan 14, 2000): pages 248-251.

Furthermore, research studying learning that occurs in the context of intense emotions¹² reveals that this kind of learning is stored in specialized implicit memory circuits that are exceptionally durable.¹³ And studies examining extinction also show that the learning from extinction training is actually carried in the prefrontal cortex, a completely different part of the brain from the learning that it is trying to manage/suppress.¹⁴ So if a person has distorted, erroneous negative interpretations associated with a traumatic memory, extinction training will teach a different part of the brain how to manage/moderate/suppress the toxic content associated with the trauma, but it will not rewrite, replace, or resolve the memory files actually carrying the toxic content.

Based on the huge collection of research studies thoroughly establishing these two points, the official position of mainstream neuroscientists and psychologists for many years has been that the toxic content carried in traumatic memories was unchangeable and permanent once the experience was consolidated into long-term memory. The mainstream, established belief was that we could train other parts of the brain to manage, moderate, and suppress the toxic content carried in traumatic memories, but that there was no way to truly, permanently resolve it. When a therapist or emotional healing minister occasionally claimed that a client/recipient seemed to experience true, complete, permanent healing for a traumatic memory, the neuroscience and psychology authorities would simply state, “That can’t happen, doesn’t happen, and didn’t happen – we have proven that it is impossible.”

And then, beginning in 2004, new research has been discovering and clarifying details regarding a psychological/neurological phenomenon called memory reconsolidation. To make a long story short, this new research demonstrates that we can truly, permanently modify and resolve even traumatic content that has been consolidated into long-term memory *if we establish certain very specific conditions and include a very specific intervention.*

¹²Note that “learning that occurs in the context of intense emotions” would include the distorted, negative cognitions that are included in the toxic content associated with traumatic memories. Also, to the extent that learning includes any new memory content associated with a new experience, “learning that occurs in the context of intense emotions” would include **all** toxic content associated with traumatic memories.

¹³James L. McGaugh, “Making Lasting Memories: Remembering the Significant,” *Proceedings of the National Academy of Sciences of the United States of America*, Vol. 110, Suppl 2 (June 18, 2013): pages 10402-7.

¹⁴See, for example, Mohammed R. Milad and Gregory J. Quirk, “Neurons in medial prefrontal cortex signal memory for fear extinction,” *Nature* Vol. 420 (Nov 7, 2002): pages 70-74; Brenda Milner, Larry R. Squire, and Eric R. Kandel, “Cognitive Neuroscience and the Study of Memory,” *Neuron* Vol. 20, No. 3 (March 1998): pages 445-468; Elizabeth A. Phelps, Mauricio R. Delgado, Katherine L. Nearing, and Joseph E. LeDoux, “Extinction Learning in Humans: Role of the Amygdala and vmPFC,” *Neuron* Vol. 43, No. 6 (Sept 16, 2004): pages 897-905; Gregory J. Quirk, Ekaterina Likhtik, Joe Guillaume Pelletier, and Denis Paré, “Stimulation of Medial Prefrontal Cortex Decreases Responsiveness of Central Amygdala Output Neurons,” *The Journal of Neuroscience* Vol. 23 No. 25 (Sep 24, 2003): pages 8800-8807; and Edwin Santini, Hong Ge, Kegin Ren, Sandra Pena de Ortiz, and Gregory J. Quirk, “Consolidation of Fear Extinction Requires Protein Synthesis in the Medial Prefrontal Cortex,” *The Journal of Neuroscience* Vol. 24, No. 25 (June 2004): pages 5704-5710.

One of the necessary conditions is that *the traumatic content must first be activated*. When a therapy client/ministry recipient is trying to permanently reprocess and resolve traumatic content, they must be connected to the memory to the point that they can feel the emotions associated with the original experience (at least to some extent) – they must be working *inside* of the activated traumatic memory, as opposed to just thinking about it and talking about it from the outside. And a second necessary condition is that their experience of being inside of the activated traumatic memory must now contain something significantly different.¹⁵

The very specific necessary intervention is for the client/recipient to have a corrective experience while connected to, or “inside of,” the activated traumatic memory. That is, while they are connected to the traumatic memory, they must have a corrective *experience* that carries the opposite meaning from the toxic learning produced by the original trauma.¹⁶

And when those studying memory reconsolidation carefully observe trauma-therapy sessions, with these principles in mind, they find the exact same results. For example, if a person has a traumatic car accident, they develop a phobic fear of driving as a result of the accident, and months have gone by so that the trauma is consolidated into long term memory, traditional extinction training as part of traditional exposure therapy will only produce temporary suppression of the phobic reaction – exactly as predicted by all of the research on extinction. *However*, if we first activate the traumatic memory (for example, by coaching the client to focus on it until he feels connected to the toxic content), and if we also deliberately include something different (such as the presence of an attuning ally *with him* as he is “inside” the memory), then the same traditional extinction training that would otherwise just produce temporary suppression will instead *permanently resolve* the toxic learning from the trauma – the opposite meaning in the extinction training corrective experience ***will actually replace, and thereby permanently resolve***, the toxic learning produced by the trauma.¹⁷

¹⁵One proposed explanation regarding this second necessary condition is that metabolic resources are required to open the circuits back up, and the brain needs to have a good reason to invest these resources. If everything just looks the same, the brain thinks, “Why invest resources to open up the circuits if we are just going to relearn the same lesson?” In contrast, if something is significantly different, the brain concludes that it is worth the investment to make space for the possibility of new learning that might be adaptive in some way. See page 7 of Bruce Ecker, “Memory Reconsolidation Understood and Misunderstood.” *International Journal of Neuropsychotherapy* Vol. 3, No. 1 (2015): pages 2-46.

¹⁶Note that “toxic learning produced by trauma” can include more than just level V erroneous cognitive interpretations regarding the meaning of the experience. For example, the Level III loss-of-relational-circuits component of trauma can be framed as an *experiential meaning* along the lines of, “I am alone – God and my community are not with me here,” which would be a form of toxic learning produced by trauma. Similarly, the Level IV unable-to-navigate-the-situation-in-a-satisfying-way component of trauma can be framed as an *experiential meaning* along the lines of, “I am inadequate and have failed – I don’t have the knowledge, strength, and skill necessary to be able to handle this situation.” Note also that this wider formulation of “toxic learning” would enable memory reconsolidation research to more fully synchronize with the Immanuel Approach and our pain processing pathway model.

¹⁷For a much more detailed discussion of recent research regarding memory reconsolidation, and the implications of this research for psychotherapy, see Bruce Ecker, Robin Ticic, and Laurel Hulley, *Unlocking the Emotional Brain: Eliminating Symptoms at Their Roots Using Memory Reconsolidation* (New York: Routledge, 2012) and Bruce Ecker, “Memory Reconsolidation Understood

So returning to theoretical support for the Immanuel Approach: this new research regarding memory reconsolidation clearly, compellingly demonstrates that fully consolidated memories can be opened back up for reprocessing, and then permanently re-written/modified before being re-consolidated back into stable long-term memory – just as we see with Immanuel Approach emotional healing. Furthermore, the new research regarding memory reconsolidation clearly identifies a specific intervention and two specific conditions that are necessary for truly, permanently resolving traumatic memories, ***and the Immanuel Approach emotional healing process clearly includes these necessary conditions.***¹⁸

Another way to summarize the strategic importance of this new memory reconsolidation research is that the new discoveries being established by this rigorous, compelling research validate, support, and are totally consistent with many of the key principles and process components of the Immanuel Approach.

Empirical research supporting the efficacy of prayer in general: Finally, there is a surprisingly large, surprisingly strong body of empirical research supporting the value of prayer in general. For example, the book *Healing Words*, by Larry Dossey M.D., has a whole section on experimental evidence supporting various kinds of healing prayer.¹⁹

For additional discussion of the validity of case studies as supporting evidence, for additional discussion of the indirect support from shared principles and techniques between the Immanuel Approach and research-confirmed psychotherapies, and for additional discussion of the indirect support from theoretical considerations, see “The Place of the Immanuel Approach In the Treatment of Clinical Disorders.”²⁰

C. What is unique/new/different about the Immanuel Approach? The first point I want to make in addressing this question is that there is a lot of overlap between the Immanuel Approach and other approaches to emotional healing. My assessment is that many of the core principles are shared with most other approaches to emotional healing. For example, all other approaches I am aware of understand that many problems in the present are caused by underlying trauma, and the primary resource for healing is to help the person get to the traumatic memories, and then from inside the traumatic memories ask the Lord to come with healing. And all of these approaches are at least somewhat effective in finding and resolving traumatic memories.

This being said, I think there are a number of pieces that are unique/new/different with the Immanuel Approach, and that make it easier, gentler, safer, more transferrable, and more effective:

and Misunderstood.” *International Journal of Neuropsychotherapy* Vol. 3, No. 1 (2015): pages 2-46.

¹⁸For the specifics regarding this last point, see “The Place of the Immanuel Approach In the Treatment of Clinical Disorders.” (Available as a free download from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com.)

¹⁹Larry Dossey, *Healing Words*. (New York, NY: HarperCollins, 1993), Part Three: The Evidence, pages 157-207.

²⁰Available as a free download from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com.

- *Starting with a positive memory and appreciation:* As far as I am aware, the Immanuel Approach is the only approach to emotional healing that starts with positive memory recall and deliberate appreciation to activate the recipient's relational circuits – to prepare the recipient's brain to connect with God. And again, this is an especially gentle, easy on-ramp.
- *Starting with memories for past positive experiences with God:* For those who have memories of previous positive experiences with God, starting with a positive God memory further prepares the brain-mind-spirit for connecting with the Lord. To some extent this creates the “just right” conditions that worked the first time, and it also takes advantage of the way in which relationships are memory-mapped. As far as I am aware, the Immanuel Approach is the only approach to emotional healing that includes this piece of applied brain science.
- *Starting with connection with Jesus, letting Jesus drive from the beginning:* With many other approaches to emotional healing, the facilitator and recipient go through much of the session with the facilitator providing most/all of the leadership, and with the recipient not yet perceiving the presence of Jesus. For example, with many emotional healing ministries, the facilitator will lead the process of focusing the issue to be worked on, the facilitator will lead the process of finding the underlying traumatic memories, the facilitator will lead the process of working in the traumatic memories to identify specific healing targets (such as distorted perceptions/core lies that are anchored in the trauma), the facilitator will lead the process of focusing these healing targets and preparing them for resolution, and the facilitator will lead the process of identifying other issues that might need to be addressed (for example, bitterness or demonic interference); and then, only after all of these pieces are in place, they will invite Jesus into the memory and into the process. Furthermore (with some ministries), even after all of the pieces are in place, much of the healing intervention comes from prophetic words, guidance, truth, etc. that the facilitator receives from God on behalf of the recipient.

These approaches require the facilitator to bring a lot of gifting, knowledge, and skill to the healing work, and they require the recipient to spend a lot of time in the traumatic memories without yet perceiving the presence of Jesus with them. These approaches are still effective, but they are less transferrable because many people do not have the necessary gifting, knowledge, and skill necessary to be able to lead these kinds of ministry sessions. And the recipient spends a lot more time in the trauma without Jesus, which is a lot more painful, a lot more draining, and requires a lot more capacity.

In contrast, the Immanuel Approach *starts* the session with helping the recipient to establish an interactive connection with Jesus, and then coaches the recipient to focus on Jesus and interact with Jesus as the primary source of guidance, leadership, and healing interventions for the rest of the session. With the Immanuel Approach, Jesus brings most of the knowledge and skill to the healing endeavor.

- *Jesus inside traumatic memory ASAP:* Furthermore, whenever the recipient is working inside of a traumatic memory, the first thing the facilitator does once the recipient enters the trauma is to help her connect with Jesus *inside* the traumatic memory. So the recipient spends very little time in the trauma without the presence of Jesus right there with her. This piece, in combination with starting with a positive memory and letting Jesus drive right from the beginning, results in a process that is much gentler, much less intimidating, and much less draining.

- *An interactive connection with Jesus is necessary, central, and foundational:* With other emotional healing ministries that I am aware of, the recipient can receive healing for trauma and experience symptom relief without perceiving Jesus’ tangible presence or establishing an interactive connection. For example, with Theophostic, the recipient can find underlying traumatic memories, identify the core lies, and receive truth from God that replaces core lies, all without perceiving Jesus’ presence or establishing an interactive connection. With SOZO, the recipient can go through their various steps for resolving issues and can receive prophetic words from the facilitator, all without perceiving Jesus’ presence or establishing an interactive connection. With deliverance ministries, demonic spirits can be identified, bound, and removed, all without perceiving Jesus’ presence or establishing an interactive connection. With all of these other emotional healing ministries, perceiving Jesus’ tangible presence and establishing an interactive connection is something that *sometimes* occurs. And it is welcomed when it does occur—it is always embraced as a wonderful bonus. But it is incidental, irregular, occasional, peripheral, unpredictable, and *optional*.

In contrast, with the Immanuel Approach *the whole process is organized around an interactive connection with Jesus* – you help the recipient to establish an interactive connection with Jesus at the beginning of the session; you monitor the interactive connection throughout the session; the first thing you do when the recipient connects with a traumatic memory is to help her establish an interactive connection with Jesus inside the memory; whenever the recipient loses her connection you troubleshoot to help her reestablish a connection; and you help the recipient end each session with an interactive connection with Jesus. And even when complex blockages prevent perception and connection early in the process, troubleshooting so that the recipient can eventually perceive Jesus’ tangible presence and experience a living, interactive connection is the most important priority and objective for the long-term plan.

With the Immanuel Approach, perceiving Jesus’ tangible presence and establishing an interactive connection is a *necessary, central, foundational* component that we *deliberately, systematically, consistently* facilitate, as part of the *standard* process. This deliberate, systematic, pervasive focus on an interactive connection with Jesus is one of the clearest and most important differences between the Immanuel Approach and other approaches to emotional healing.

- *Our brains are designed to work best in community:* Compared to any other approaches I am aware of, the Immanuel Approach places more emphasis on coaching the recipient to describe everything that comes into her awareness, *regardless of whether it makes sense, feels important, or is neatly packaged*. There are two whole chapters in the big lion book that discuss this in much more detail, but the very short summary is that this simple intervention helps pull mental content through the parts of the brain that enable us to feel whether or not the content is important and that enable us to recognize how it fits into our personal story. Without this important piece, many *subtle* manifestations of the Lord’s presence, many *subtle* guiding clues, and much subtle content from the Lord are missed.
- *Immanuel Intervention troubleshooting:* Immanuel Interventions – an array of interventions very specifically focused on helping the recipient establish or reestablish an interactive connection with Jesus – are the most important troubleshooting interventions. As far as I am aware, this is unique with the Immanuel Approach.

- *Brain, mind, spirit capacity–Jesus as an exceptional resource:* Brain-mind-spirit capacity is a really important, strategic issue when working with psychological trauma. As explained in detail in chapter three, lack of capacity is a very common, often unrecognized reason for trauma-resolution work to bog down. Other than the Immanuel Approach, there are a few Christian approaches for working with trauma that explicitly recognize and directly address capacity issues.²¹ And as many readers are probably already aware, most mainstream secular therapy modalities for working with trauma explicitly recognize and address capacity issues. The Immanuel Approach also explicitly recognizes and addresses capacity issues, with the new/unique/different piece being that the living, tangible, interactive presence of Jesus provides an *unusual, exceptional* resource for resolving problems with inadequate capacity.²²
- *The pain processing pathway, the source of trauma, and the mechanisms for healing:* Intermediate-advanced Immanuel Approach principles include an understanding of the pain processing pathway, an understanding that the source of psychological trauma = failure to complete all processing tasks, and an understanding that the mechanism for healing = helping the recipient with remedial work to resolve previously unfinished processing tasks. In my experience, understanding these phenomena can be very helpful with intermediate and advanced troubleshooting. As far as I am aware, the Immanuel Approach is the only Christian approach to emotional healing that includes these pieces.
- *Safety nets:* Starting with a positive memory, appreciation, and connection with Jesus establishes a safe “home base” to come back to, and this provides a safety net. If you run into difficulties you don’t know how to handle and need troubleshooting help from Jesus, if the recipient encounters trauma content that is too intense, if the recipient just needs a respite break at any point in the session, or if you are running out of time at the end of the session and the recipient is still in a bad place; you can coach the recipient back to the initial positive memory, appreciation, and connection with Jesus. And an additional safety net for clients using Immanuel Approach tools for “homework” between sessions is: if the recipient does not get a good connection with Jesus in her positive memory, then she does not do trauma work.

As many readers probably recognize, the application for recipients who encounter trauma content that is too intense, the application for recipients who need respite breaks, and the application for recipients who are still in a bad place as you are approaching the end of a session are very similar to safe-place techniques that many mainstream secular trauma therapists use. However, the Immanuel Approach safety net has the additional benefit of the living presence of Jesus to turbo-charge the initial safe-place “home base” that the client returns to. Furthermore, the troubleshooting safety-net piece is unique to the Immanuel Approach, in that the living presence of Jesus can actually provide help with troubleshooting. (The safe-place images/memories used in secular trauma therapies obviously cannot do this.) Finally, the additional safety net that allows clients to safely use the Immanuel Approach for homework between sessions is unique to the Immanuel

²¹ For example, HeartSync with Andrew Miller and Restoration in Christ Ministries with Diane Hawkins.

²² See, for example, the case study presented in the “Eileen, ‘She’s Been Sitting in Jesus’ Lap” subsection in chapter twenty-eight (pages 355-358).

Approach.

And with respect to other explicitly Christian approaches for resolving trauma: Dr. Barabara Lowe’s approach for working with trauma includes a similar safe-place-to-go-back-to safety net.²³ And there may be others. But as far as I am aware, most Christian approaches for resolving trauma do not include any of these safety-net pieces.

- *Use of Immanuel Approach Tools for Trauma Resolution “Homework” Between Sessions:* For recipients who are able to establish a strong connection with Jesus, so that they are able to perceive Jesus’ guidance and receive Jesus’ help throughout the session, the facilitator can be a lay-person with only minimal to moderate knowledge, skill, and experience. This simplicity aspect of the Immanuel Approach, along with the safety nets, makes it possible for recipients to safely do trauma-resolution “homework” between sessions. The recipient can recruit a spouse, friend, family member, or prayer partner to be the facilitator, and they can work through simpler, less intense traumatic memories between sessions. As discussed at length in chapter forty-five, many recipients are eventually able to take care of some of the low hanging fruit by facilitating Immanuel Approach healing for themselves.

Once one or both of these pieces are in place, the therapist/ministry expert can increasingly focus on the more complex, more intense trauma, and leave the simpler, less intense “low-hanging fruit” to the recipients and their lay-facilitator friends and family. This provides dramatic cost savings for the recipients and allows the expert facilitators to care for many more clients. As the reader will realize with a moment’s thought, this dramatic increase in efficiency is especially strategically valuable for the many places in the world where the need for trauma resolution is overwhelming and the supply of therapists/expert ministers is desperately inadequate.²⁴ Furthermore, *everybody* has “small t” trauma that it would be ideal to resolve, but most people cannot afford to pay a professional therapist to do this work, and there are not enough therapists to provide this care even if the average citizen could afford it. However, we could make a huge dent in this “small t” trauma if therapists could just help people get started, and then provide consultation and back-up as recipients do most of their “small t” trauma work with their lay-facilitator friends and family.

Compared to either mainstream secular therapies for trauma or other explicitly Christian approaches for resolving trauma, this option for lay-facilitators, *with minimal to moderate knowledge, skill, and experience*, to safely and effectively provide trauma-healing homework between sessions is unique to the Immanuel Approach.

- *Intimacy with Jesus is the number one priority:* To the best of my knowledge, all other approaches to emotional healing focus on healing trauma and relieving symptoms, and connection with Jesus is unpredictably, occasionally part of the picture. In contrast, with the Immanuel Approach connection with Jesus and intimacy with Jesus is the *primary* objective, and resolution of trauma with its associated symptom relief are wonderful secondary blessings. Furthermore, many of the components of the Immanuel Approach

²³ For a description of Dr. Lowe’s variation of the positive-memory safety net, as a part of her explicitly Christian Heart Journey approach to emotional healing, see Barbara Lowe, *Heart Journey: Healing Through Encounters with Jesus & Psychology* (Cary, NC: Spirit Media, 2023) pages 86-69.

²⁴ In areas of desperate need, small teams of therapists/ministry experts can supervise much larger teams of lay-facilitators.

inherently prioritize connection with Jesus and intimacy with Jesus. This *REALLY* important point is discussed in much greater detail in supplementary Chapter 18b (accessed from the Resources page of the Immanuel Approach website, www.immanuelapproach.com).

D. What about suggestion and false memory when dealing with recovered memories? Some who work with recovered traumatic memories, in their reaction against the false memory movement, lose credibility by denying all memory error concerns. I believe that it is much wiser to non-anxiously acknowledge any legitimate concerns about memory errors, along with careful discussion of the evidence showing that repressed and dissociated memories are real phenomena that contain historical truth. Here is my very short summary regarding the most important points of this more balanced approach:

- There is compelling evidence proving that repressed memories and dissociated memories are real phenomena, and indicating that most recovered memories have a core of historical truth. Therefore, it is very important to *not* dismiss all recovered memories because of the possibility of memory errors.
- Certain suggestive therapy techniques *can* produce memory errors, even including significant false memories.
- To minimize the risk of memory errors, it is very important to *not* suggest specific details regarding traumatic events and to *not* use imagination/guided imagery tools to "search" for traumatic memories.
- In light of legitimate concerns regarding possible memory errors, it is very important to be cautious about making specific accusations on the basis of recovered memories.

For a much more thorough discussion of each of these points, see the essay, "Discerning Truth in Memory."²⁵ Also, the following link will take you to a 30 minute video of me summarizing this content: <https://www.youtube.com/watch?v=j0xVZwu14AQ&feature=youtu.be>

E. What is the Immanuel Approach lifestyle? The second-to-last section in chapter three of the big lion book describes the move from the Immanuel Approach for *emotional healing* to the Immanuel Approach for *life*. The first piece of this expansion is expanding the agenda for Immanuel Approach sessions to include many additional aspects of life, such as capacity building, maturity-skill mentoring, and spending time with Jesus as a friend; as opposed to restricting the agenda to just emotional healing. And the second piece of this expansion is expanding the context for Immanuel Approach interactive connections to everyday life, as opposed to just establishing these interactive connections in the context of special Immanuel Approach sessions. Starting with the Immanuel Approach for *emotional healing*, and then adding these two expansions, is a good beginner's definition of the Immanuel Approach for *life*, or *Immanuel lifestyle*.

However, as you continue on your Immanuel Approach journey, I encourage you to

²⁵Karl D. Lehman, "Discerning Truth in Memory," last modified February 18, 2014; Special Subjects/Advanced Topics section, Resources page, www.immanuelapproach.com.

increasingly embrace a more rigorous version of the Immanuel lifestyle.

Throughout the big lion book and basic training videos, I talk about recalling past positive experiences and deliberately stirring up appreciation as a way to get our relational circuits on-line and warmed up; I talk about how getting our relational circuits on-line and warmed up prepares us to connect with God; I talk about how reconnecting with memories for specific past positive experiences with God provides an especially good starting point for establishing a fresh, current interactive connection with the Lord; I talk about how Jesus – *Immanuel* – God With Us – is *always* with us and wanting to connect with us; and I talk about how we should *always* be able to connect with Jesus' living presence, as long as any hindrances have been identified and resolved. Furthermore, in the big lion book I talk about many troubleshooting principles and tools for identifying and resolving hindrances; I talk about how traumatic memories are an especially important source of hindrances, and I talk about how we can deliberately, systematically build faith that will help us establish good, interactive connections with the Lord. When we integrate these truths into our beliefs, when we are deliberate about practicing these skills, and when we build these behaviors into our *day to day lives as habits*, we get what I call the doctor Lehman, obsessively thorough, take-no-prisoners version of the Immanuel lifestyle.

In my journey with this more rigorous version of the Immanuel lifestyle, building these principles and tools into my day-to-day life has translated into the following practical skills and habits (which have profoundly blessed and progressively transformed my relationship with the Lord):

- Becoming more and more consciously aware of my relational circuits, and especially becoming more aware of when they go off-line.²⁶
- Taking responsibility for getting my relational circuits back on-line when I notice that they are off-line.²⁷
- Deliberately pointing my relational circuits toward the Lord.²⁸
- Regular times of deliberately establishing interactive connection with the Lord, becoming more and more consciously aware of spontaneous connections, and deliberately making more space for spontaneous connections when I notice them.²⁹
- Regular, ongoing troubleshooting to remove hindrances.

²⁶See chapter 37 in the big lion book and chapters 15 and 16 in *Outsmarting Yourself* for discussion of how to become more consciously aware of the status of your relational circuits.

²⁷When you notice that your relational circuits are off-line, you can get them back on by employing one or more of the following interventions: receiving attunement, calming, deliberate appreciation, and strategic humor. Training segment one in this video series and chapter 6 in the big lion book present a thorough discussion of how to use deliberate appreciation for bringing your relational circuits back on-line, and chapters 17 through 23 in *Outsmarting Yourself* provide detailed, practical discussions of the remaining three interventions.

²⁸See chapter 37 in the big lion book for additional comments regarding how to point your relational circuits towards the Lord.

²⁹See chapter 37 in the big lion book for additional discussion regarding how to make more space for spontaneous connections.

- Regular, ongoing work to resolve trauma, as an especially important part of removing hindrances. And,
- Regular, ongoing work to accumulate faith-building experiences and stories.

The ultimate goal of the Immanuel *lifestyle* is getting us to the place where we perceive the Lord's presence, and abide in an interactive connection with Jesus, as our usual, normal, baseline condition as we walk through life each day.³⁰

II. Biblical/Theological Questions

A. Is the Immanuel Approach consistent with and supported by scripture? See the "Foundational General Questions" section (above).

B. Shouldn't we just leave the past behind us, as the apostle Paul advises?

- 2 Corinthians 5:17: "So if anyone is in Christ, there is a new creation: everything old has passed away; see, everything has become new!" (NRSV)
- Philippians 3:13-14: "No, dear brothers and sisters, I am still not all I should be, but I am focusing all my energies on this one thing: Forgetting the past and looking forward to what lies ahead, I strain to reach the end of the race and receive the prize for which God, through Christ Jesus, is calling us to heaven."

Occasionally, when the subject of praying for healing of traumatic memories is being discussed, someone will quote 2 Corinthians 5:17 and Philippians 3:13-14, and then raise objections along the lines of, "Why are we wasting time and energy rummaging around in old painful memories? Doesn't Paul tell us that the old things have passed away? And Doesn't Paul instruct us to leave the past behind as we strain forward toward the new things of God? When painful things from the past come up, it's just satan trying to harass us. Aren't we just playing into his hands when we think about, talk about, and focus on traumatic memories?"

Misunderstanding Paul's intended meaning: First, I believe that these objections are based on a misunderstanding of Paul's intended meaning.

Regarding 2 Corinthians 5:17, the key is that this verse is referring to our spirits, which *are* totally transformed, restored, redeemed, made new, etc. at the moment of salvation. *However*, this does not apply to our minds, which are still full of confusion, deception, unresolved traumas, learned behaviors and habits that are still dysfunctional, etc. When we come to Christ, our spiritual selves are completely made new, yet our minds stay the same unless we choose to renew them. This is why Paul encourages, "Do not be conformed to this world, but be transformed by the renewing of your minds...."³¹ For additional discussion of this point, see

³⁰For a much more thorough discussion of embracing the Immanuel Approach as a way of life, see supplementary chapter 35b, available as a free download from "Immanuel Approach Book (Draft Version)" section, Getting Started page, www.immanuelapproach.com.

³¹Romans 12:2. (NRSV)

Dr. Grant Mullen's *Why do I Feel so Down when My Faith Should Lift Me up?*,³² Dr. Ed Smith's *Beyond Tolerable Recovery*,³³ and Dr. Charles H. Kraft, *Deep Wounds Deep Healing*.³⁴

Regarding Philippians 3:13-14, the key is to read these verses in context. When studied in the wider context of the whole chapter, it is clear that verses thirteen and fourteen are referring to Paul's many assets, credentials, and accomplishments that might give him reason to boast "in the flesh." Paul is referring to the 'prizes' he had won in the race of life, and he is saying that unless he puts those *past* accomplishments/prizes behind him ("considering them as worthless"), and focuses all his efforts on winning the *present* race, he will not make it to the finish line. *It's the accomplishments, victories, and prizes, not the defeats and traumas, we are to forget*, lest focusing on the glory of the past causes us to lose the race we are in now. The Bible never tells us to bury, ignore, or forget our past pain. For additional discussion of this point, see Dr. Charles H. Kraft, *Deep Wounds Deep Healing*,³⁵ and N.T. Wright, *Paul for Everyone: The Prison Letters: Ephesians, Philippians, Colossians, and Philemon*.³⁶

Burying/ignoring/forgetting doesn't work very well: Second, my observation is that trying to bury/ignore/forget past painful experiences just doesn't work out very well. Tens of thousands of hours of careful observation and follow-up during my career as a psychiatrist reveal that unresolved trauma always, eventually, refuses to stay buried/ignored/forgotten. The "just forget about it" plan may seem to work well for a while, but then the buried pain will eventually find its way to the surface. Sometimes it causes physical problems, such as high blood pressure, stomach ulcers, bone deterioration, migraine headaches, or persistent, "mysterious" physical symptoms that defy diagnosis. And sometimes the buried traumatic memories will cause psychological problems such as panic attacks, depression, obsessive compulsive disorder, phobias, attention deficit disorder, and addictions. But buried trauma will always, eventually, leak forward into the present in one way or another. Furthermore, when the underlying trauma is identified and resolved, the secondary problems and symptoms finally go away. A very large pile of carefully documented case studies, in the professional mental health literature and in the writings of emotional healing prayer ministers, document these same patterns.

Some may object that we should not allow our personal experience, or even observations in the professional literature, to influence our understanding of the Bible. I agree that we should be very cautious with respect to letting experience, or even "scientific evidence," influence our use of scripture; but there is also an appropriate place for new information to inform our *interpretation* of specific verses. For example, for more than a thousand years the world church erroneously believed that the sun orbited around the earth, based on a misinterpretation of scripture. But when new information became available in the form of modern astronomy, the church was eventually able to correct its interpretation of scripture in order to embrace a more

³²Grant Mullen, *Why do I Feel so Down when My Faith Should Lift Me up?* (Ventura, CA: Renew Books, 1999), pages 13-26.

³³Ed Smith, *Beyond Tolerable Recovery*, fourth edition (Campbellsville, KY: Family Care Publishing, 2000), pages 203-204.

³⁴Charles H. Kraft, *Deep Wounds Deep Healing* (Ann Arbor, MI: Servant Publications, 1993), pages 187-190.

³⁵ Charles H. Kraft, *Deep Wounds Deep Healing* (Ann Arbor, MI: Servant Publications, 1993), page 16.

³⁶N. T. Wright, *Paul for Everyone: The Prison Letters: Ephesians, Philippians, Colossians, and Philemon* (London: Society for Promoting Christian Knowledge, 2004), pages 121–123.

accurate understanding of the physical world. My perception is that new information has also become available with respect to traumatic memories. Again, many, many, many carefully documented case studies, in the professional mental health literature, in the writings of emotional healing prayer ministers, and in my own clinical experience, reveal both that burying/ignoring/forgetting is a very poor long-term plan, and that deliberately searching out and resolving traumatic memories produces much better results. I think we should consider these observations as part of our discernment as we try to decide which interpretation of these verses is most valid.

Understandable concerns, in light of history: Finally, I will acknowledge that past objections to psychotherapy and/or emotional healing are understandable in light of results that were often mediocre at best. When many patients/recipients spent years in psychotherapy/ministry with little observable benefit (or even seemed to get worse), it makes sense that some observers would look at scriptures such as Philippians 3:13-14 and 2 Corinthians 5:17 and wonder if they were warning us away from psychotherapy and/or emotional healing work. However, as our understanding of trauma, our techniques for resolving trauma, and the end results with respect to healing all steadily improve, I think it's time to let new information inform our understanding of scripture, and to embrace healing for traumatic memories as yet another part of the good news in Jesus. As Francis MacNutt states, the kind of healing for traumatic memories that we see with the Immanuel Approach “. . . is simply the application of Christ's healing power to what we now know of the emotional nature of man.”³⁷

C. What do I say to those who believe that God Only Speaks to Us Through the Bible? Some critics readily agree that the Bible describes many characters who experienced interactive connections with God, and that these biblical characters received specific communication from God; but then these critics go on to argue that God *no longer* communicates with us directly. These critics accurately point out that some people who have claimed to hear from God have obviously been deceived, and they propose that the safest way to avoid this kind of deception and danger is to limit communication from God to only his written words that have been canonized in scripture. They believe that this is actually *God's* plan—they believe that God is aware of the danger of trying to communicate directly with fallible humans, and so now he only communicates with us through his written word in order to protect us from error.

The first part of my response to this concern is to refer the reader to passages such as the following verse in 1 Corinthians, in which Paul clearly implies that the average believer is expected to receive words from God: “Well, my brothers and sisters, let's summarize what I am saying. When you meet, one will sing, another will teach, another will tell some special revelation God has given, one will speak in an unknown language, while another will interpret what is said. But everything that is done must be useful to all and build them up in the Lord.” (1 Cor 14:26)

The second part of my response to this concern is to refer the reader to Dallas Willard's excellent book, *Hearing God*,³⁸ and Mark and Patti Virkler's excellent books, *4 Keys to*

³⁷Francis MacNutt, *Healing* (Notre Dame, IN: Ave Maria Press, 1974), page 190.

³⁸Dallas Willard, *Hearing God: Developing a Conversational Relationship with God*. (Downers Grove, IL: InterVarsity Press, 1999).

Hearing God's Voice and *How to Hear God's Voice*.³⁹ These authors argue that God does still speak to us directly, and the material they present includes strong, sound, compelling biblical exegesis.

D. How do I respond to those who think we are claiming divine revelation equal to scripture? When those of us who are using the Immanuel Approach claim to perceive God's presence, claim to have an interactive connection with God, and claim to hear from God in the context of this interactive connection, some critics misunderstand us to be saying that we are receiving divine revelation *equal to scripture*. And these critics are understandably alarmed by this (mistaken) perception that we claim to be adding to the canon of scripture.

The simple response to this concern is that we in the Immanuel Approach community do *not* claim to be adding to the canon of scripture. We see the revelation in scripture as Revelation with a capital "R," and we fully agree that this scriptural Revelation has much more authority than the revelation with a lower case "r" that we receive in the context of the Immanuel Approach. Among other reasons for its authority, the capital "R" Revelation in scripture has been tested and confirmed by the world church for thousands of years. And the lower case "r" revelation we receive in the context of the Immanuel Approach certainly does not have the benefit of this same confirmation and testing.

I *do* believe that the Immanuel Approach helps us establish interactive connections with the living presence of God, and I *do* believe that God does indeed communicate with us in this context; but I *do not* believe that we are infallible in our ability to accurately perceive what the Lord is saying to us. *Everybody* has trouble with *minor* counterfeit and/or contamination. *Nobody* is able to perceive the Lord's presence or guidance with perfect, one-hundred percent accuracy. Even when we are able to establish a strong, clear interactive connection with the Lord, unconscious avoidance, subtle self-deception, the complexity of the neurological processes involved, physical trauma in our fallen biological brains, psychological trauma in our fallen minds, internal dissociated parts with complex agenda, and deliberate demonic interference can all get in the way of perceiving the Lord's presence and guidance with one-hundred percent accuracy. This is why we need to remain humble with respect to any content we receive in the context of Immanuel Approach sessions—we should always consider the possibility that the details of our perceptions of God's presence and the details of content we perceive to be coming from God could be at least slightly contaminated by deliberate counterfeit, and/or unconscious distortion, and/or simple, honest mistakes.

Furthermore, we are not infallible in our ability to interpret all aspects of the *meaning* of the content we receive from God, and we are not infallible in our judgment regarding how the content we receive from God *applies to the rest of the world*. Again, we receive revelation with a lower case "r," and we need to be very humble with respect to this content that we perceive to be coming from God.

E. What about plain old sin? At one of our seminars, after we finished talking about the Immanuel Approach and our material from *Outsmarting Yourself*, a gentleman in the audience

³⁹Mark and Patti Virkler, *4 Keys to Hearing God's Voice* (Shippensburg, PA: Destiny Image Publishers, 2010); and Mark and Patti Virkler, *How to Hear God's Voice* (Shippensburg, PA: Destiny Image Publishers, 2005).

asked, “So what about plain old sin? Does all this stuff about trauma, triggering, implicit memory, the VLE, central nervous system extrapolation, immaturity, and non-relational mode explain away sin as a cause for hurtful behavior?”

I’m not a theologian, and so can’t provide a systematic theological discussion, but I would like to offer a couple thoughts. First, I perceive that we can sin by choosing to persist in non-relational mode. That is, when the Lord or others in our community are offering attunement, we can make a sinful choice to refuse their attunement by turning away in bitterness and/or self-pity and/or rebellion. And in my experience, this sinful choice to persist in non-relational mode is often associated with choices to engage in various combinations of immature, inconsiderate, selfish, self-centered, judgmental, mean, and negligent behavior.

My second thought is just an observation. When I’m free of triggering and in relational mode, I rarely engage in sinful behavior. That is, when I correctly perceive reality; when my spontaneous, normal experience is to feel relationally connected and to feel the desire for connection; when I experience others as relational beings, I am aware of others’ true hearts, I feel compassionate concern regarding what others are thinking and feeling, I perceive the presence of others as a source of joy, and I’m glad to be with them; when I both want to offer attunement and am able to offer attunement; when I’m flexible and creative even when unexpected circumstances require that I change my plans at the last minute, and little things don’t “get under my skins;” when my spontaneous, normal experience is to perceive others as allies, even in difficult interpersonal situations; when I want to join with them in the collaborative process of exploring the situation together; when I want to understand their perspectives; and when I want to join with them in the collaborative process of working together to find a mutually satisfying solution, I rarely engage in immature, inconsiderate, selfish, self-centered, judgmental, mean, or negligent behavior.

In contrast, when I’m triggered into non-relational mode, I find myself constantly slipping into sinful behavior. That is, when “invisible” traumatic implicit memory feels true in the present and gets directed at and/or blamed on those around me; when my spontaneous experience includes the absence of feeling relationally connected and I don’t even want to be connected; when I don’t perceive others as relational beings, I’m not aware of other’s true hearts, I don’t feel compassionate concern regarding what others are thinking and feeling, I’m not glad to be with them, and I don’t experience their presence as a source of joy; when I don’t want to offer attunement and I’m not able to offer attunement; when I’m rigid and unable to think outside the box; when even small problems irritate me; when I perceive others as adversaries in difficult interpersonal situations; when I tend towards judging, interrogating, and focusing on trying to “fix” the situation, and when I perceive others as resources to be used or problems to be solved, I constantly find myself falling into various combinations of immature, inconsiderate, selfish, self-centered, judgmental, mean, and negligent behavior.

From a very concrete, practical perspective with respect to sin: ongoing work to resolve traumatic memories, so that I am less often triggered, and taking deliberate steps to spend as much time as possible in relational mode, have been two of the most effective interventions for helping myself to sin less.

F. Does the Catholic church consider the Immanuel Approach to be orthodox? Rev. Basil Burns, O.S.B., Phd has prepared a very helpful essay discussing the Catholic Orthodoxy of the Immanuel Approach.

From his introduction: "The purpose of this document is to make some comments regarding the Catholic orthodoxy of the Immanuel Approach Prayer Method....We intend to raise the

comfort level of Catholics with this prayer and also make certain theological points that clarify the use and misuse of this prayer. The primary reasons why such comments are both desirable and necessary is 1) the prayer method is Protestant in its genesis and merits proper integration into the Catholic faith and 2) the prayer method involves certain elements regarding the use of the imagination and the memory that many Catholics may need explained or clarified....Protestants and Catholics have our differences, but the sharing of the heart of Jesus Christ substantially unites us: "And I have other sheep, that are not of this fold; I must bring them also, and they will heed my voice. So there shall be one flock, one shepherd."

The complete document is available as a free download from the "Biblical Basis" section of the Resources page of www.immanuelapproach.com.)

III. Can the Immanuel Approach be used with _____ (fill in the blank)?

A. Can the Immanuel Approach be used with children? One of the exciting things about the Immanuel Approach is that it provides an especially gentle, safe, and effective tool for doing emotional healing work with children. I have received stories from parents, grandparents, emotional healing ministers, mission teams, and child therapists—from across the country and around the world—describing good results.

As described in chapter nine of *The Immanuel Approach: For Emotional Healing and for Life*,⁴⁰ a friend of mine was able to use the Immanuel Approach to release healing for his granddaughter, Emme. As described in chapter two of this same book, widows in Colombia have been using the Immanuel Approach to facilitate healing for psychological trauma in their children, the people that Dr. Wilder trained in Asia have been using the Immanuel Approach to facilitate emotional healing for traumatized children, the Calhouns used the Immanuel Approach to facilitate emotional healing for thirteen-year-old Sarah, and Sarah used the Immanuel Approach to facilitate emotional healing for twelve-year-old Claire. As described in chapter five, the Immanuel Approach enabled three-year-old Zevian to resolve intense, persistent fears about monsters in his closet. As described in chapter twenty-seven, a team I helped train saw beautifully positive results when using the Immanuel Approach in ministering to children who had been rescued from human trafficking. And as described in supplementary chapter 35b, a young missionary was able to use the Immanuel Approach to comfort and care for a young child who's mother was away for several weeks.

As of December 2024, the summary from all the information I have gathered is that the Immanuel Approach is particularly safe and effective when working with children to resolve psychological trauma. And this special safety and effectiveness in working with children makes sense, since helping a child establish an interactive connection with the Lord at the beginning of the session, coaching her to focus on Jesus and to engage directly with Jesus throughout the session, and having the initial positive connection as a safe place she can go back to if she gets stuck would all be expected to contribute to making the Immanuel Approach especially gentle and safe. For all of these reasons, I strongly encourage using the Immanuel Approach when doing emotional healing work with children. And I especially strongly encourage using the Immanuel Approach, with extra time at the beginning "just" hanging out with Jesus in a positive memory place, for children who have had negative experiences with

⁴⁰Karl D. Lehman, *The Immanuel Approach: For Emotional Healing and for Life*, (Evanston, IL: Immanuel Publishing, 2016), pages 117-119.

any other emotional healing tools.

Furthermore, I am now also getting stories from parents who are incorporating the Immanuel Approach into day-to-day family life, such as the story from chapter two in *The Immanuel Approach* about Ian bringing Immanuel into the mix when his four-year-old daughter was having a juice-emergency meltdown. The information I have gathered thus far indicates that even children as young as two-to-three years old can embrace the Immanuel Approach for life. And when they do this, it provides an ideal foundation for routine parent-child interactions (and every other aspect of day-to-day life).

I am hoping to eventually present a much more thorough discussion of using the Immanuel Approach with children. In the meantime, see the essay, “The Immanuel Approach with Children,” for additional thoughts.⁴¹

B. Can the Immanuel Approach be used with non-Christians? This may surprise some readers, but I have seen consistently positive results when using the Immanuel Approach with any non-Christians who are willing to try it. In fact, willingness to try it seems to be the only prerequisite.⁴² When I am talking to someone who is not a Christian about the option of using the Immanuel Approach, I explain exactly what would be involved and then offer an invitation along the lines of, “You don’t have to agree with me, and you don’t have to believe any of this stuff, but would you be willing to just try it? Would you be willing to just try praying with me in this way, invite Jesus to be with you, and then simply describe whatever happens? And when you invite Jesus to be with you, it’s totally okay to include the caveat, ‘If you actually exists and if you’re not a toxic jerk.’”

When I first came up with this plan, I did not know what to expect regarding how well it would work. But I decided to go ahead and try it, and I have been thrilled with the results. In my personal experience, almost every non-Christian who has been willing to “just go ahead and try it” has eventually⁴³ been able to perceive the Lord’s presence and experience some kind of positive interaction with him.

Many others have had similar experiences. For example, when a ministry team I helped train went to India to work with girls who had been rescued from human trafficking, all of the girls in the safe house they visited decided to try the Immanuel Approach. And even though a number of them were Muslims and Hindus, ever single one of the girls experienced profoundly positive interactions with Jesus.⁴⁴

I also have a number of stories in which people were willing to try the Immanuel Approach, even though they were not yet Christians, and then decided to give their lives to the Lord after having powerful, beautiful encounters with Jesus in the context of the emotional healing session. Dr. Wilder’s experience with an Immanuel Approach training seminar he

⁴¹Karl D. Lehman, “The Immanuel Approach with Children,” last modified August 27, 2024, available as free download from the “Special Subjects/Advanced Topics” section on the Resources page of www.immanuelapproach.com.

⁴²Note that “willingness to try it” does not mean going through the motions externally, with no agreement or cooperation internally.

⁴³An initial block of troubleshooting has been necessary in many of these sessions, before the person was able to perceive Jesus’ presence, and then more troubleshooting has sometimes been necessary before the person was able to have positive interactions with him; but almost everybody has *eventually* been able to perceive Jesus’ presence and have a positive interaction with him.

⁴⁴See Karl D. Lehman, *The Immanuel Approach: For Emotional Healing and for Life*, (Evanston, IL: Immanuel Publishing, 2016), pages 365-369, for a much more detailed version of this story.

provided in Sri Lanka provides a good example. Two of the people attending the seminar started the week as non-Christians. However, even though they were not Christians, they were still willing to try the exercises; and by the end of the week, both of them had experienced the Lord's living, personal, Immanuel presence, received healing from him, and decided to follow him.⁴⁵

An experience Charlotte and I had at a seminar we presented in Panama in May of 2009 provides another example. A non-Christian mental health professional found one of the flyers for the seminar and decided to attend. However, even though he was not a Christian, he was still willing to participate in the Immanuel Approach group exercise that we included at the end of the seminar. And he was astonished by the results—he experienced God as a loving father for the first time in his life, he went to several traumatic memories and received profound healing in each of them, and then he ended the exercise by deciding to follow the Lord.⁴⁶

Rhonda and Danny Calhoun's experience with two young teenagers, Sarah and Claire, provides a third example. When Sarah's non-Christian friend asked her for help, Sarah suggested they try Immanuel prayer, and even though her friend was not a Christian she was still willing to try it. After "close encounters of the Jesus kind" she said "Yes!" in response to a direct invitation from the Lord to be part of his family.⁴⁷

And the case study/Immanuel story I share in supplementary chapter 33b of *The Immanuel Approach* provides yet another example. A young agnostic came to me desperately seeking relief from his severe panic attacks and depression. However, even though he did not believe in God, he was still willing to try the Immanuel Approach—purely in hopes that it might help with his panic and depression. And then after encountering the living, tangible, interactive, personal presence of Jesus and experiencing beautiful healing, he ended our last session with asking, "Will you let me be a Christian so that I can keep experiencing Jesus like this?"⁴⁸

Another phenomenon that I have observed with respect to non-Christians is that many of them have chosen to turn away from Jesus in response to traumatic experiences with Christians/Christianity. The good news is that when I identify this history and help them to resolve it, they often embrace Jesus gladly. As I write this, I am working with two people who are having exactly this experience. In a recent Immanuel Approach session with one of these people, he commented spontaneously, "Everything that has felt true about God, for my whole life—that he's angry, that he's judgmental, that he's unhappy with me, . . . [describes many more details, all negative]—it's totally different than what I'm experiencing with the Jesus I'm encountering in these prayer sessions. He's never angry at me; he's totally non-judgmental; he's unconditionally loving; . . . [describes many more details, all positive]." At the end of another recent session, he popped out with, "Wow! This is actually *good* news!"

It is significant to note that Jesus and the early Christians used healing as an important part

⁴⁵See *The Immanuel Approach: For Emotional Healing and for Life*, pages 27 & 28, for a much more detailed version of this story.

⁴⁶See *The Immanuel Approach: For Emotional Healing and for Life*, page 29, for a much more detailed version of this story.

⁴⁷See *The Immanuel Approach: For Emotional Healing and for Life*, pages 29 & 30, for a much more detailed version of this story.

⁴⁸See *The Immanuel Approach: For Emotional Healing and for Life*, supplementary chapter 33b (available as a free download from the "Special Subjects/Advanced Topics" section of the Resources page of www.immanuelapproach.com) for a much more detailed version of this story.

of their evangelistic outreach.⁴⁹ Almost makes you wonder whether we should be more intentional about offering Immanuel Approach to non-believers.

C. Can the Immanuel Approach be used with people with clinical mental illnesses? In the care of people taking psychiatric medications? The very short answer is, “Yes.” My assessment is that the Immanuel Approach is the gentlest, safest, overall best option for emotional healing work with those who have serious mental illnesses. The initial steps of positive memory recall, deliberate appreciation, and connection with Jesus can even be used with people who are intoxicated and/or acutely psychotic. For additional general discussion regarding how to include the Immanuel Approach in the care of people with clinical mental illnesses, see *Mind and Brain: Separate but Integrated*,⁵⁰ and also the following three essays (all available as free downloads from the “Special Subjects/Advanced Topics” section of the Resources page of www.immanuelapproach.com):

“The Place of the Immanuel Approach Emotional Healing In the Treatment of Clinical Disorders.”

“The Immanuel Approach, Mental Illness, and Medication.”

“Mood, Monthly Cycle, and the Immanuel Approach.”

D. Specifically, can the Immanuel Approach be used as part of the treatment for:
(All essays mentioned are available as free downloads from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com.)

Attention Deficit and Hyperactivity disorder?: See the essay, “ADD/ADHD and Immanuel Approach Emotional Healing.”

Autistic spectrum disorders?: See the essay, “Autistic Spectrum, Dismissive Attachment, and the Immanuel Approach.”

Bipolar disorder?: See the essay, “Bipolar Disorder and the Immanuel Approach: General Comments and Frequently Asked Questions.”

Major depression?: See the essay, “Depression & the Immanuel Approach: General

⁴⁹My perception is that *most* of their healing ministry was to non-Christians. I have not reviewed scholarly study on this point, but it seems clear from my “layman’s” review of the New Testament. In some passages it is clear that the persons being healed were not Christians (see, for example, Matt 8:28-34, Matt 15:21-28, Luke 17:11-19, Luke 22:50-51, John 4:46-54, John 5:1-15, John 9:1-38, Acts 3:1-7, Acts 28:7-8). Also, in most of the scenes where Jesus/Apostles healed many sick people in front of crowds of witnesses, the general impression is that these people were not already Christians (see, for example, Matt 4:23-25, Matt 9:35-37, Matt 11:20, Matt 15:29-31, Mark 1:32-34, Mark 1:45, Mark 3:7-12, Mark 6:53-56, Luke 5:15, Luke 6:17-19, Luke 9:37-43, John 6:1-15, Acts 5:15-16, Acts 8:4-8, Acts 28:9-10). The strongest point supporting my impression that most healing ministry was to non-Christians is simply comparing the numbers – thousands and thousands that were healed through Jesus’ ministry compared to the small group of “disciples” at Pentecost.

⁵⁰Karl Lehman, *Mind and Brain: Separate but Integrated* (Evanston, IL: Immanuel Publishing, 2023).

Comments and Frequently Asked Questions.”

Obsessive Compulsive disorder?: See the essay, “Obsessive Compulsive Disorder (OCD) and the Immanuel Approach: General Comments and Frequently Asked Questions.”

Schizophrenia?: See the following two essays: “Psychosis and Psychotic Symptoms: Definitions and Diagnostic Considerations,” and “Schizophrenia and the Immanuel Approach: General Comments and Frequently Asked Questions.”

Traumatic Brain Injury (TBI)?: See the essay, “Traumatic Brain Injury and the Immanuel Approach”

E. Is the Immanuel Approach effective for attachment trauma? It is incredibly difficult to permanently resolve attachment trauma, and most therapies can only manage the symptoms, as opposed to permanently heal these wounds. Fortunately, Jesus seems to know about attachment trauma, and His living presence is able to heal even the deepest of these wounds. The Immanuel Approach is the most effective intervention I am aware of for every form of attachment trauma I am aware of. See Chapter 34 in the big lion book, “Rita, Attachment Trauma, and Immanuel,” for additional discussion of the Immanuel Approach and attachment trauma.

F. Is the Immanuel Approach effective for type A (absence wound) trauma? Type A trauma, or absence-wound trauma, is trauma from the absence of good things that a person needs but doesn’t get. For example, in the case study presented in Chapter 1 of the big lion book, Eileen was traumatized as a child by not getting the love and attention that she needed from her mother.

Just as with attachment trauma, it is incredibly difficult to permanently resolve absence-wound trauma. For example, people who were wounded by the absence of love and attention in childhood will endlessly seek love and attention as adults, in an attempt to fill the hole left by the love and attention they didn’t get as children. However, even when those around them pour huge amounts of love and attention into their lives, the absence wound is usually only temporarily comforted as opposed to permanently resolved. The hole never seems to stay filled—they will feel better for a little while, but then a few hours or a few days later (as soon as the underlying wound gets triggered again), it seems like the hole is empty again. It is possible for a person with an absence wound to work with a therapist and/or her community to receive permanent healing, but it is long and slow and difficult.

However, one of the particularly good things about the Immanuel Approach is that it is particularly effective for healing absence wounds. As described in Eileen’s story from Chapter 1 in the big lion book and Rita’s story from Chapter 34 in the big lion book, if the recipient will allow Jesus to stand in for the person who did not give them what they needed in childhood, Jesus can actually meet them inside of the childhood memories and permanently fill the absence wound holes.

G. Does the Immanuel Approach work with narcissists? I don’t have a lot of experience with narcissism because people with narcissism seldom pursue personal healing and growth. Here are the few thoughts that come to me:

- First, I am repeatedly surprised and grateful for how willing Jesus is to connect with us.

The point being that I'm sure Jesus would be happy to spend time with a narcissist, if the person gives Jesus just this smallest opening. For example, a narcissist might not be interested or willing to work on traumatic memories or look at their areas of dysfunction, but they might be able to experiment with connecting with Jesus in the context of positive memories. And depending on what kinds of blockages may or may not be in the way, they might be able to perceive Jesus' presence and establish an interactive connection.

And I can guarantee that spending time with the living, interactive presence of Jesus will be a good thing for a narcissist, in one way or another. For example, as a narcissist experiences the unconditionally loving presence of Jesus, and experiences that Jesus is *always* glad to be with them, the underlying insecurity and fear of shame that fuels their narcissism might slowly begin to lose power.

- Second, if there are blockages hindering the person from perceiving and/or connecting with Jesus, narcissism would seriously hinder the troubleshooting process because resolving blockages often requires the person to look at areas of woundedness and dysfunction, and a person with narcissism might have a lot of resistance to this.
- Third, I am aware of at least a few situations in which a narcissist was able to participate in Immanuel Approach work and received dramatic benefit. If there is anybody that a narcissist will be able to work with, it is the living, gentle, wise, unconditionally loving, always relational, interactive presence of Jesus.

H. Does the Immanuel Approach work for couple's issues? **See "What about Immanuel Approach for couples?" in the "Working with spouse and/or family and/or friends section below.**

I. Can a person facilitate the Immanuel Approach for themselves/do the Immanuel Approach on their own? **See the answer to this question in the "Miscellaneous general questions" section, below.**

J. Can I use the Immanuel Approach with someone who is suicidal? **See the answer to this question in the "Practical Questions Regarding Facilitating Sessions (Intermediate Level)" section, below.**

K. Can I use the Immanuel Approach with people in jail or prison? Inmates in jails and prisons usually have a lot of trauma, and often also have poor relational maturity skills and low capacity for staying with negative emotions, so this is a challenging population to work with. Nevertheless, my assessment is that almost all recipients who participate with integrity⁵¹ will have a positive experience with the Immanuel Approach if they are willing to persist with a skilled facilitator who is able to provide advanced troubleshooting when this is needed.⁵²

⁵¹By "participating with integrity" I mean that they are making a good-faith effort to cooperate with the process, as opposed to just pretending to cooperate in order to obtain some kind of secondary gain.

⁵²From twenty-five years of my own experience with the Immanuel Approach, combined with reports from colleagues using the Immanuel Approach, my assessment is that 95-99% of recipients have a positive experience with the Immanuel Approach if they are willing to persist with a skilled facilitator. Note: These numbers are my personal estimate from a moderately rigorous review of both

Furthermore, my assessment is that even moderately experienced facilitators should also be able to successfully facilitate for most inmates who want to receive.

For discussion of special considerations that will be helpful when working with inmates, see, “*What Special Considerations Should I Keep in Mind when Working with Someone in Jail or Prison?*” in the “Practical Questions Regarding Facilitating Sessions (Intermediate Level)” section, below.

L. Are there any situations in which the Immanuel Approach does not work? The Immanuel Approach *always* has the potential to work. However, on very rare occasions the recipient will persistently choose to turn away from healing by indulging in bitterness and/or self-pity and/or rebellion. This will block the Immanuel Approach process, and since this blockage is anchored in the person’s persistent free-will choice, it cannot be resolved with any of the usual troubleshooting tools. That being said, even in these cases of persistent, stubborn bitterness and/or self-pity and/or rebellion, a persistent, skillful, strongly-relational facilitator can sometimes (eventually) help the recipient to repent of these choices and turn back to healing. And then the Immanuel Approach will work.

For additional discussion of bitterness and self-pity as blockages to emotional healing, and for discussion of interventions that can sometimes resolve them, see “Judgments and Bitterness as Clutter That Hinders Emotional Healing,” and “Deadly Perils of the Victim Swamp: Bitterness, Self-Pity, Entitlement, and Embellishment.” (Both of these essays are available as free downloads from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com.)

IV. Similarities and differences between the Immanuel Approach and other approaches to emotional healing

A. Could you talk about how other models/methods of inner healing are the same or different from the Immanuel Approach? For example, Restoring the Foundations, Theophostic, Sozo, Elijah House, Etc.?

- There is an entire essay on the www.kclehman.com website talking about Theophostic and the Immanuel Approach.
- There is a whole section of chapter 3 in the big lion book describing the journey from Theophostic to the Immanuel Approach, which includes quite a bit of discussion regarding “What is the same and what is different.”
- There is a whole chapter in the big lion book on “What is genuine Immanuel Approach?” Having the answer to this question clearly focused – what the Immanuel Approach *is* and what it is *not* – helps in comparing the Immanuel Approach to other emotional healing ministries.
- One of the FAQ questions in chapter 40 of the big lion book is: “Isn’t the Immanuel Approach just the same as other approaches to emotional healing, such as Theophostic, or

correspondence from colleagues and sessions I have facilitated. They are not results from systematic research.

Sozo?” The response to this FAQ question provides additional helpful content.

- Finally, the next question, “What is unique/new/different about the Immanuel Approach?” touches very briefly on a number of points that I perceive to be differences between the Immanuel Approach and other approaches to emotional healing.

B. Isn't the Immanuel Approach Really Just the Same as Other Techniques for Connecting with God (Such as Listening Prayer) and Other Approaches to Emotional Healing (Such as Theophostic® or Sozo)? The good news is that there are many spiritual exercises and interventions that can help people to perceive God's presence and connect with God, and there are many techniques and tools for helping people heal traumatic memories. Many people all over the world have been using these various exercises, interventions, techniques, and tools for many years. This is a good thing—it is evidence of God's grace to reach out to us in many different ways. Any exercises and interventions that help people perceive God's presence and connect with God have the same central objective as the Immanuel Approach for life, and any tools and techniques that help people resolve trauma have the same central objective as the Immanuel Approach for emotional healing. However, it is also important to note that every prayer, worship service, devotional exercise, or other intervention that enables a person to perceive and connect with the living presence of God is not necessarily the exact same thing as the Immanuel Approach for life, and every package of tools and techniques that enables a person to heal traumatic memories is not necessarily the exact same thing as the Immanuel Approach for emotional healing. The Immanuel Approach is a very specific set of principles and tools for deliberately, systematically helping people to consistently connect with God and resolve trauma; and the Immanuel Approach is particularly simple, particularly safe, particularly effective, and particularly transferable.

There *are* many other exercises and interventions for connecting with God and many other approaches for emotional healing that do include some of the same pieces that are included in the Immanuel Approach. “*Some*” being the key word. So far, every time someone has said, “Oh, that's what we've already been doing—we've been doing that for years,” it has turned out that they have been using an approach that includes *some* of the same components as the Immanuel Approach, but they have never actually been using what I consider to be the full, genuine Immanuel Approach. There have always been one or more important pieces missing. (For example, no other package of tools and techniques for emotional healing includes the safety net of starting with positive memories, appreciation, and initial connection with Jesus, and then returning to this if the recipient gets in trouble.) And/or there have always been components in their approach that I have deliberately not included in the Immanuel Approach. (For example, several other approaches for emotional healing include guided imagery and/or having the facilitator lead the session with prophetic words of knowledge).

It is important to be aware of these differences because other ministries will miss the blessings from the new Immanuel Approach pieces if they don't even realize that they exist. Also, leaving out some of these new pieces can result in negative experiences, such as disappointment from lack of results, or being re-traumatized by getting stuck in a traumatic memory that gets activated but then cannot be resolved. And if facilitators leave out important components but still (erroneously) call what they are doing the Immanuel Approach, then the negative experiences that can result from leaving out these components *will be wrongly associated with the Immanuel Approach*.

Furthermore, the components that I very deliberately do not include in the Immanuel Approach are associated with a variety of problems, concerns, and disadvantages. For example, if the recipient is using guided imagery, the process of proactively generating images with her own imagination can actually get in the way of receiving content from God. And if the facilitator is leading with prophetic words of knowledge, the session can get into serious trouble if the facilitator mistakes implicit memory from his own unresolved issues for guidance from the Holy Spirit. If facilitators include these components but still (erroneously) call what they are doing the Immanuel Approach, then the problems, concerns, and disadvantages that can come with these other components *will be wrongly associated with the Immanuel Approach*.

So when facilitators *leave out* important components that *should* be included and *bring in* other components that *should not* be included, but they still (erroneously) call what they are doing the Immanuel Approach, we do not just get the direct negative consequences from these negative experiences, problems, concerns, and disadvantages. Unfortunately, we also get an erroneous association between these negative consequences and the Immanuel Approach—we get what I call the *inoculation effect*. As described in chapters 32 and 39, if you inoculate people with a weakened form of an infectious disease, their immune systems will develop a resistance to the disease. And then if they encounter the real, full-strength disease at some point in the future their immune systems will quickly repel it. Similarly, if a person or ministry team or pastor or church board has a negative experience with one of these other techniques that was erroneously called the Immanuel Approach, they will develop a resistance to the genuine Immanuel Approach. And then if someone comes up to them at some point in the future, and says, “Hey, I’ve just discovered a wonderful new approach to emotional healing—it’s called the *Immanuel Approach!*,” those who have been inoculated will have an immediate, involuntary negative response, and will reply with something along the lines of, “No thank you. We already know about that. We tried it and had a bad experience with it.”

Therefore, it is *very* important to recognize that the Immanuel Approach is *not* just the same as other approaches for connecting with God or other approaches for emotional healing. Again, many people have received great blessings through these other approaches, and for this I am grateful. But these other approaches are not the same as the Immanuel approach, and it is important to correctly label the training and/or ministry/therapy you are providing.

To help readers further clarify their thinking regarding similarities and differences, I would like to remind the reader of an especially important similarity and difference with respect to experiencing the tangible presence of Jesus. As described in chapter 39 of the big lion book, with traditional prayer for emotional healing, Theophostic, SOZO, deliverance ministries, and other healing ministries, perceiving Jesus’ tangible presence and establishing an interactive connection is something that *sometimes* occurs. And it is welcomed when it does occur—it is always embraced as a wonderful bonus. But it is incidental, irregular, random, occasional, peripheral, and *optional*. In contrast, with the Immanuel Approach perceiving Jesus’ tangible presence and establishing an interactive connection is *central and foundational*.

For additional discussion of the similarities and differences between the Immanuel Approach, traditional prayer for emotional healing, and Theophostic,[®] see Appendix G and review chapter three. For additional discussion regarding how the Immanuel Approach is unique/new/different, as compared to other techniques for connecting with God and/or other approaches to emotional healing, see “What is Unique/New/Different About Immanuel

Approach” in the “Foundational General Questions” section above. For additional discussion of how to recognize the genuine Immanuel Approach, see “How Can I Tell if I Am Receiving/Facilitating/Teaching the Genuine Immanuel Approach” below and also the section in chapter 39 labeled “How Can I Tell if I Am Receiving/Facilitating/ Teaching the Genuine Immanuel Approach.” And for additional cautions regarding ministries and/or facilitators that claim to be offering the Immanuel Approach but aren’t, see the cautionary tales in chapter 39.

C. *What is unique/new/different about Immanuel Approach?* See “Foundational General Questions” section above.

D. *How do I know if I am receiving/facilitating/teaching genuine Immanuel Approach?*

This question is addressed in much greater detail in chapter 39 in the big lion book. However, for the reader’s convenience, I include here a summary list of the key principles and process components that distinguish the Immanuel Approach (for emotional healing and for life) from other approaches to emotional healing.

I consider the following principles and process components to be new pieces that are necessary for the basic version of the Immanuel Approach:

- Switching the top priority from symptom relief to intimacy with Jesus.
- Deliberate appreciation, in the context of remembering previous positive experiences with the Lord, to prepare for an interactive connection with Jesus.
- Refreshed perception of the Lord’s living presence, and establishment of an interactive connection with him, as the foundation for the rest of the session.
- Engaging directly with Jesus regarding every issue, question, need, and challenge.
- Immanuel Approach troubleshooting.
- Immanuel Interventions.
- The safety net of returning to the initial positive memory and interactive connection.
- Coaching the recipient to describe everything that comes into her awareness, regardless of whether it makes sense or feels important.

I consider the following additional principles and process components to be new pieces that are necessary for the complete, richest, ideal version of the Immanuel Approach:

- Expanding beyond just emotional healing, and moving outside of special sessions.
- Formulating and sharing the Immanuel story.
- The facilitator establishing an interactive connection for herself, and then engaging with the Lord to obtain ongoing help and guidance.
- Faith (in the Lord’s Immanuel presence, in the Lord’s goodness, in the Lord’s

guidance, in the effectiveness of the Immanuel Approach, and in the effectiveness of Immanuel Interventions).

- Key insights, principles, and tools for intermediate and advanced troubleshooting (especially insights, principles, and tools regarding advanced Immanuel-Intervention troubleshooting, relational circuits, attunement, capacity, and the pain-processing pathway).

And I have deliberately excluded the following techniques and interventions from what I consider to be genuine Immanuel Approach sessions:

- Recipients using guided imagery.
- Facilitators using prophetic words of knowledge to guide sessions.

E. Is the Life-Model “Passing the Peace” process the same as the Immanuel Approach? The Pass-the-Peace (PtP) version of the Immanuel Approach, developed by Dr. Jim Wilder and Life Model Works, is so dramatically different from the process that I teach that many cannot even recognize it as the Immanuel Approach. In fact, people in the wider Immanuel Approach community have come to me in varying degrees of confusion and distress, asking why those using the PtP version even refer to it as the Immanuel Approach. Hopefully the explanations below regarding the dramatic differences between the Pass-the-Peace version and my version will be helpful.

1. Dramatically simplified to make it more accessible (easier to teach, easier to use): The Pass the Peace (PtP) version of the Immanuel Approach is dramatically simplified. This makes it more accessible by making it easier to teach and easier to use. This change with the PtP version will be especially beneficial in situations where time for teaching is desperately limited, resources of every kind are desperately limited, and many participants cannot read.

a. Positive memory recall & deliberate appreciation dramatically simplified: The gratitude step in the PtP version is much less complicated than the positive-memory-recall and deliberate-appreciation steps in the Lehman version of IA.

b. No connect-with-God step: The PtP version does not include an explicit connect-with-God step. That is, there is no explicit invitation and prayer to help the recipient perceive and connect – there is no explicit, direct effort to help the recipient perceive God’s tangible, personal presence or establish an interactive connection.

c. No Immanuel intervention troubleshooting: The PtP version does not include any troubleshooting for people who do not spontaneously perceive God’s tangible, personal presence and establish an interactive connection.

d. No teaching or coaching regarding “describe everything”: The PtP version does not include any teaching about how our brains work better in community, or any coaching to “describe everything that comes into your awareness, regardless of whether it makes sense, feels important, or is neatly packaged.”

e. Safety net dramatically simplified: With the PtP version, the safety net consists of helping the recipient get back to “peace island” if they encounter trouble of any kind. And, as mentioned above, the gratitude step in the PtP version is much less complicated than the positive-memory-recall and deliberate-appreciation steps in the Lehman version of IA. Furthermore, peace island (the initial place of gratitude) with the PtP version does not include the additional step of helping the recipient to establish an interactive connection with God in the context of their initial positive memory. So setting up peace island with PtP is much simpler than setting up the primary safety net in the Lehman version.

f. Avoids talking about trauma, avoids deliberate trauma-work: Recipients can sometimes receive healing for trauma if they are already connected to trauma as they go into the PtP process, and if they happen to establish a connection with the Lord that leads to resolution of trauma. But the PtP booklet does not include any teaching about trauma, and the facilitator does not initiate or lead trauma work in any way. In fact, PtP deliberately, explicitly avoids talking about trauma or initiating trauma work of any kind.

g. Minimal teaching regarding theory: The PtP booklet includes minimal teaching about any of the theory behind any of the components of the Immanuel Approach.

2. Dramatically modified to decrease certain risks and make it more accessible to non-Christians: The Pass the Peace (PtP) version of the Immanuel Approach has also been dramatically modified to make it more accessible to non-Christians, and to decrease certain risks that can be especially concerning in certain extreme situations.

a. More accessible to non-Christians: Eliminating steps that explicitly invite God, explicitly facilitate connection with God, and troubleshoot regarding connection with God all make the PtP version easier to use with non-Christians. This was/is one of the major motivations for these major modifications -- PtP was deliberately, explicitly prepared to be able to be used in disaster-care situations anywhere in the world with any population, including non-Christians and even people who might be suspicious/hostile toward Christianity.

b. Decreased risk of unwanted trauma-triggering, trauma overwhelm: The deliberate, explicit avoidance of talking about trauma or proactively initiating any kind of trauma-work decreases the risk that recipients might be triggered to trauma that they do not want to deal with and/or are not yet ready to deal with. This avoidance of talking about trauma or proactively initiating any kind of trauma-work decreases the risk of people being overwhelmed and/or being re-traumatized by traumatic memories getting stirred up. *NOTE: Many facilitators can use the full process that I teach and deliberately avoid all of these problems, but this takes some additional skill, knowledge, and discernment. Some beginners, who are less experienced, less knowledgeable, and less discerning, can (and sometimes do) cause problems related to unwanted triggering.

c. Decreased chance of disclosing information that will put recipient at risk: Not only does PtP not include teaching and coaching regarding “describe whatever comes into your awareness,” it explicitly teaches that the recipient should be as vague as possible in many situations. And this is not just to avoid triggering others with similar trauma, but also to avoid disclosing information that might put the recipient at risk. This is because PtP was

developed (at least in part) for extreme situations in which perpetrators might be present, in which informants who might pass information to perpetrators might be present, in which people who might use sensitive information unwisely might be present, and in which even the translators who are facilitating the work might not be trustworthy.

3. Much less effective: **HOWEVER**, while these dramatic simplifications and modifications make the PtP version more accessible to some (much easier to learn, much simpler to use, minimal stumbling blocks for non-Christians), and safer for some (less risk of stirring up trauma, less chance of sharing information that will put the recipient at risk), it will also be **much less effective** for many.

a. Positive memory recall & deliberate appreciation dramatically simplified: To my assessment, the much simpler PtP gratitude step is also significantly less effective – less effective for getting the recipient’s relational circuits strongly online, less effective as the positive-memory context for connecting with Jesus, and also less effective as the safety-net homebase.

b. No connect-with-God step: While recipients going through the PtP process do sometimes experience an interactive connection with the tangible, personal presence of God, my perception is that this is less consistent and less common, as compared to the Lehman version of IA, which includes a step where the coach proactively, explicitly helps the recipient to perceive the Lord’s presence and establish an interactive connection.

c. No Immanuel intervention troubleshooting: Again, some recipients going through the PtP process do perceive God’s tangible, personal presence and establish an interactive connection. However, if there are blockages hindering this perception and connection, the PtP version does not include any troubleshooting to find and remove these blockages. In contrast, the Lehman version of IA includes a rich troubleshooting toolbox, so that blockages can almost always be identified and resolved, and recipients who initially encounter blockages almost always eventually perceive the Lord’s presence and experience an interactive connection.

d. No teaching or coaching regarding “describe everything”: As mentioned above, the PtP version does not include coaching to “describe everything that comes into your awareness, regardless of whether it makes sense, feels important, or is neatly packaged.” So it loses the benefit of this aspect of how our brains are designed to work best in community – it loses the benefit from the way this piece helps the recipient to catch subtle manifestations of the Lord’s presence and subtle content from the Lord.

e. Safety net dramatically simplified: The PtP version does not include any teaching about safety nets, it’s gratitude step establishes a peace-island home base that is not as strong as the safety-net home base established by the Lehman version positive-memory-recall and deliberate-appreciation steps, and it’s peace island does not deliberately, explicitly include an interactive connection with the Lord. So if the recipient does get into trouble of any kind, the peace island safety-net is not as robust as the safety net established with the Lehman version of the Immanuel Approach.

f. Avoids talking about trauma, avoids deliberate trauma-work: With the PtP version,

recipients can sometimes receive healing for trauma if they are already connected to trauma as they go into the process, or if trauma comes up spontaneously during the process; but the facilitator does not initiate or lead trauma work in any way. In fact, the PtP version deliberately, explicitly avoids talking about trauma or initiating trauma work of any kind. In contrast, with the Lehman version of the Immanuel Approach, which includes a lot of teaching about trauma and steps to address trauma, trauma work is routine and common. If a recipient wants help with resolving trauma, the facilitator can coach them through a well-established process for doing this. If a recipient is persistently avoiding trauma that is disrupting their life, the facilitator can help identify and address this persistent avoidance. And if there are blockages and/or defenses hindering trauma resolution, the facilitator can help to identify and resolve these blockages and/or defenses. Overall, the PtP version of the Immanuel Approach is much less effective for identifying and resolving trauma.

g. Minimal teaching regarding theory: Some people will be more open to the Immanuel Approach, will be able to facilitate more effectively and efficiently, and will be able to receive more effectively and efficiently if they understand the theory behind each of the components of the process. For these people, eliminating almost all teaching regarding theory will significantly reduce openness, effectiveness, and efficiency. (This would certainly be my experience if I were encountering the Immanuel Approach for the first time.)

In the *Pass the Peace* booklet, Dr. Wilder mentions that people are unusually open to God's presence during times of crisis and that God seems to release special grace to people in crisis, and I agree with this assessment – I have observed these same phenomena. And when it is being used in the extreme situations for which it was designed, these beneficial factors for people in crisis will certainly decrease the negative impact of the ways in which PtP is less effective. However, even with these special beneficial factors, there will still be some people for whom the differences between the PtP version of the Immanuel Approach and the Lehman version will mean the difference between the process working or not working.

Furthermore, if those who learn the PtP version end up using it wherever they go, and not just in the extreme situations for which the major modifications were specifically developed, it will be **much** less effective for many recipients. For example, at the Urbana 2022 conference, our estimate from facilitator feedback is that 20 to 40% of the recipients required some amount of troubleshooting to be able to perceive and connect with the Lord and have a positive experience; and my perception is that these recipients would have had disappointing, negative experiences if we had been using the PtP version (that does not include any troubleshooting). Therefore, my request/recommendation is that we use the PtP version only in the extreme situations for which it was designed and where it is truly needed.

4. Inoculation against the Immanuel Approach (potentially huge cost): Mediocre, disappointing outcomes are an immediate disappointment for the specific session that goes poorly, but a much larger, more important concern is inoculation. If recipients try PtP and have a disappointing experience, they will be inoculated against the Immanuel Approach. They will believe that they have tried the Immanuel Approach, and that it was minimally helpful. At any point in the future, these individuals (and any others in their community that witness and/or hear about their disappointing experience) will be uninterested: “We already know about that – we’ve already tried that – it was a disappointment and we’re not interested.”

In light of this additional concern, I *strongly* request/recommend that people in the Immanuel Approach community use the PtP version only in the extreme situations for which it was designed and where it is truly needed.

5. Causing confusion in the wider IA community: The PtP version of the Immanuel Approach is so dramatically different from the IA process that I teach that many cannot even recognize it as the Immanuel Approach. As mentioned above, people in the wider Immanuel Approach community have come to me in varying degrees of confusion and distress, asking why the PtP version is even called the Immanuel Approach. Hopefully these explanations regarding the dramatic differences between the PtP version and the Lehman version will resolve unnecessary confusion and/or distress.

V. Working with spouse and/or family and/or friends

A. What about using the Immanuel Approach with my children (or grandchildren, or nephews/nieces, etc)? See “Can Immanuel Approach be Used with Children?” in the “Can Immanuel Approach be Used with _____ (Fill in the Blank)?” section above.

B. How do you help your kids with healing when you know you’ve done things that have caused emotional damage? How can you be the one to help when you’ve caused the pain?

The good news is that there are families getting good results with the parents facilitating IA sessions for their children, even with content that often includes ways in which the parent-facilitator hurt the child. Here are a few quick thoughts regarding how to help this happen for your family.

- One of the most valuable things you can do is to be persistent in getting your own healing to the point that your children can see the fruit. This is especially true with respect to any triggered patterns that contributed to the harm to your children. You want your children to know that you are working on your own healing, and you want them to be able to *see* meaningful change with respect to the patterns in your behavior/triggering that hurt them. Your children will be much more open to anything you say about Immanuel Approach healing, and anything you offer with respect to healing for them, if they know you are getting your own healing and they can actually see observable, lasting positive changes that are accumulating steadily over time.

First, it will be meaningful to your kids that you care enough about these hurtful behaviors that you are taking responsibility to resolve them. Second, they will feel more emotionally safe with you as they see you becoming healthier and stronger. Third, seeing the process working for you, *with observable, lasting, positive changes that are accumulating steadily over time*, will increase their faith/hope that it might also work for them.

Finally, there is a modeling component that is powerfully helpful. With respect to the right-hemisphere components of your kid’s emotional-maturity-skills and capacity, it will be very helpful for them to see you leading the way (modeling) with respect to the courageous, vulnerable work of looking at, and getting healing for, emotional wounds.

- Get healing for any pain and triggers you carry with respect to hurting your children. For example, it will really get in the way if your pain and shame around hurting your children

causes you to have a triggered, pressured need to “help” them so that you will be able to feel better.

- Apologize, with your relational circuits on, no triggering, and no excuses. If you cannot do this, keep going back to your own healing until you can. Note: if you are *not* triggered and your relational circuits *are* on line, it will be surprisingly easy to offer thorough, clean, heartfelt apologies with no excuses or justifications mixed in; and if you *are* triggered and your relational circuits are *not* on line, it will be incredibly difficult (impossible?) to offer thorough, clean, heartfelt apologies that will feel good to your children.
- When you offer to facilitate Immanuel Approach healing, describe exactly what you are offering/suggesting, and then ask if they would like to try it. (If you have already been sharing, as appropriate, about your own healing journey, they will already know a lot about the Immanuel Approach and this last step will be easy and natural.) You can also suggest that they might work with someone else, if that would be more comfortable. And then give them the space to say “no” if they don’t feel comfortable with this for any reason. Again, if you have been sharing about your own healing journey (as appropriate), and if they can see lasting positive changes in your life, they will be more open to anything you have to say and anything you offer/suggest with respect to their healing.

Again, I know of families that are getting excellent results with the parents facilitating IA sessions for their children, even with content that often includes ways in which the parent-facilitator hurt the child. To my assessment, a big part of why these families are doing so well is that the parents in question have gotten a lot of their own healing, so that they are not feeling defensive or triggered regarding ways in which their own wounds, blind spots, weaknesses, sins, etc. have hurt their children. These children have also *experienced* dramatic lasting positive changes in their parents, and they have watched their parents lead the way with respect to emotional healing.

C. What about Immanuel Approach for couples? At some point I hope to address this very important topic much more thoroughly; but for right now, here are some key pieces in my approach to working with couples:

- *Learn to recognize non-relational mode:* I challenge/inspire/invite/implore/require both partners to read chapters fifteen and sixteen in *Outsmarting Yourself*, and then help them to learn the maturity skill of recognizing when their relational circuits go off.
- *Learn to get relational circuits back online:* I challenge/inspire/invite/implore/ require both partners to read chapters eighteen through twenty-two in *Outsmarting Yourself*, and then help them to build the habit of using the tools in these chapters to get their relational circuits back on. (Getting one’s relational circuits back online *dramatically* decreases the short-term cost of being triggered.)
- *Understand trauma, triggered implicit memory, and the VLE:* I challenge/inspire/invite/implore/require both partners to read chapters one through six in *Outsmarting Yourself*, so that they can understand how trauma, triggered implicit memory, and the Verbal Logical Explainer (VLE) combine to produce LOTS of relationship disruption when one or both of them get triggered. (Implicit memory content from old

trauma slides forward and feels true in the present, and their VLE convinces them that the thoughts, emotions, and perceptions from the old trauma are actually being caused by their spouse in the present.)

- *Immanuel Approach healing work to progressively decrease the trigger burden:* I challenge/inspire/invite/implore/require both partners to do Immanuel Approach healing work in order to shovel away at the traumas that are behind the triggered reactions that are disrupting their marriage. Sometimes they need to do this work separately (if they get too triggered and/or feel too unsafe with the other person in the room), but sometimes I do this with both partners in the room. It has often been a powerfully bonding, trust-building, compassion-building experience for each of the spouses to see the other go to the underlying trauma—seeing their partner in the childhood memory that is underneath the difficult/irritating/painful behavior in the present usually brings compassion and understanding.
- *The Immanuel Approach and relational circuits in conflict resolution sessions:* Possibly the biggest reason that many couples’ sessions go poorly is that both partners get triggered in the process of trying to work with some point of conflict. They both get triggered as they are talking about the point of conflict, and then they try to resolve the conflict while both are in non-relational mode, while both have “invisible” implicit memory content distorting their perceptions and clouding their discernment, while both have decreased capacity, and while both have impaired maturity skills. They hammer away at each other with relational circuits off line, distorted perceptions, clouded discernment, decreased capacity, and impaired maturity skills.

If I am doing a couples session and this scenario unfolds, I call a timeout and describe what I am observing, especially noting specific indicators that both of them have lost access to their relational circuits. And with the foundation from the first four points above already in place, we then pursue one of following two options: 1) I coach each to go to a positive memory, stir up appreciation, and connect with Jesus. And then, with relational circuits back online, we come back to the point of conflict. Or, 2) I coach each partner through a piece of IA healing work, where each can watch the other go with Jesus to the underlying pain that was contributing to the point of conflict. And then we come back to the point of conflict with relational circuits back online, compassion on both sides, and at least one piece of contributing trigger resolved on each side. Option two especially yields consistently good results.

- *Using the Immanuel Approach to facilitate healing for each other:* This is not always possible (depending on many variables), but some couples are able to facilitate Immanuel Approach healing for each other. For couples who are able to do this, it is usually a powerful positive bonding experience; and as they progressively dump out trauma and triggers on both sides, the overall level of joy and health in their marriage and family steadily increases. Note: Most couples are not able to facilitate healing for each other regarding issues for which the other is the trigger; but many couples *are* able to facilitate regular, beautiful healing for many issues that are *not* directly involved with conflict between them.

VI. Practical questions regarding facilitating sessions (basic level)

A. How can you tell if the recipient is perceiving and interacting with the genuine presence of Jesus, or whether she is just making things up with her own mind? And how do you discern when the recipient is perceiving and engaging with some other presence that is not actually Jesus? (Basic-level comments): This is a really common, important question, and facilitators tend to be especially concerned about this issue as they are first learning about the Immanuel Approach.

- One important, encouraging point is that this issue usually turns out to be *much* less of a problem than most people anticipate.
- Another important, encouraging point to make is that we have one particular diagnostic indicator that is *one-hundred percent reliable, when followed over time*. If the recipient appears to be perceiving and interacting with Jesus *and she demonstrates objective, observable, lasting positive changes that accumulate steadily over time*, you can be confident that she is, indeed, engaging with the genuine presence of Jesus. In contrast, even if the recipient reports that she is perceiving the presence of Jesus, and describes all kinds beautiful, dramatic interactions with Him, if she does NOT demonstrate objective, observable, lasting positive changes that accumulate over time, you will know that she is NOT actually engaging with the genuine presence of Jesus – you will know that significant contamination and/or counterfeit is hindering the process.

See chapter 31 in the big lion book for a thorough discussion of how to identify and resolved basic-level contamination and counterfeit phenomena.

B. How much time should I plan on for ongoing sessions?: With people that I see on an ongoing basis, the right session length usually becomes clear after a handful of sessions. With most regular clients, we figure out how to work together most efficiently and settle into 60 minute sessions, even for intermediate-level work.

A few regular clients with intermediate-advanced work have 90 minute sessions. And with a handful of clients with really complex troubleshooting, we figured out that we got much better results if we had fewer sessions but went long so that we would be able to get through all of the troubleshooting and to the point of finishing at least one piece of healing for most sessions. (two hour sessions, or sometimes even more).

A practical challenge is that insurance reimbursement is simplest with 60 minute sessions. Getting insurance reimbursement for sessions longer than 60 minutes is often difficult. Clients usually need to pay out-of-pocket for time past 60 minutes.

C. What about safety-net memories with tiny splinters? What should the facilitator do if she is helping the recipient to set up the safety net and the recipient describes a beautiful positive memory, but the memory includes a tiny splinter?

For example, I got an email from a trainer describing the following scenario: One of the recipients in a training practice pod had a beautiful positive memory in which she hiked up a mountain trail to a breathtakingly beautiful waterfall, and she easily perceived Jesus' presence and established a good connection with Him in this memory. But the memory had a tiny splinter. She was hiking with her sister, who was physically incapable of getting all the way to the top of the trail, and she had some brief, mild sadness about needing to leave her sister at an especially steep spot before hiking the last little bit to the waterfall.

The trainer wanted to know whether it would be ok to use this memory for the safety net, or whether the facilitator should coach the recipient to find another positive memory with absolutely no splinter component. Here are my thoughts:

- If you deliberately look for them, you will be able to find a splinter or two in almost every positive memory. So the real question in most situations is actually, "Are there any splinters that are significant enough that they might hijack the positive memory if the safety net needed to be deployed?" Another way to ask this is, "If we needed to use this memory as a safety net, is the splinter small enough and does the recipient have enough discipline/maturity skill to be able to stay with the positive content and not allow the splinter to derail/hijack the safety net intervention." In my own work, I am aware of small splinters in most (all?) of my positive memories, especially if I let weak associations lead me from aspects of the positive memory to painful content in other memories. But it is usually very clear to me that I would be able to stay focused on the positive content, and deliberately direct my focus away from the small splinters, if I needed to use the positive memories for safety nets.
- If you know the recipient fairly well and know that they have pretty good judgement and self-awareness, you can include them in the discernment: "I'm noticing that there is a little sadness about your sister not being able to make it all the way to the waterfall. If we needed to use this memory for the safety-net intervention, would you be able to stay focused on the positive content? Or does the negative piece feel powerful enough that it might derail the safety-net intervention? Also, I want to check to make sure this little splinter doesn't have a big brother laying right next to it - is this sadness about your sister not being able to make it to the waterfall closely associated with any much larger painful experiences?"
- If I were the recipient in the scenario described above, I would definitely be fine with the positive memory of hiking to the waterfall.
- If in doubt (for example, you are concerned that the negative component is pretty strong and/or you are concerned about the recipient's discernment, self-awareness, and mental discipline/ability to focus on the positive), help them find another positive memory, with no visible splinters (or only very tiny splinters).

C. How does one discern the best agenda for an IA session? (Basic-level comments): Start with "just ask Jesus": The easiest way to identify the agenda for an IA session is to help the recipient establish their connection with Jesus in the initial positive memory, and then just coach them to ask Jesus, "What do You want to do today?" This is the option that I suggest beginners start with. And with some recipients, this is all they ever need. If the recipient is able to establish a good connection and perceives guidance that is adequately clear, and if observation over time confirms that the guidance is good, you can just continue with this very simple, straightforward option.

See "Practical questions regarding facilitating sessions (intermediate level), below, for intermediate-level comments regarding how to discern the best agenda for an IA session.

D. What about People Who Have not yet Had an Experience with Jesus' Tangible Presence, so that They Don't Have an Initial Positive Jesus-Memory to Start with? As described in chapter six of the big lion book (page 99), memories of past positive connections with God are

ideal for the initial steps of positive memory recall, deliberate appreciation, and establishing an interactive connection *because of the way in which relationships are memory-mapped*. However, if the recipient has not yet had positive experiences of perceiving God's presence and connecting with the Lord, then she can use a memory of some other special event. For example, a memory of a particularly beautiful experience with one of her children, a favorite family Christmas memory, a memory of an especially positive vacation with friends, or a memory of thoroughly enjoying her favorite meal. In fact, many people have had their first experience of perceiving Jesus' tangible presence and establishing an interactive connection with him while going through the initial steps of the Immanuel Approach process with non-God positive memories.⁵³

E. What do you do when the recipient is so mad at Jesus that they don't want to work with Him, and so are not allowing the healing process to move forward? This scenario is actually fairly common, and is discussed in detail in chapter thirty of the big lion book (pages 381-392). For the reader's convenience, I include here a few sample thoughts from the more detailed discussion.

- Intense anger toward the Lord can often prevent the recipient from even perceiving His presence. Not only is the person so angry that they don't want to work with the Lord or talk to the Lord, but they are so angry that they don't even want to allow Him to be tangibly present. In these scenarios, you need to address the blocking anger before the person is even able to perceive Jesus' presence.
- As with most other blockages, blocking anger can often be resolved with very basic interventions, such as simply helping the person to focus and get words for their anger, and then helping them to tell Jesus about their anger and ask Him for help.
- However, you will occasionally encounter blocking anger that is particularly intense, particularly persistent, and that requires more advanced Immanuel Intervention troubleshooting. In these scenarios, I find that it is important to work *in the context of the specific memories that are the source of the person's anger*.
- Once the recipient has identified the specific memory-anchors for their anger, and they are "inside" one of the memory-anchors, I find that I can usually attune to the recipient in the place they are angry, validate the pain underneath their anger, and then invite/coax/negotiate with them to come up with an acceptable plan – *specific conditions that feel acceptable to them* – for allowing the Lord to be present. For example, "Would you be willing to allow Jesus to be present with you in this memory if the agreement is that you can be angry, you can say anything you want, and Jesus will agree to listen to everything you have to say? This is your chance to be heard – this is your chance to tell Him how angry you are about ____ (fill in the blank)! So would it be okay for Him to be present if He agrees to just listen?"
- When I'm working with this kind of intense blocking anger, I find that the recipient often also has an associated blocking fear that there will be negative consequences of some kind

⁵³For additional discussion of how to work with people who have not yet had a positive experience with perceiving and connecting with God, see chapter six (pages 102-104).

if they allow Jesus to be present and express their anger towards Him. For example, the recipient is often afraid that Jesus will be angry at them and/or punish them in some way and/or cut them off relationally if they really let themselves express their anger towards Him.

- This blocking fear can often be resolved with very basic interventions, such as simply helping the person to focus and get words for their fear, and then helping them to tell Jesus about their fear and ask Him for help. And for the scenarios in which the blocking fear is particularly intense and persistent, and requires intermediate-advanced interventions, I use similar interventions as just described for anger. For example, I invite/coax/negotiate with the recipient to come up with an acceptable plan – *specific conditions that feel safe to them* – for allowing the Lord to be present. (See pages 381-385 in the big lion book for more details regarding how to address difficult blocking fears.)
- Once the person becomes willing to allow Jesus to be with them in one of the specific memories anchoring their anger, and once they can perceive His presence with them there, I help them to get words for their anger and then coach them to engage directly with Jesus.
- Note: *it is very important that they talk directly to Jesus, and pay attention to His responses*, as they engage with Him regarding their anger. My observation is that recipients receive very little benefit if they just spew their anger into the air (even with Jesus standing beside them as an observer). In fact, they just refresh and rehearse their anger. However, if they *stay focused on Jesus*, if they *talk directly to Jesus* as they express their anger, and if they *constantly pay attention to Jesus’ responses* as they engage with Him, ***then something good happens.***
- I usually coach with something along the lines of, “You can be as angry as you want to, and you can *express* your anger in any way you want to (as long as you don’t throw furniture in my office), *but I ask that you express your anger directly to Jesus, and that you continue to focus on him and notice his responses as you’re expressing your anger.*” And then, as they’re expressing their anger, I periodically check in to make sure they are continuing to focus on Jesus, and I ask them to observe and report regarding how he’s responding.

Again, see chapter thirty (pages 381-392) for the complete discussion of this common, important blockage.

F. When should I take responsibility for leading the session? How much direction should I provide? **See the next question**

G. Sometimes facilitators seem very directive, rather than letting Jesus lead the session. They take the place of Jesus and speak for Him. Are there precautions to make sure one doesn’t move into control and manipulation? This is one of my biggest challenges when training/coaching mental health professionals and those with lots of experience in ministry. They keep jumping back into the driver’s seat, to lead the session in the same ways they usually lead therapy and/or other approaches to ministry. They have spent many years learning and practicing a variety of principles, techniques, skills, and tools, and it is very easy (and natural, and common) to slip back into familiar patterns of using these familiar principles, techniques, skills and tools to lead the healing work.

NOTE that many of these principles, techniques, skills, and tools can still be applied, but in new ways in the role of serving as Jesus' assistant, and in coaching the recipient to focus on Jesus and interact directly with Jesus.

Furthermore, the facilitator will need to use many of these old principles, techniques, skills, and tools for *intermediate-advanced* work, when she will need to lead the process during blocks of time in which the recipient does not have a good connection with Jesus.

Finally, this issue is so common and so important that an entire chapter of the big lion book has been dedicated to addressing it (chapter 28: Let Jesus Drive (with Respect to Non-process Aspects of the Session)). If you are encountering situations in which the facilitator seems to be taking over for Jesus, or if you are concerned about this in your own work as a facilitator, I would encourage you to look at the material in this chapter. For the readers convenience, I will summarize the main points here:

- It is important to differentiate between direction with respect to the Immanuel approach *process* and direction with respect to *non-process* aspects of the session (e.g., timing, pacing/intensity, specific content, and healing interventions).
- With respect to the *process*, it is important for the facilitator to provide the structure for the Immanuel approach by providing lots of direction.
- With respect to all *non-process* aspects, let Jesus drive as much as possible.

H. What do I do when I get triggered during a session? Anyone who regularly facilitates Immanuel Approach sessions will occasionally get triggered during a session. And getting triggered will dramatically impair your ability to facilitate effectively. So this is an important question.

- *Recognize that you are triggered:* Just recognizing that you are triggered is always helpful. Sometimes just this piece can help you shift back into your adult core self, if you are partially blended with a child memory place as part of the triggering. And recognizing that you are triggered will always help you move towards being less blended with any child memory place that has been triggered forward. (This is another good reason to practice the maturity skill of noticing when you get triggered. See chapters eight through sixteen in *Outsmarting Yourself* for a detailed discussion of how to learn and practice this skill.)
- *Take a few deep breaths:* Taking a deep breath, exhaling slowly, and repeating this several times will help to calm your brain and body, which will decrease the intensity of your triggering and help bring your relational circuits back on line (or at least move your brain in the direction of bringing your relational circuits back on line).
- *Talk to Jesus, receive His attunement:* In my own experience, the piece that helps the most is to take a minute (silently in my head) to talk directly to Jesus about the whole situation. "Hey Lord, I feel like I'm a bit triggered here. I'm think I'm maybe feeling some of the 'I don't know what to do,' helplessness from when I couldn't read because of my dyslexia. Help me to feel your presence with me in this memory place." To the extent I feel that Jesus is with me, hearing me, and attuning to me, it really helps reduce the triggering and bring my relational circuits back on.

- *If necessary, use the safety net:* All of the above will usually reduce the intensity of the triggering quite a bit, and help to bring your relational circuits back online, both of which will dramatically reduce the extent to which the triggering impairs you as the facilitator. However, if your triggering continues with sufficient intensity that you are unable to continue as an effective facilitator, then use the safety net. Coach the recipient back to her positive memory and initial connection with Jesus, and then close the session.
- *Resolve underlying trauma:* All of the above is the first half of the plan for how to deal with getting triggered as you are facilitating a session. The second half of the plan is to find and resolve the underlying trauma.

I. How do you recover when you are failing as a facilitator and the session has already turned into a big mess? I'm afraid to start in case this happens and I won't know what to do. If you are facilitating a session and “it turns into a big mess,” you are probably triggered. So the first thing you should do is to check this possibility. (Again, chapters eight through sixteen in *Outsmarting Yourself* provide a detailed discussion of how to recognize when you are triggered.) If you *are* triggered, then take the steps just outlined in the immediately previous FAQ (*What do I do when I get triggered during a session?*)

If the session has “turned into a big mess” and you are not triggered, then just deploy the safety net (that is, help the recipient get back to her positive memory and initial connection with Jesus). And then close the session.

After you have closed the session with the recipient back at home base, I would encourage you to:

- Get a consultation and/or refer the person to someone more experienced.
- Get Immanuel Approach healing for any of your own triggering related to the session.
- Keep learning and growing in your Immanuel Approach knowledge and skill, and then get back in the ring (with the same person, if he is willing, or with other recipients with similar concerns).

Finally, I would encourage you to get Immanuel Approach healing for yourself as soon as is convenient, regarding any triggered component of this fear that is preventing you from getting started – this fear about “failing as a facilitator,” causing an Immanuel Approach session “to turn into a big mess,” and then “not knowing what to do.”

VII. Practical questions regarding facilitating sessions (intermediate)

A. How can you tell if the recipient is perceiving and interacting with the genuine presence of Jesus, or whether she is just making things up with her own mind? And how do you discern when the recipient is perceiving and engaging with some other presence that is not actually Jesus? (Intermediate-advanced level comments) This is a really important question, since the recipient’s unconscious mind and/or internal parts and/or demonic spirits will sometimes contaminate the presentation of Jesus, or even produce a “counterfeit” Jesus that the recipient can mistake for the real Jesus. As mentioned above, the most important basic-level answer is that this issue usually turns out to be much less of a problem than most people

anticipate. That being said, this is still an important question. Chapters 32 and 33 in the big lion book present thorough discussions of how to identify and resolve intermediate-level and advanced-level contamination and counterfeit phenomena (respectively). To give you an idea of the kind of intermediate-advanced material that is available, I have included a few sample points from chapters 32 and 33:

- Both internal parts and demonic spirits seem to have learned that one of the most powerful ways to disrupt a person’s Immanuel connection and Immanuel healing journey is to contaminate or counterfeit the presence of Jesus so that the recipient perceives “Jesus” to be doing something disturbing, confusing, or inappropriate. As long as the recipient thinks that the disturbing/confusing/inappropriate content is really coming from Jesus, they will be profoundly disturbed and unable to continue with the Immanuel Approach process. This is surprisingly common, and I have seen it many times.
- One piece of good news is that demonic spirits tend to do very poorly with respect to impersonating Jesus, so their attempts at contaminating or counterfeiting the presence of Jesus are usually pretty easy to spot. More good news is that there is a simple test that has been 100% accurate so far in my experience. I call it the “First-John” test (since it comes from 1 John 4:2-3), and it is described in the essay “Distinguishing Between Demonic Spirits and Internal Parts.”⁵⁴ Here’s the very short summary: If the presence can say ‘Jesus Christ is the Son of God and came in the flesh’ then it is either Jesus or an internal part. Demons simply cannot do this.
- When the recipient encounters a presence that does not seem to be life-giving (and especially if we work with it for a while, and the whole picture continues to seem NOT life-giving), I try the First-John test. And then if the presence can pass the First-John test, I use the direct-eye-contact technique⁵⁵ to work with the internal part(s). Whenever we discover that internal parts are producing a counterfeit Jesus, we can always eventually figure out why they are doing what they are doing, and then help them engage directly with the real presence of Jesus to resolve the reasons they are producing a counterfeit.

B. *How much time should I plan on for ongoing ministry sessions?* See the same/parallel question in the “Practical Questions Regarding Facilitating Sessions (Basic Level) above.

C. *How does one discern the best agenda for an IA session? (Intermediate-level comments)*

1. Just ask Jesus: As mentioned above, the easiest way to identify the agenda for an IA session is to help the recipient establish their connection with Jesus in the initial positive memory, and then just coach them to ask Jesus, "What do You want to do today?" This is the option that I suggest beginners start with. And with some recipients, this is all they ever need. If the recipient is able to establish a good connection and perceives guidance that is adequately clear, and if observation over time confirms that the guidance is good, you can

⁵⁴ Available as a free download from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com.

⁵⁵For information regarding the direct-eye-contact technique, see “The Direct-Eye-Contact Technique for Engaging with Internal Parts,” available as a free download from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com.

just continue with this very simple, straightforward option. Unfortunately, this simplest, most straightforward option does not always provide the best guidance. As discussed below, we don't like pain, and most of us will subtly (or not so subtly) lean away from difficult/stressful/unpleasant issues. This avoidance can sometimes get in the way to the point that "Just ask Jesus" is not adequate. For example, I have encountered recipients who had triggers that were severely disrupting their marriages, parenting, and other important areas of their lives, but with "Just ask Jesus" they never perceived Jesus to be guiding them to work on these obviously important triggers. Furthermore, many recipients will have occasional sessions in which they are not able to get an initial connection that is strong enough to provide guidance that is clear enough.

Therefore, it is helpful to be aware of additional considerations that can help us with discerning IA session agenda. Also, Jesus seems to be aware of these other considerations. As described below, He often provides guidance regarding agenda by directing the recipient's attention to these other sources of helpful information.

2. Is something already stirred up?: If the recipient has gotten triggered shortly before the session, and the issue is still stirred up right at the time of the session, this can be an important consideration. The key is that the underlying trauma is already activated. It is closer to the surface, and therefore much easier to access and work with. For those of us who usually have trouble finding and connecting with old trauma, this provides a window of opportunity. And this point is especially important if the memories that are stirred up are ones that the recipient usually has an especially hard time connecting with.

For example, I have certain triggered thoughts and emotions that very directly interfere with my connection with Jesus, and they are rooted in early memories that are strongly defended. It is usually very difficult for me to get to these memories. In fact, I am almost never able to work with these especially strategic memory-anchored blockages unless I am intensely triggered. Furthermore, as the Lord has helped me to resolve more and more of the underlying nest of related memories, it has become harder and harder to trigger the remaining splinters. So when I bump into a trigger that is large enough to stir up this specific content, I have a rare, precious window of opportunity. If I am so fortunate as to bump into one of these triggers shortly before an Immanuel session, I assume that this is what I should work on unless I receive clear, specific guidance to the contrary.

3. Recurrent thoughts: The Holy Spirit often works in the recipient's heart between IA sessions, preparing them for the next session. One of the most common ways in which the Holy Spirit does this is to repeatedly bring a particular question/issue/trigger/potential target into the recipient's mind during the days or weeks prior to the session. And it is helpful for the recipient and facilitator to be aware of this phenomena, so that they can more easily notice it when it occurs and recognize it for what it is.

4. Recurrent triggers: If certain triggers have been getting stirred up repeatedly during the weeks leading up to an IA session, the underlying traumatic memories are probably closer to the surface, and are thereby strategic targets due to being especially easy to access. And/or the underlying trauma are particularly associated with the recipient's current activities, and are thereby strategic targets due to their potential negative effects on said current activities. And/or the underlying memories are being repeatedly triggered because they are associated with many different aspects of the recipients life, and are thereby strategic targets due to the wide-ranging negative effects that they have most certainly

already been producing.

5. Practical factors with respect to strategy/priority: God gave us brains and wants us to use them. I think it is wise stewardship to consider practical, logical factors with respect to priority/strategy. For example, if I have a particular trigger that gets stirred by one of my colleagues, and I need to have an important meeting with this person in a couple of weeks, it seems strategic to prioritize this target in any IA work I might do between now and then.

List of thematic, ongoing issues: Some recipients (such as myself) have a cumulative list of potential targets for IA sessions - a list of issues that have been identified over time, that are anchored in many different memories (thematic), and that are not yet fully resolved. This list can serve as a "plan B" that is always available. If one or more of the other considerations discussed here do not provide a clear candidate, you can look at your list and just make your best judgement regarding what would be most strategic. And then submit this tentative agenda to Jesus, as described below.

6. Jesus knows about these other considerations: As mentioned above, Jesus seems to know all about these considerations for discerning the agenda for IA sessions, and often provides guidance by directing the recipient's attention to one or more of these points. For example, when I coach recipients to ask Jesus, "What should we do today?" they will often respond with, "Jesus is reminding me that I've been stirred up all day about how my boss criticizes me - maybe I should work on that." Or, "Jesus is directing my attention to how a particular issue has been coming to me repeatedly in my quiet times this past week. I get the sense that this has been the Holy Spirit, and that this issue is what we should focus on today." Or, "Jesus is reminding me of one of the issues on my list. I haven't thought about it for a while, but He's bringing it to mind and I'm realizing that it's affecting my marriage more than I had realized. I think maybe this is what we should work on." Or, "Jesus seems to be directing my attention to the way in which I've been getting triggered by one of my co-workers this past week, and I'm just remembering that I need to start collaborating with this co-working on an important project next month. It would be really strategic if I could get rid of this trigger before we have to start working together."

7. Recipient comes in with tentative agenda: Recipients will sometimes come in with a tentative agenda. For example, the recipient might walk in and say, "I'm really stirred up about an interaction I had with one of my friends a few days ago, and I think maybe this is what I should work on," or maybe, "A smoldering tension with one of my colleagues has come to mind a number of times in the last couple of weeks, and I'm wondering if this is what we should focus on today." As mentioned above, my perception is that these thoughts regarding tentative agenda are often the Holy Spirit subtly preparing the recipient for the session.

When the recipient comes in with tentative agenda in this way, I coach her through the initial steps, to the point of having an interactive connection with Jesus, and then coach her to engage directly with Jesus regarding her tentative agenda. For example, she might pray something like, "Lord, my smoldering tension with John has been coming to mind a lot lately, and I'm wondering if the Holy Spirit might be bringing this forward for me to look at with You. If this is what You want to work on, please give me a sense of confirmation and show me the next step forward. But if You want to do something else, please show me what that is."

8. *Deliberate, proactive trauma work:* As mentioned above, nobody likes pain. And if the only thing we ever do is to get a connection with Jesus, and then just say, "What do You want to do today?" our psychological defenses will tend to subtly (or not so subtly) lean away from difficult/stressful/unpleasant issues. Even those of us who sometimes cooperate with guidance from Jesus directing us to work on difficult issues, will, at other times, subtly resist/avoid/ignore invitations from Jesus to do unpleasant work. And we are all especially prone to avoid working on trauma. In light of this tendency to lean away from difficult issues, and to especially lean away from trauma work, it is important to have some sessions in which we deliberately start with the tentative agenda of working on triggers and trauma.

9. *Putting it all together:* Again, just asking Jesus for guidance is a fine plan for beginners, and this is often an acceptable plan even as one learns more. However, the ideal approach for an intermediate/advanced recipient-facilitator team is to be aware of all these potential contributions to discernment, ask Jesus for guidance at the beginning of each session, and then do the best they can to discern which of these considerations apply and how they fit together.

Sometimes this is fairly easy. For example, if the recipient is really triggered, the triggered issue is important and usually very hard to access, and she senses Jesus directing her attention to these considerations and assuring her that He will be with her as she works through the underlying trauma, the facilitator can be confident in coaching her to stay with the trigger and ask Jesus for guidance regarding the next step forward. Or if the recipient has a clear sense of Jesus inviting her to work with Him in addressing a specific area of struggle that she has been avoiding, the facilitator can be confident in coaching her to just follow Jesus. Or if the recipient has a persistent pattern of avoiding difficult issues, dramatic triggers are currently disrupting several important relationships in her life, and she once again reports "guidance" that she should just spend more time in her happy place, the facilitator should help her to ask Jesus about this problematic pattern.

And sometimes the situation is not so clear. For example, the recipient does not have a good connection with Jesus or a clear sense of direction, and she is aware of several of the considerations discussed above, but they each point to a different possible target. In these more difficult situations, do the best you can, keep asking Jesus for guidance, and keep perspective by reminding yourself of the final comments in #11 below.

10. *Intense need to find the one right/perfect/best plan:* Some people get tangled up in the perception that there is *one* right way to do this – that there is a single best plan for how to prioritize all of their different possible healing targets. They stress out about how to make the perfect discernment regarding the perfectly most strategic agenda for each session, and they fear that there will be terrible negative consequences if they miss this one right/perfect/best plan. (For example, they might fear that they will lose an intensely important romantic relationship because they won't identify and resolve problematic issues in the most strategic order.) If you notice yourself slipping into this tangle:

- Regularly remind yourself that this is really complicated. There are many different considerations and there is no way to guarantee that you will find the one best plan (just like life in general). Just keep your eyes on Jesus, stay in relationship with Him, and do the best you can.

- Talk directly to Jesus about this struggle: "Hey Jesus, I'm slipping into another version of my wanting to be safe by figuring it all out, being in control, and having guarantees. I'm afraid I won't be able to figure it all out – I won't be able to figure out the one best plan, and then _____ (something bad). Can You help me to look at this, and think about this, *with You?*"

11. Any IA time is good, any healing work is good: Any time you spend in an IA session connecting with the living, tangible presence of Jesus is good. And any healing work is good -- any healing work is better than no healing work, and any trauma resolution will move you forward. Furthermore, if you embrace a lifestyle of doing regular IA healing work, you will make steady progress and eventually get to all of the most important targets.

D. Is it ever okay to just go straight to working with a trigger and/or traumatic memory, as opposed to always needing to start with an initial positive memory and connection with Jesus? I have not yet had the time to write a thorough, systematic discussion of this point, but here are a number of thoughts that should be helpful:

- The safety net pieces are especially important for beginners, for group exercises, for lay-ministers, and for situations where there will be minimal supervision and I do not know the people involved. In these situations, the safety nets especially help prevent bad outcomes that are really costly. And therefore, in these situations I am very emphatic about needing to start every session with the positive memory, appreciation, and initial connection with Jesus.
- Also, for people who have a lot of trouble with capacity, I especially emphasize the importance of recalling a positive memory, stirring up appreciation, and connecting with Jesus at the beginning of each session.
- Furthermore, it is important to remember that the number one priority for the Immanuel Approach process, and for the whole Immanuel Approach lifestyle, is increased intimacy with God. With recipients who are not in crisis, who seem to be mostly focused on symptom relief, and who want to rush or skip the initial steps, it is important to periodically remember that regularly practicing positive memory recall, appreciation, and connection with Jesus is one of the most important things they can do to promote ultimate, long-term emotional and spiritual thriving.

These points being made, it is also important to acknowledge very real, very practical concerns with respect to time, money, urgency, and efficiency:

- If a person has time-limited sessions (often just 50 minutes in the usual psychotherapy practice), that are expensive with respect to both time and money, and if they are struggling with symptoms that are causing intense practical difficulties in their lives (and therefore need to be reduced ASAP), then taking time at the beginning of each session to go through the initial steps of recalling a positive memory, stirring up appreciation, and establishing an initial connection with Jesus can feel like a luxury that they just cannot afford.
- In my psychotherapy practice, I have clients who have difficulty finding and connecting with certain important trauma roots. With these clients, we can spend much of the session

just trying to find and connect with the memories that are anchoring the issues we are trying to resolve. In fact, we sometimes even spend the entire session, for multiple sessions in a row, just trying to find and connect with the underlying traumatic memories. So when one of these people comes into a session already stirred up about a key therapeutic target (that is, already connected to the negative emotions from strategic underlying traumatic memories), I see the activated trigger as a special opportunity to work more easily with material that is otherwise very hard to access.⁵⁶

Furthermore, we have already done experiments to test this theory. For some sessions, when these clients came in all stirred up about one of their issues that is rooted in difficult-to-access underlying trauma, we began the session with the usual positive-memory recall, appreciation, and connection with Jesus. And, to our frustration and disappointment, we found that the difficult-to-access trauma had usually gone back into deep storage by the time we finished these usual initial steps. In contrast, for other sessions, when these clients came in all stirred up about one of their difficult-to-access-the-underlying-trauma issues, we went straight to healing work – I went straight to coaching the recipients to lean into their triggers and ask Jesus for help in finding the underlying traumas. And we were impressed by how much easier it was to find and connect with the underlying traumatic memories that were usually so difficult to access.⁵⁷

- From previous experience with these clients, I know that they usually have capacity to go into traumatic memories. Also, these clients already have lots of practice with establishing interactive connections with Jesus, so if we sometimes skip the positive memory and connection with Jesus at the beginning of the session, and just jump right in with the trigger, they are still able to get a connection with Jesus once they get inside of a specific traumatic memory. Finally, these clients are usually able to work with Jesus to resolve their traumatic memories. With these pieces already known, it is particularly low risk to jump right into healing work at the beginning of some sessions.
- Yet another factor is that I know that these clients have good coping skills and good support networks, so that I can be confident they will not end up in crisis at the end of the session. Furthermore, we have discussed this question of occasionally skipping the initial steps (again, *for certain strategic scenarios, such as when they come in all stirred up*

⁵⁶I myself am one of these people who often have great difficulty finding and connecting with certain important trauma roots. So with my own personal healing journey, when I bump into certain triggers and get stirred up about certain strategic issues, I just jump right into healing work instead of starting with the positive memory, appreciation, and initial connection with Jesus.

⁵⁷One last observation regarding certain traumatic memories being especially hard to access: The same recipient can sometimes experience dramatic variability from one issue to the next. That is, a given recipient can come into a session all stirred up about *certain* issues, but with attunement regarding the initial triggering and reassurance that we will come right back to it, the recipient will be able to easily reconnect with the initial triggering and easily find the underlying traumatic memories, even after temporarily changing gears to go through the usual initial steps of positive memory recall, appreciation, and connection with Jesus. *And this same recipient* will have the opposite experience with other issues – with other issues, if they temporarily change gears to go through the initial steps of connecting with Jesus in the positive memory, they will have tremendous difficulty reconnecting with the initial triggering and finding the underlying traumatic memories. With these recipients, the facilitator and recipient will want to work together to identify the strategic targets for which they will want to use the modified process of going straight to healing work.

regarding issues that they usually have difficulty accessing); and they have agreed with the plan to occasionally, strategically skip the safety-net piece at the beginning.

- Yet another factor is that, as a mental health professional in the one-on-one setting of a therapy session, I have other tools besides the Immanuel Approach safety net to help with clients who might get stuck in a bad place.
- Yet another factor with these clients in my private practice is that I have notes about positive memories and connections with Jesus from prior sessions. So we actually *do* have the safety-net ingredients in place. The safety-net ingredients are not quite as strong when they have not been refreshed right at the beginning of the session; but they can still be effective, especially with persistent coaching, and they are one of the tools in my mental-health-professional tool box if the person runs into trouble.

Another way to say all of this is that I sometimes use a modified version of the Immanuel Approach in my private psychotherapy practice and in my personal healing work, *for certain situations*. I would describe this modified version as, “all of the other components of the Immanuel Approach, but just not the initial positive memory and initial connection with Jesus at the beginning of *this particular session*.” (And just in case you’re having trouble remembering components of the Immanuel Approach other than the really important piece of (usually) starting each session with a positive memory, appreciation, and connection with Jesus, another really important component of the Immanuel Approach is the especially strong emphasis on an interactive connection with Jesus *throughout the entire session*. For example, the first thing you do when the recipient connects with a traumatic memory is to help her to perceive and connect with Jesus inside the traumatic memory; and as the recipient works with Jesus to process the trauma, you coach her to focus on Jesus and engage directly with Jesus regarding every question, issue, problem, etc. that she encounters. See chapters 3 and 39 in the big lion book to review other important components of the Immanuel Approach.)

E. Is it important to choose an actual memory to focus on for the initial appreciation and connection with Jesus, or can you go to an imaginary place? My perception, both theoretically and from clinical observations, is that an actual memory, with actual autobiographical memory traces as its source and anchor, provides a stronger context for connecting with Jesus, and also a stronger home base/safe place to come back to when you need to use the safety net. Also, I try to avoid imaginary scenarios because people can get into trouble when they start generating imaginary content in the Immanuel Approach process.

The one scenario for which I make an exception with respect to this principle is if the recipient has had an incredibly bleak life, and is having a lot of trouble finding any positive memories (and especially having difficulty finding any splinter-free positive memories). In this situation I will use an imaginary place as the context for the initial appreciation and connection with Jesus. But before saying more about this scenario, let me take a step back for a moment. It is actually fairly common for a recipient to start out with some version of “I’ve had a hard life – I don’t have any positive memories.” However, most of these recipients do not qualify for my “one scenario exception.” *In most of these cases the person can find at least a few positive memories if the facilitator persists with coaching.* For example, if I go through, “Did you ever get a birthday present that you were especially happy with?” “Think of your best childhood Christmas-morning experience,” “Have you ever had a pet that you especially enjoyed playing with?” “Tell me about your best experience on a family vacation,” “Have you ever had a good

friend? Tell me about one of your favorite memories with her,” “Have you ever had a particularly beautiful experience in nature? – even just watching a particularly beautiful sunset?” and “Can you describe, in detail, thoroughly enjoying/savouring your absolutely most favorite food?” I can almost always collect several positive memories.⁵⁸

Now, back to the one exception scenario: On rare occasions you will encounter a recipient who has had a truly, profoundly bleak, tough life – a person who has spent his entire life in a refugee camp, or a person who has spent her entire life in a profoundly blighted urban slum. For example, a colleague was doing Immanuel Approach training with a mission team in an urban slum. He was working with a woman who had lived in this crowded slum her whole life, surrounded by concrete, trash, poverty, and social decay. Eighty-five percent of the people in the area where she lived were alcoholic, she had never been on a vacation, and she could not find any happy family memories. On top of all this, her husband beat her up on a regular basis, and he had just thrown her out of the house the day before the training event. Finally, because of the recent violence with her husband, DCFS had just taken her two young children. My colleague wasn't quite as thorough as I usually am with respect to asking about specific possibilities, but even so he was quite persistent with his coaching. Unfortunately, the young woman was still without any positive memories when he got to the end of his usual list of questions.

In light of this bleak memory landscape, he decided to try something a little different. He asked her if she had ever seen any place that she thought was nice, and that she could use as an imagination context for connecting with Jesus. She remembered that she had once driven past a city park that looked pretty. He coached her to imagine herself sitting on one of the benches in the park, and then they invited Jesus to be with her and to help her to perceive His presence in that context.

As mentioned above, I usually work really hard to find an actual memory context because actual memories tend to be stronger in a number of ways, and I try to avoid imaginary scenarios because people can get into trouble when they start generating imaginary content in the Immanuel Approach process. But the good news is that this plan worked. The young woman was quickly able to perceive Jesus' presence with her, and reported that he had picked her up, that he was holding her, and that he was telling her how much he loved her. By this point she was weeping tears of joy, and stated “I have never in my life felt this much love. Ever.”

The key with respect to this imagination context approach is that the recipient uses her imagination *only for the context*. Coach the recipient to proactively construct *the imagery for the positive context* with her imagination, but make sure that she understands that she should *NOT* construct Jesus with her imagination. After inviting Jesus and asking him to help her perceive his presence, it's very important for her to go back to just observing and reporting whatever comes into her awareness.

As discussed in the sections in the big lion book on accidental counterfeits, trying to “help” by constructing Jesus with her imagination will just get in the way. First of all, if the real Jesus' living interactive presence is manifesting in subtle ways, imaginary constructions will get in the way of recognizing these subtle manifestations. And secondly, if there is something

⁵⁸ If you are working with recipients who are having difficulty with finding positive memories (or if you are encountering this problem in your own work), I encourage you to look at the essay, “Difficulty Finding and/or Connecting with Positive Memories,” accessed from the “Special Subjects/Advanced Topics” section on the Resources page of www.immanuelapproach.com.

in the way of perceiving Jesus, an imaginary Jesus construction will obscure the important information that the process is not yet working. An imaginary Jesus will just postpone the next step of recognizing that something's in the way and then moving on to troubleshooting. (For additional discussion of the ways in which imaginary content can be problematic, see *The Immanuel Approach: For Emotional Healing and for Life*, Chapter 32, pages 449-455, and Chapter 33, pages 538-536.)

F. Self-pity: It seems like some recipients get stuck in self-pity, and that this gets in the way of moving forward with the Immanuel Approach. How do I help with this? Self-pity can really hinder the Immanuel Approach process – it can really get in the way of emotional healing, and can even get in the way of using the Immanuel Approach to just connect with Jesus. If you are encountering self-pity in a recipient you are working with (or in your own journey toward growth and healing), I would strongly encourage you to look at “The Deadly Perils of the Victim Swamp: Bitterness, Self-Pity, Entitlement, and Embellishment.”⁵⁹ In the mean time, here are a few quick, practical thoughts regarding interventions:

- Most people feel either offended or ashamed (or both) when someone points out that they are in self-pity. So it's really important to start with making sure that your relational circuits are on, and to start with generous attunement to any legitimate pain. (Note: your relational circuits will need to be **strongly** online to be able to offer generous attunement to someone in self-pity.)
- If possible, share about your own experience with self-pity – a simple, powerful way to communicate “I understand how someone could get into this place, and I will be able to look at this with you without judging you.”
- Gently, relationally share the specific observations that lead you to think that self-pity might be present. (This might be as simple as, “Together, as a team, I would like to look at the possibility that self-pity might be making things more difficult. And I bring up the possibility of self-pity because the way you have been talking about your pain reminds me of how I talk about my pain when I slide into self-pity.”)
- At this point (depending on the person's reaction and what feels right), one option is to make an invitation along the lines of, “Would you be willing to look at this possibility with Jesus? Would you be willing to focus on Jesus and ask Him what He thinks about this possibility?”
- If you sense resistance, you can also coach the person to take this directly to Jesus. For example, “I may be perceiving this incorrectly, but it seems like maybe you're feeling hurt (and/or ashamed and/or offended) by my thought that you might be stuck in self-pity. Are my perceptions at all on target?” And then after helping the person get words for whatever they are thinking and feeling (for example, “It just feels so shameful to think about having self-pity), and after communicating (*especially nonverbally*) that you hear them and are still glad to be with them, you can make an invitation along the lines of, “Would you be

⁵⁹Karl D. Lehman, “The Deadly Perils of the Victim Swamp: Bitterness, Self-Pity, Entitlement, and Embellishment,” last modified May 5, 2006, Special Subjects/Advanced Topics section, Resources page, www.immanuelapproach.com.

willing to focus on Jesus and talk to Him about these thoughts and feelings?” Finally, after the resistance has been addressed, you can go back to coaching the person to focus on Jesus and asking Him about the possibility of self-pity.

- The *Victim Swamp* essay is an additional resource. One option is to bring this in immediately after sharing your observations. For example, “So I might be wrong, but if you’re willing to try it, I would like you to look at this essay and then we can talk more about this possibility at your next session. The good news perspective is that self-pity really gets in the way of Immanuel Approach healing and there are fairly simple interventions that usually resolve it. If self-pity *is* part of the problem, and we resolve it, then your Immanuel Approach healing work will get a lot easier.” On the other hand, it sometimes feels right to go directly from sharing your observations to inviting the person to look at the question with Jesus. If you do this, and the person has good interactions with Jesus, *but you feel that the issue is not yet fully resolved*, you can acknowledge the initial positive results and then also suggest the Victim Swamp homework idea. “Strong work for looking at this with Jesus! I think this is really important. Just to make sure that we really get this sneaky stinker out of the way, would you be willing to look at this essay between now and your next session, and then we can go over it together with Jesus just to make sure we don’t miss anything.”

G. What about physical touch in Immanuel Approach sessions? I often get questions about whether or not the facilitator should ever offer physical touch, such as a hand on the shoulder, as part of offering comfort and encouragement in an emotional healing session. One possible approach is to simply say, “No physical touch, ever, under any circumstances.” This is certainly the safest, easiest guideline (from a certain perspective), and it is the approach taken by some emotional healing ministries. However, this policy is also costly, since physical touch can be a valuable resource in certain situations. My approach has been to teach that you need to be *very* careful when including physical touch in emotional healing work, but that it is *not* always, universally problematic. Hopefully the reference points presented below will be helpful as you discern this point for your own ministry:

- *Physical touch can be a valuable resource:* Even without understand any of the underlying psychoneurobiology,⁶⁰ most people are intuitively aware of the truth that physical touch can sometimes be a valuable resource. If your sister is crying because her dog got hit by a car, you give her a hug. If your son comes home from the playground crying and upset, you hold him on your lap as you offer comfort and encouragement. And if your friend is struggling through difficult issues at work, you reach out to offer an encouraging pat on the back or a comforting hand on the shoulder. Similarly, careful physical touch during an emotional healing session can express comfort, communicate encouragement, enhance the

⁶⁰ There is an extensive collection of case studies and research demonstrating connections between our physical bodies, our thoughts, and our emotions, and many of these case studies and research studies reveal powerful connections between physical touch and psychological processing. For example, see Oliver Sacks, *A Leg to Stand On* (New York: Touchstone, 1984); and Antonio, R. Damasio, *Descartes’s Error: Emotion, Reason, and the Human Brain* (New York: Avon Books, 1994) for discussions of the amazing connections between our physical bodies, our thoughts, and our emotions. See Allen N. Schore, Ph.D. *Affect Regulation and the Origin of the Self* (Hillsdale, NJ: Lawrence Earlbaum Associates, Publishers), 1994 for discussion of connections between physical touch and psychological processing.

sense of connection, and facilitate attunement, and these relational phenomena can augment both the person's capacity and the person's maturity skills.⁶¹

- *Physical touch can also be very problematic:* Even without formal training in mental health care, law, or ethics, most people are also intuitively aware of the truth that physical touch can sometimes be problematic. For example, in some situations physical touch will be triggering and/or distracting instead of helpful. The risk of inappropriate relationships developing in the context of emotional healing presents another concern—emotional healing work can be a powerfully intimate and bonding experience, and physical touch greatly increases the risk that this intimacy and bonding might slide into inappropriate connection. In the worst case scenario, the therapist/ministry facilitator initiates inappropriate touch out of his own woundedness, immaturity, and sin, and the client participates as part of re-enacting dynamics from unresolved childhood sexual-abuse memories.

Therefore, if you feel led to use touch as a resource for augmenting connection and attunement (which can then boost capacity and augment maturity skills), please be *very* careful, and prayerfully consider the recommendations presented below. If in doubt, err on the side of offering *verbal* comfort and encouragement, but avoiding physical touch.

- *The presence of others provides protection:* Including touch in emotional healing work is much safer when others are present. The observation and accountability protections provided by the presence of a chaperone are pretty straightforward, and Dr. Wilder's insights regarding family bonding versus pair bonding provide additional reasons for why touch is much less risky in situations where three or more people are present.⁶² Therefore, when lay ministers⁶³ feel led to include physical touch as a resource in their emotional healing work, I strongly encourage them to work with a team and/or have each client bring a support person (such as a spouse, friend, sibling, parent, pastor, etc.).
- *The specific relationship context is significant:* The specific relationship between the facilitator and recipient also contributes to what feels right and helpful, as opposed to inappropriate. For example, when I facilitate Immanuel sessions for my brother, John, I often put my hand on his shoulder as a way to express encouragement and support (especially if he is experiencing intense emotions and crying). When I facilitate Immanuel sessions for my Mom, I often hold her hand, again as a way to express encouragement and support. When Charlotte and I facilitate Immanuel sessions for my sister and she connects

⁶¹ In addition to these more straightforward considerations, people with severe dissociation sometimes find that physical touch can help them maintain anchoring in the present.

⁶² The short summary is that when you and one other person spend time together on a regular basis, the bonding circuits in your brains will tend strongly toward pair bonding; and pair bonding tends toward increasingly sexual physical touch. In contrast, when three or more people spend time together, the bonding circuits in their brains tend toward family bonding; and family bonding tends toward *non-sexual* physical affection, as opposed to sexual touch. (Multiple personal communications with Dr. E. James Wilder, 2009.)

⁶³ Practical logistics and limitations result in the current reality that mental health professionals often provide therapy in the context of sessions where others are not present. Fortunately, the risks associated with physical touch, and then also the corresponding need for appropriate boundaries regarding physical touch, are extensively addressed in mental health care training programs.

with intense negative emotions, I might hold Emily's hand while Charlotte puts her hand on Emily's shoulder. And when Charlotte and I facilitated an Immanuel session for our young nieces a number of years ago, all four of us were sitting together on a large couch, with Miranda leaning against Charlotte and Madelyn leaning against me. The strong, long-standing family bonds in each of these situations made it particularly easy for all involved to feel comfortable with physical touch as a way to provide comfort and support.

Similarly, if I am facilitating a session for a close friend, with family-bonds (as opposed to pair-bonds) already in place, a hand on the shoulder will usually feel safe and appropriate. Furthermore, Charlotte and I are very deliberate about including each other in the relationship circle whenever we have friendships with members of the opposite sex, since this especially encourages family bonding as opposed to pair bonding.

- *Ask the client regarding whether or not it is helpful:* As mentioned above, touch can sometimes be a valuable resource that augments both capacity and maturity skills, but at other times it can be triggering and/or distracting. One of the simplest ways to address this concern is to talk with recipients regarding touch. Explicitly name that touch can sometimes be helpful but at other times disruptive, and ask for their perceptions and preferences—would they experience touch in the emotional healing setting as a helpful source of encouragement, support, connection, and capacity augmentation, or would it be distracting/detracting in any way? It is also important to realize (and discuss with recipients) that touch can be helpful while working with one set of memories, but disruptive while working with a different set of memories. Therefore, it is important to both periodically ask regarding whether or not the person is experiencing touch as helpful, and also to constantly observe for non-verbal feedback.
- *Watch for your own triggering and address the underlying issues:* In my experience, the most common reason for a facilitator to initiate unhelpful touch is a combination of *unconscious motivation* and *impaired judgment*, both caused by his own unresolved issues. For example, attachment pain coming forward as implicit memory can cause both the desire to initiate touch and the subjective perception that it would be “right” to do so. Another common scenario is for the facilitator to feel that touch would be helpful, important, and “right” in a given situation, but in reality the recipient's negative emotions are triggering his own unresolved issues, and he is comforting the recipient in an unconscious attempt to reduce his *own* discomfort.

Therefore, I *strongly* encourage you to watch for clues indicating that you might be triggered,⁶⁴ and then diligently work to resolve the underlying sources of any triggered content you become aware of. I also encourage you to get in the habit of asking yourself questions such as “Why am I touching the recipient?,” “Where is the energy/impulse toward reaching out with touch coming from?,” “Are her negative emotions making me uncomfortable in some way?,” “Am I reaching out with physical comfort in order to manage my own anxiety?,” and “Am I reaching out with physical touch in order to meet my own needs in some way?”

And again, if in doubt, err on the side of offering *verbal* comfort and encouragement, but

⁶⁴ For a detailed discussion of clues indicating that you might be triggered, see chapters fourteen through sixteen and Appendix D in Karl Lehman, *Outsmarting Yourself* second edition (Libertyville, IL: This Joy! Books, 2014).

avoiding physical touch.

H. What do I do when both I and the recipient are initially convinced that she is interacting with the genuine presence of Jesus, but then partway through the session she reports that Jesus is starting to say and/or do things that are strange and/or confusing and/or disturbing?

- *Genuine Jesus is ALWAYS life-giving:* When I'm in the middle of a session, and it seems like we have been working with the genuine presence of Jesus but then the recipient starts to describe interactions with "Jesus" that are strange, surprising, or confusing, the first thing I do is to remind her (and myself) of the basic, foundational truth that Jesus is *always* life-giving: "The genuine presence of Jesus is *always* life-giving. If this presence you're interactive with is really Jesus, then He will be life-giving; and if this presence is not life-giving, then it's not Jesus."
- *Not yet perceiving Jesus' larger strategy:* A fairly common reason that the facilitator and recipient will initially be convinced that they are working with the genuine presence of Jesus, but then later become uncomfortable with what He is saying and/or doing, is that they do not yet perceive His larger strategy. So after reminding the recipient of the basic, foundational truth that the genuine presence of Jesus is always life-giving, I'll say something along the lines of, "Let's carefully go forward with this, and if the presence you're engaging with is really Jesus, then the pieces will eventually come together, make sense, and be life-giving. If this happens – if the pieces do eventually come together and the whole package is life-giving – then we can be reassured that the presence we're working with really is Jesus. And we can be especially confident as we observe that lasting positive fruit is accumulating over time.

In contrast, if we go forward and the pieces do *not* come together into a package that is life-giving, then we will know that this presence is *not* Jesus, and we will just troubleshoot regarding contamination/counterfeit.

- *Internal parts can take over in the middle of a session:* An interesting detail with respect to contamination and/or counterfeit is that internal parts seem to be able to take over a session that is initially interacting with the genuine presence of Jesus. That is, I have seen sessions in which the recipient was clearly *initially* interacting with the true presence of Jesus, but then she became confused and disturbed, she described "Jesus" to be saying and doing things that were no longer life-giving, and we eventually discerned that she was no longer engaging with the genuine presence of Jesus, but rather with a counterfeit that was being produced by internal parts. My understanding regarding these sessions is that internal parts were able to "take over" the recipients' perceptions of Jesus' presence because the Lord was permitting these recipients to exercise their free will choices to allow interference. For example, if the recipient realizes that the healing work is moving toward an important traumatic memory that she does not want to look at, and she therefore chooses to allow an internal part to take over her internal perception of Jesus' presence, the Lord will allow her to do this.

The good news is that once we figure out what's happening, and deal with the underlying reasons for the interference, the recipient will report, "Oh, now the real Jesus is back again – I can sense/see/feel that this is the real Jesus again." And then the confusing, disturbing content from the Jesus-presence (now truly Jesus) stops, and her interactions

with Jesus become life-giving again.

- *Genuine Jesus can be outside of the box:* Sometimes the genuine presence of Jesus says and/or does things that seem strange and/or confusing and/or disturbing because they are “outside of the box” for the recipient and/or facilitator,⁶⁵ or because they present truth that the recipient and/or facilitator have difficulty accepting.⁶⁶ It is always important to humbly, carefully consider this possibility.

When considering this possibility, you will want to watch *very* carefully regarding “Is the whole picture life-giving?” And you should continue to watch this closely as you work with the possible-Jesus presence over time. For example, I have worked with recipients who have been confused and disturbed by the fact that Jesus wanted to be with them, and by the way He related to them with profound tenderness and compassion, even while they were still floundering in messy, painful sin and dysfunction. They had been taught that Jesus would only want to be with people after they surrendered, repented, and turned away from the sin and dysfunction in their lives, and they were therefore afraid that the presence that was showing up in their Immanuel sessions might not really be Jesus. However, as these recipients continued to work with this “possible Jesus,” it became increasingly clear that the work was profoundly life-giving, and that observable positive changes were steadily accumulating.

I. Can you use the Immanuel Approach with people who have suicidal ideation? Will it help with respect to their suicidal ideation?

1. Different possible sources: There are a number of different factors that can contribute to a person having thoughts of suicide. In my experience, the most common source of suicidal ideation is something along the lines of, "I am really, really miserable (for any of a hundred possible reasons), and I wish I could just quit this miserable life to stop the pain." But almost none of these people actually intend to hurt themselves, and almost none of them ever make a real suicide attempt. Another common source of suicidal ideation is something along the lines of, "I'm in a lot of pain and need help, but I haven't been able to get the help I need by just asking. If I talk about suicide, or even make a suicide "attempt," then I get help." Most of these people talk about suicide, but never actually make a suicide attempt. And almost all of those who do make a “suicide attempt” never seriously hurt themselves. For example, they take a small overdose and then immediately call someone and tell them that they have just taken an overdose. They take a trip to the ER, the ER doc gives them medication that makes them vomit up the overdose, and they have no lasting injury.

Finally, there is a very small percentage of people with suicidal ideation who are truly in despair. They are deeply, profoundly hopeless, and are seriously thinking about taking their lives.

⁶⁵See the “Could this Really be from God?” section in chapter 28 in the big lion book for examples of Jesus saying and/or doing things that some might experience as “outside of the box.”

⁶⁶With respect to Jesus presenting truth that we have difficulty accepting: The different denominations and factions within Christianity disagree regarding a number of important questions/issues. Both sides can't be right. This means that many of us must be mistaken regarding one or more of these important questions/issues. What do we do with the possibility that the genuine presence of Jesus might present truth that indicates we are in error regarding an important question or issue?

2. *Big-picture perspective*: The point of #1 is to give the big-picture perspective. There are many, many people with suicidal ideation who are not in any immediate danger, who do not need immediate mental health care, and who would greatly benefit from Immanuel Approach work.

3. *Very simple plan for lay-counselors/lay-ministers*: In light of the above, lay-counselors/lay-ministers can use the following very simple approach with respect to suicidal ideations. If a person you are working with mentions thinking about suicide, simply ask them to clarify. If they clarify that they are *currently* truly, seriously thinking about killing themselves, then explain that you are not a mental health professional, and tell them to call their MHP therapist and/or have someone take them to the psych ER immediately. On the other hand, if they clarify that they have seriously considered suicide *in the past*, but are **not** currently considering suicide right now, or if they clarify that they are just extremely miserable and/or making a cry for help, then Immanuel Approach work would be a very good intervention.

Help them get a good connection with Jesus, and then coach them to talk directly to Jesus about why they have considered suicide in the past and/or why they are so miserable and/or why they are making a cry for help. As they work with Jesus to find and resolve the roots of their pain/problems, their suicidal ideation will steadily, progressively resolve.

**Mental health professionals and full-time emotional healing ministers: For a *much* more detailed discussion of suicidal ideation and suicidal risk, see “Suicide Related Phenomena: Suicide Risk, Suicidal Behavior, Mimic Suicidal Behavior.” Available as a free download from the Special Subjects/Advanced Topics section of the Resources page of the Immanuel Approach website:

<https://www.immanuelapproach.com/wp-content/uploads/2024/08/suicide.pdf>.

J. When should lay-ministers ask for help (obtain consultation from/make referrals to mental health professionals)? An important question for any ministry in which lay-people work with recipients is, “When should lay-ministers obtain consultation from or make referrals to mental health professionals?” Even without knowing anything about diagnosing specific mental illnesses, a lay minister can use the following criteria to identify recipients who need consultation/referral.

1. *The recipient has suicidal thoughts/suicide risk that you don’t feel comfortable with/don’t know how to handle*: If you are a lay minister, you should make a referral or obtain consultation any time the recipient has suicidal thoughts/suicide risk that you don’t feel comfortable with/don’t know how to handle.

The good news is that you can avoid many unnecessary consultations and referrals if you study my “Recipients with Suicidal Thoughts: Brief Comments” essay.⁶⁷ For example, you will be comfortable continuing to work with a recipient who says, “I just wish I could die,” but then in response to clarifying questions reassures you that they are just wishing they could escape the pain, but that they are **not** actually thinking about suicide or intending suicide. With the information from the “Recipients with Suicidal Thoughts: Brief Comments” essay, you would realize that this recipient poses no real suicide risk and does

⁶⁷ Available as a free download from the Special Subjects/Advanced Topics section of the Resources page of our Immanuel Approach website (www.immanuelapproach.com)

not require consultation or referral.

2. *The recipient's symptoms are causing serious disability:* At mild to moderate levels, distressing symptoms, such as anxiety and/or depression and/or irritability and/or self-medication and/or exaggerated triggered reactions, serve a useful purpose – they motivate the recipient to get help, and they guide the recipient and facilitator in finding the underlying causes. However, as symptoms become increasingly severe they can become *disabling* instead of providing motivation and guidance. For example, as anxiety becomes increasingly severe, fearful thoughts can race so uncontrollably that the person is unable to think effectively, fearful emotions can become so overwhelming that the person has difficulty functioning emotionally, physical symptoms such as dizziness and trembling can be disruptive, and persistent difficulty sleeping can cause all of the problems associated with chronic sleep deprivation. In these situations, the person will have great difficulty fulfilling his job responsibilities, relating to his spouse, taking care of his children, or participating in Immanuel Approach work to address the underlying causes.

If you are a lay minister, you should make a referral or obtain consultation any time the recipient's symptoms are causing serious *disability*, as opposed to just providing motivation and guidance. One of the most important appropriate uses for psychiatric medications is to moderate disabling symptoms during the time required for the recipient to resolve the underlying causes.⁶⁸

3. *The recipient is experiencing strange and/or alarming symptoms that you don't understand or know what to do with:* If you are a lay minister, you should make a referral or obtain consultation any time the recipient is experiencing strange and/or alarming symptoms that you don't understand or know what to do with.

I include “that you don't understand or know what to do with” because strange and/or alarming symptoms do **not** require mental health consultation if you understand them and know what to do about them. For example, demonic oppression can cause dramatic, strange, and alarming symptoms, but these do not require mental health consultation if the lay-minister understands them, and if binding prayer and/or Immanuel Approach ministry resolves the problem. Dissociation provides another good example. It can cause strange and/or alarming symptoms, but mental health consultation is *not* needed if the lay minister recognizes the dissociative phenomena and knows how to work with it.

J. What special considerations should I keep in mind when working with jail/prison inmates? Inmates in jails and prisons usually have a lot of trauma, and often also have poor relational maturity skills and low capacity for staying with negative emotions, so this is a challenging population to work with. Nevertheless, my assessment is that almost all recipients who participate with integrity⁶⁹ will have a positive experience with the Immanuel Approach if they are willing to persist with a skilled facilitator who is able to provided advanced

⁶⁸For additional discussion of symptoms causing disability as opposed to providing motivation and guidance, and discussion of the place of psychiatric medication in moderating disabling symptoms, see chapter seventeen in Karl D. Lehman, *Mind and Brain: Separate but Integrated* (Evanston, IL: Immanuel Publishing, 2024).

⁶⁹By “participating with integrity” I mean that they are making a good-faith effort to cooperate with the process, as opposed to just pretending to cooperate in order to obtain some kind of secondary gain.

troubleshooting when this is needed.⁷⁰ Furthermore, my assessment is that even moderately experienced facilitators should also be able to successfully facilitate for most inmates who want to receive. The following special considerations will be helpful.

1. Start with individual sessions, choose recipients carefully, start with “Lite” version of the Immanuel Approach: You might occasionally find yourself in a scenario in which the Lord leads you to jump right into working with a group and/or right into trauma-healing work. However, in most situations you will want to start with individual sessions, you will want to have these initial individual sessions with one or several inmates with whom you have the most relationship and trust, and you will want to start with just the “Lite” version of the Immanuel Approach (just the initial steps of positive memory recall, deliberate appreciation, and establishing an interactive connection with Jesus).⁷¹ As described in the first case study/testimony below, just spending time with Jesus and receiving comfort from Jesus can be powerful positive experiences.

Once you are getting consistently good results with Immanuel Lite, and the person feels comfortable with the initial steps in the process, you can start talking to them about the possibility of doing trauma-healing work with Jesus. Starting with at least several successful Immanuel Lite sessions will also make sure that you have a strong, reliable safety net in place. And don't move on to any kind of group exercises until you get consistently good results with these individual sessions.

2. Group exercises: As just mentioned above, you will want to be getting consistently good results with individual sessions before moving onto any kind of group exercises.

a. Choose participants carefully, especially at first: With group exercises, it will be even more important to choose participants carefully. As mentioned above, close to one-hundred percent of people who *receive* Immanuel Approach ministry are able to have a positive experience if they work with a skilled facilitator. But my observation with respect to *facilitating* is that a significant percentage of those who participate in group training exercises have difficulty, even with just Immanuel Approach Lite.⁷²

For example, my experience with churches working to bring in the Immanuel Approach is that maybe ten to fifteen percent of those who come to training events have trouble

⁷⁰From twenty-five years of my own experience with the Immanuel Approach, combined with reports from colleagues using the Immanuel Approach, my assessment is that 95-99% of recipients have a positive experience with the Immanuel Approach if they are willing to persist with a skilled facilitator. Note: These numbers are my personal estimate from a moderately rigorous review of both correspondence from colleagues and sessions I have facilitated. They are not results from systematic research.

⁷¹For additional explanation regarding the “Lite” version of the Immanuel Approach, see <https://www.immanuelapproach.com/wp-content/uploads/2024/11/ExercisesOverviewExplanatoryEssayLite-1.pdf>

⁷² This ten to twenty-five percent is just my personal rough, intuitive assessment, as opposed numbers coming from any kind of careful, systematic research. Also, this assessment is from my observations of group training exercises. My expectation is that fewer people would have difficulty if they were receiving one-on-one training.

with the practice exercises for even the first steps in the Immanuel Approach process.⁷³ My perception is that these people have some combination of cognitive difficulties, and/or low capacity, and/or poor relational maturity skills, and/or lots of trauma and triggering. My observation is that these people have trouble understanding (or holding onto) the key principles of the Immanuel Approach, and/or they have trouble tracking with the exercise handout instructions, and/or they have trouble implementing the instructions. (For example, they have trouble reading body language and other non-verbal cues, so that they frequently interrupt the recipient in the middle of interactions with Jesus. Or they have trouble with sending the body language and non-verbal cues that let the recipient know they are actively listening.) A common bottom-line observation is that during times designated for practice exercises, these people often end up just talking to their practice partner instead of facilitating.

As compared to the general population, inmates in jails and prisons will be more likely to have cognitive impairments,⁷⁴ they will tend to have lower emotional capacity, they will tend to have poorer relational maturity skills, and they will tend to have more trauma and triggering. So concerns about possible difficult with group practice exercises are particularly relevant. Especially as you are getting started, in order to maximize success and minimize disappointment, you will want to invite those who will be most likely to succeed as opposed to sending out a more general invitation. (Once you gather a core group of those with more capacity, better maturity skills, and less trauma and triggers, and who have had good experiences with the Immanuel Approach and are developing more skill as facilitators, you can become increasingly generous with your invitations.)

b. Start with Immanuel Approach Lite: Just as with individual sessions, you will want to start with the Lite version of the Immanuel Approach. It will be very helpful for group exercise participants to be comfortable with the initial steps in the process, and to be getting consistent success with the initial steps in the process, before moving on to the much more challenging work of going through trauma healing with Jesus. As just mentioned above, people in jails and prisons will tend to have less capacity, poorer maturity skills, more trauma, and more triggers than the general population. Starting with Immanuel Approach Lite will help compensate for these increased difficulties.

c. Break the larger group into practice pairs: Some recipients have clearer, stronger, more vivid Immanuel Approach experiences as their usual baseline, and these people usually have good success with doing exercises in a group setting where the participants all go through the exercise at the same time, and then share about their experiences at the end. Even without describing their internal experience out loud to another person at each step in the process, these people still usually have good overall outcomes – they perceive the Lord, connect with the Lord, and then interact with the Lord clearly enough

⁷³These estimates are from situations in which the whole congregation is encouraged to participate, as opposed to training events for only ministry teams.

⁷⁴ Studies show that prison inmates are significantly more likely to struggle with cognitive difficulties. See, for example, Laura M. Maruschak, Jennifer Bronson, and Mariel Alper, “Disabilities Reported by Prisoners,” *Survey of Prison Inmates, 2016*, March 2021, NCJ 252642, <https://bjs.ojp.gov/content/pub/pdf/drpspi16st.pdf>

and strongly enough that they have good overall experiences.

In contrast to those who usually have good experiences with group exercises that do not include dividing into small practice teams, many people (such as myself) usually do NOT have good experiences with this approach. With any kind of Immanuel Approach exercise, the internal experience for these people is usually initially very faint/vague. However, if these people go through the process with a practice pair/trio, so that they can describe their faint/vague internal experience immediately after each step in the process, then they are MUCH more able to feel the importance and recognize the meaning of subtle manifestations of the Lord's presence and subtle content from the Lord, and the overall experience is always much stronger, much more satisfying, and much more meaningful. Early in their Immanuel Approach journeys, this one piece will often make the difference between frustrating, disappointing, "it's not working" experiences with group exercises, and positive, satisfying, successful experiences.⁷⁵

As mentioned above, people in jails and prisons will tend to have less capacity, poorer maturity skills, more trauma, and more triggers than the general population. Breaking the larger group into practice pairs, so that each participant can describe their experience immediately after going through each step in the process, will help compensate for these increased difficulties. Breaking the larger group into practice pairs will increase positive experiences and decrease disappointment.

3. Full process (including trauma-healing work): Facilitating for the full Immanuel Approach, *including trauma-healing work*, is more challenging than facilitating for just the first steps in the process. So there will be people who are able to successfully facilitate for Immanuel Approach Lite but who have difficulty with facilitating for the full process. Therefore, if/when you decide to eventually move on to group exercises that include trauma-healing work, I strongly recommend starting with a small group of participants that you have discerned to be the most well equipped. For example, those who most clearly understand the principles, who have the most capacity for staying with negative emotions, who have the best relational maturity skills, who have the least trauma and triggering, and who are most able to stay in relational mode. Also, give yourself permission to just stay with Immanuel Approach Lite if your discernment is that the people you are working with are not yet⁷⁶ ready for the group exercises that include working with trauma. (Your ministry team can facilitate individual sessions in which inmates receive healing for trauma, but just stay with Immanuel Approach Lite when you lead the inmates through group exercises.)

⁷⁵As I describe in detail in chapter sixteen of the big lion book, this benefit from working in practice pairs/trios comes from the way in which our brains have been designed to work best in community – our brains are more able to *feel the importance* and *understand the meaning* of our mental content when we describe it, out loud, to another person. These benefits will help us to perceive God's presence by helping us to feel the importance and recognize the meaning of *subtle* manifestations of God's presence *that we might otherwise miss*. And these benefits will help us to connect with God by helping us to feel the importance and recognize the meaning of *subtle* interactive content coming from God *that we might otherwise miss*.

⁷⁶Some who are initially not ready to facilitate trauma-healing work might eventually be able to successfully facilitate the full Immanuel Approach process if they keep studying the principles, grow their capacity, get coaching with respect to the most important relational maturity skills, and get healing to reduce trouble with triggering.

K. Have you ever used EMDR with the Immanuel Approach? I routinely use EMDR with the Immanuel Approach in my professional practice. My perception is that it can provide a neurological turbo-charge that speeds the healing process. But it can also overwhelm recipients and breach defenses that they are not yet ready to surrender voluntarily, and therefore needs to be used very carefully by mental health professionals with appropriate training. In recent years, most of my clients have been getting such good results with the Immanuel Approach that they have not felt the need or desire to include EMDR as an additional resource. At this time, the primary place for EMDR in my practice is for finding and removing memory-anchored blockages that are preventing a client from being able to use the Immanuel Approach. For a much more detailed discussion of EMDR and the Immanuel Approach, see the essay, “The Immanuel Approach and EMDR: F.A.Q.s and Common Misunderstandings.”⁷⁷

VIII. Working with internal parts

A. Does each internal part need to be led to Christ? Each internal part needs to get to know Jesus – each internal part needs to learn the truth about His character and heart. And with parts that have carried hugely distorted perceptions of Jesus, this is sometimes a long, complicated, and wonderful process. But my understanding of scripture (and my observations during sessions) is that a person has only one spirit; and once the recipient’s spirit has accepted Jesus as the leader, source of forgiveness, etc. for her life, then this “salvation” question has been taken care of and does not need to be repeated. One of my personal observation data points supporting this position is that, when working with Christians, I regularly discover internal parts that think they are not yet Christian – parts that think they are not yet “saved.” However, in one-hundred percent of these scenarios Jesus accepts them immediately, with no indication of the need for any kind of “salvation” conversation. He will often address wounds that need to be healed, lies that need to be replaced with truth, demonic spirits that need to be removed, and sins that need to be repented of and forgiven, but Jesus has never indicated that newly discovered parts of a believer need to be led to the Lord as if they are truly different persons, each with their own separate spirits.

As a quick addendum: In many situations, internal parts have been co-conscious with the person’s adult self/core self, and have been quietly watching, learning, and agreeing with the core/adult self as she has come to know and follow the Lord. So in many situations, the internal parts are essentially in the same faith position as the core/adult self. The most common scenario is that an internal part will mostly share the same faith package, but carry a traumatic memory (or memories) that are the source of certain specific distorted perceptions about the Lord’s character and heart; and when the traumatic memory anchor is resolved, the part will then be able to perceive and feel the truth. See supplementary Chapter 35c for a much more detailed discussion of how traumatic memory anchors can be the source of distorted perceptions regarding the Lord’s character and heart (with or without the involvement of internal parts).

B. How do you handle a client with 2 or 3 different parts that are so intensely at war with each other that they continually hijack his system and keep him from being able to talk to

⁷⁷Karl D. Lehman, “The Immanuel Approach and Eye Movement Desensitization and Reprocessing (EMDR),” last modified June 23, 2021, Special Subjects/Advanced Topics section, Resources page, www.immanuelapproach.com.

Jesus? This is actually a fairly common scenario with advanced Immanuel Approach work. When I encounter this situation, I work directly with each of these parts, in every possible way I can think of (with lots of prayer asking for Holy Spirit inspiration), to try to get each one to be willing to engage directly with Jesus. The ideal goal I am always working towards is to get to the place where each of the parts trusts Jesus enough to let Him lead the overall process. Then, when they each trust Jesus to lead, Jesus being in the middle and leading the whole process can disarm the adversarial polarization between the parts. ****They don't trust each other, but they trust Jesus. So if you can get them to let Jesus lead the whole adventure, something totally new can happen with respect to system's dynamics.****

Note: I describe my goal very openly right at the beginning, explaining to all of the parts that I understand that they do not feel safe with each other, and that they are totally stuck because they are so afraid of each other and so angry at each other that they cannot work together. And I explain my vision: "First, I would like to help each one of you talk directly to Jesus, get to know Jesus, and decide whether you trust Jesus. And then, after all of you have gotten to know Jesus, I want to talk about whether we can trust Jesus to lead. Again, I know you don't trust each other, but if all of you decide that Jesus is so wise and so loving and so safe that you can each trust Him to lead the whole process, then maybe we can move forward and you can all get help. And here's a really important point: when each of you is getting to know Jesus, the other parts need to support this effort. If you have questions or fears while I'm working with one of the other parts, let me know and we will ask Jesus for help; but overall, each of you will need to help (instead of interfere) when I'm working to help one of the other parts get to know Jesus."

In addition to explaining the big picture at the beginning, I sometimes have to give frequent reminders throughout the process.

C. What do you do when one or more internal parts are so mad at Jesus that they don't want to engage in a conversation with Him, and so are not allowing the healing process to move forward? I use the direct-eye-contact technique to communicate directly with the internal part(s), and then use essentially the same interventions that I use when working with any recipient who is so angry at Jesus that they don't want to work with Him.⁷⁸ It is just that I have all of these interactions directly with the internal part(s).

D. How does one distinguish between demonic spirits and internal parts? Demonic spirits and internal parts are both common, and can easily be mistaken for each other. (I have seen wounded, scared, angry, and deceived internal parts manifest with just about every "demonic" presentation you can think of, and I have also seen demonic spirits try to present as internal parts.) It is important to distinguish between demonic spirits and internal parts because demonic spirits must be removed, whereas internal parts must be treated like "persons" who need healing. This need to differentiate demonic spirits from internal parts was one of the most intimidating challenges I faced as I was discovering that both demonic spirits and internal parts are commonly encountered in routine prayer for emotional healing. The good news is that this distinction is much easier to make than I had initially thought.

The essay "Distinguishing Between Demonic Spirits and Internal Parts"⁷⁹ shares my

⁷⁸ See subsection D. under section V. above, and also "An Advanced Intervention for Blocking Anger" in chapter 26 of the big lion book.

⁷⁹Karl D. Lehman, "Distinguishing Between Demonic Spirits and Internal Parts," last modified January 25, 2013, Special Subjects/Advanced Topics section, Resources page,

observations regarding the similarities and differences between demonic spirits and internal parts, and also describes two simple techniques/tools that have been especially helpful in distinguishing them from one another during actual sessions.

E. Does the Immanuel Approach bring about natural/spontaneous integration of internal parts, or does the facilitator need to initiate and guide this process? In my experience, spontaneous/natural integration seems to happen on a regular basis in the context of ongoing Immanuel Approach work. My observation is that Jesus’ discernment, timing, etc. has been very good with respect to this aspect of the long-term plan. In my own practice, I am currently deferring the whole issue of integration to Jesus.

F. Are internal parts (both child parts and non-child parts) always/only/necessarily dissociative phenomena? The non-dissociative phenomena of having a traumatic memory triggered forward, with traumatic implicit-memory content that includes a child ego-state package, can produce the subjective experience of having an internal child part. And there are two different non-dissociative phenomena – conflicted self-states and mental constructs – that can produce the subjective experience of non-child internal parts. See “Dissociated Parts, Traumatic-Implicity-Memory Child-Ego-State Parts, Conflicted Self-State Parts, Mental Construct Parts, and Pseudo Parts for additional discussion of these non-dissociative internal parts phenomena.

F. How do you work with people who seem to have internal parts, but who are very uncomfortable with the whole idea of internal parts? Two thoughts:

- First, help the recipient connect with a positive memory and establish an interactive connection with Jesus. Once she has a good connection with Jesus, share your perception that she might have internal parts, and also your perception that she seems to be uncomfortable with the whole idea of internal parts. Next, help her to focus and get words for her concerns/fears. Finally, coach her to engage directly with Jesus regarding her concerns/fears – help her to look at, and think about, her concerns/fears *with Jesus*. NOTE: if the recipient loses her connection with Jesus when the subject of internal parts comes up, you can still help her to focus and get words for her concerns/fears, and then help her to express her concerns/fears to Jesus and to ask Him for help, *in faith*.⁸⁰ Even without an interactive connection, I have found that this simple intervention is still usually very helpful.
- Get comfortable with non-anxiously explaining the whole parts phenomena in the gentlest, simplest way possible. One option for explaining parts phenomena is for the recipient to read, “Dissociated Parts, Traumatic-Implicity-Memory Child-Ego-State Parts, Conflicted Self-State Parts, Mental Construct Parts, and Pseudo Parts,”⁸¹ and then discuss it with her.

www.immanuelapproach.com.

⁸⁰When regularly working with the Immanuel Approach we can get spoiled – we expect to perceive Jesus’ tangible, interactive presence whenever we talk to Him about a concern or fear. But it’s important to remember that we can still talk to Him and ask Him for help, *in faith*, even when we don’t perceive His presence or have an interactive connection.

⁸¹As you will notice, this essay is not a particularly simple explanation. For some recipients you will want to give a much simpler explanation – in your own words, and just focusing on the type of part(s) you perceive the recipient to have. But there will be some recipients for whom the essay will be a good fit. (It would have been a good

After she reads the essay, help her to focus and articulate any concerns/fears. And then, again, help her to talk directly to Jesus about her concerns/fears.

F. For the direct eye contact technique, is there an optimal distance to be from the client? Or a range of distances that works? The optimal distance for the direct eye contact technique is whatever feels comfortable with respect to interpersonal distance in the particular context in which you are working. In my experience this has ranged between two feet (for example, in a tight group-exercise circle of three, where the participants are in a crowded room and leaning towards each other) and eight feet. When I do therapy sessions in my office, the usual direct-eye-contact distance is six-to-seven feet.

IX. Questions from Recipient

A. How long does it take to get healed? The short answer is that the time it takes to get healed can be tremendously variable between different people with different healing agenda. A person with a phobia of driving that is linked to the traumatic memory for a single, recent car accident might resolve this single traumatic memory (and the associated phobia) in a single session. In contrast, a different person might come in with long-standing fears and dysfunctional reactions that are deeply anchored in thousands of traumatic memories that are spread out through her entire childhood. And these traumatic memories will probably be heavily guarded by long-practiced defenses. Furthermore, this person might have a much lower capacity. In this second scenario, the recipient might need to have regular Immanuel sessions for years—in order to build her capacity, to dismantle the blocking defenses, and to steadily shovel away at the huge pile of trauma.

Another part of the short answer is that we all have a lot more medium-sized and minor trauma than we realize. When minor trauma is included in the consideration, I have never yet met a person that I perceived to have zero remaining trauma. If our goal is to fully resolve all of the medium-sized and minor trauma, then we should embrace Immanuel-Approach emotional healing as a lifestyle that we expect to continue as long as we live.

For a more thorough discussion of this question, see the essay, “How Long Will it Take for Me to Be Healed?”⁸²

B. How do I decide what to work on? See question B under section “VII. Practical Questions Regarding Facilitating Sessions (Intermediate)” above.

C. What Homework Can I Do to prepare for Immanuel Approach work? People often ask about any preparation they can do to get ready for their first Immanuel Approach session, and they also often ask about any “homework” they can do between sessions to increase their ability to cooperate fully with the process during sessions. See chapter forty-six in the big lion book, “How can I Prepare for Immanuel Approach Work,” for discussion of these excellent questions.

D. Can I facilitate for myself/do the Immanuel Approach on my own? The short answer is, “Yes, with two very important caveats: 1) the most important caveat is that you can get stuck

fit for me.)

⁸²Available as a free download from the Special Subjects/Advanced Topics section on the “Resources” page of www.immanuelapproach.com.

in a bad place, and then not have a facilitator/coach to help get you get back to your positive memory and connection with Jesus; and 2) the second concern is that the Immanuel Approach is not as effective when you coach/facilitate for yourself, because of the way our brains have been designed to work best in community. The biggest concern with respect to this is that you can have a disappointing experience with coaching/facilitating for yourself, and then *erroneously* conclude that the Immanuel Approach is not worth pursuing.”

The long answer, which I really encourage you to look at if you are experimenting with doing the Immanuel Approach on yourself, is presented in Chapter 36 of the big lion book. (The entire chapter is dedicated to addressing this question.)

E. How/where can I find someone to facilitate Immanuel Approach sessions for me? I am working hard to train Immanuel Approach facilitators, and to get these people to post profiles on the network directory,⁸³ but the small number of facilitators currently available are profoundly unable to provide sessions for the large number of people who want them. At least for now, many people will need to find or recruit their own Immanuel Approach facilitators. See Appendix C in the big lion book, “Finding/Recruiting Your Own Immanuel Approach Facilitator,” for my thoughts regarding how one might pursue doing so.

F. Am I really making progress, or have I just been imagining it? I received an email with the following comment: "Sometimes I think I'm doing good healing work and making progress, and then other days I feel so triggered about everything, and perceive that I have so many problems that I start wondering if I've made any progress at all, or if I just imagined I had made progress." Which implies the question, "Am I really making progress, or have I just been imagining it?"

First of all, this phenomenon is very common. I'm guessing that most of us occasionally have thoughts and feelings along these lines.

Part of the picture is that when we get really triggered and our relational circuits are really off, we cannot *feel* the evidence of positive change. We might be able to remember examples of positive change cognitively (small and far away), but we cannot *feel* them. So when we are really triggered so that we are intensely connected to trauma and dysfunction that we have not yet resolved, and we cannot feel any of the positive, relational memories that provide examples of healing fruit and that would balance the picture, the triggered perspective takes up almost all of the screen.⁸⁴

In some situations, specific content from the triggered memories can also contribute. If the memories that are getting triggered forward include disappointment and discouragement along the lines of "I thought something good was happening, but it was just a mirage," then this specific implicit memory content can cause the "I'm still a huge mess and nothing is really changing after all" perception to feel especially intense and true.

⁸³The network directory can be accessed from the Referrals page of the Immanuel Approach website, www.immanuelapproach.com. And remember that zoom sessions are usually effective. (This dramatically expands your options).

⁸⁴See chapter twelve (especially pages 110 through 115) in *Outsmarting Yourself* for additional discussion of how we can't feel positive memories when we are really triggered and our relational circuits are really offline.

The good news is that we will be able to perceive reality accurately again, once the immediate triggering calms down and we get our relational circuits back online. It will be much easier to find and remember examples of positive changes that indicate healing, and we will once again be able to *feel* these examples of healing fruit. Furthermore, our problems will (accurately) seem smaller and less powerful when we are no longer in the middle of being triggered, and any implicit-memory exaggerated discouragement that might have been triggered forward will no longer be distorting our perspective.⁸⁵

Finally, we can get additional reassurance/confirmation by asking those who know us well to describe any lasting positive changes that they have noticed.

X. Questions About IA Community

A. How can IA community help with building and sustaining an IA lifestyle? As described in supplementary chapter 35b for the big lion book,⁸⁶ building and living an Immanuel lifestyle is so much more than just learning to facilitate Immanuel Approach sessions.

Learning/building an Immanuel lifestyle can be challenging, practicing the daily discipline of an Immanuel lifestyle can sometimes feel burdensome, and persisting with an Immanuel lifestyle can be challenging. As you build and live an Immanuel lifestyle, it is very helpful to be part of an Immanuel Approach community.

1. Learning/building Immanuel lifestyle: Learning/building an Immanuel lifestyle will be much easier in community. As with every field of interest, whether bird watching, basketball, or bioengineering, it is easier to learn the principles and skills when you spend time with others who share the same interest. It is always helpful to learn and practice with others. If you are blessed to be part of a community with some who are ahead of you on the journey, you will benefit from having veterans who can answer your questions as you encounter intermediate and advanced issues and problems. And you will especially benefit from watching them model skills that you need to learn. Furthermore, you can share their faith and capacity (in proportion to the strength of your attuned connection).⁸⁷

2. Daily discipline of Immanuel lifestyle: The daily discipline of living out an Immanuel lifestyle can sometimes feel burdensome. Community helps, just as with so many other aspects of day-to-day life. As we all know, it's easier to spend an hour at the gym each week if you get together with a workout partner than if you try to maintain this same discipline on your own. Furthermore, sharing and hearing Immanuel stories on a regular

⁸⁵See supplementary chapter 35e for the big lion book for additional discussion regarding why we sometimes experience dramatic ups and downs in our perceptions regarding healing and positive change. This supplementary chapter is available as a free download from our IA website:

<https://www.immanuelapproach.com/wp-content/uploads/2024/08/Chapter35eMountaintop.pdf>

⁸⁶Available as a free download from the “Immanuel Approach (Draft Version)” section of the Getting Started page of www.immanuelapproach.com.

⁸⁷For discussion of how someone with high capacity can share their capacity with others, across the bridge of an attuned connection and in proportion to the strength of the attuned connection, see the “Capacity and Immanuel” section of chapter three in the big lion book and Part II of the “Brain Science, Psychological Trauma, and the God Who Is with Us” essay series (available as a free download from the “Special Subjects/Advanced Topics” section of the Resources page of www.immanuelapproach.com).

basis,⁸⁸ and seeing fruit from Immanuel healing in those around you, will constantly remind you why it is worth the effort and time to maintain your Immanuel lifestyle.

3. Persisting over time, especially through distractions and challenges: I have been surprised and sobered to notice that some people will have powerful positive experiences with the Immanuel Approach, and even be living an Immanuel lifestyle, but then walk away from any involvement with the Immanuel Approach. Sometimes their Immanuel lifestyle will be derailed by a huge, sudden disruption, such as changing jobs, moving to another state, or being diagnosed with cancer, and then they never go back. And in other situations, the person slowly drifts away from an Immanuel lifestyle as they get increasingly absorbed in other interests and activities that compete for their time and energy, such as sports camps, romantic relationships, home ownership, or an increasingly demanding career.

However, I have also observed that being imbedded in an IA community, where you are regularly interacting with others who are living an Immanuel lifestyle, helps to persist with an Immanuel lifestyle over time, even through distractions, major life changes, and other life challenges:

- When you are part of an active IA community, you will regularly be hearing stories about beautiful, powerful encounters with Jesus, and you will be seeing the fruit in people's lives that result from their Immanuel encounters. This will constantly re-inspire you to make the effort and set aside the time necessary for persisting with your Immanuel lifestyle.
- On days that you are tired, discouraged, or confused, you can be encouraged/bolstered by the excitement and faith of the others in your community. (On the days they are tired, discouraged, and confused, you can return the favor.)
- Regular interactions with others who share Immanuel stories, who display IA healing fruit, and who are involved in IA ministry helps keep the Immanuel Approach more central in day-to-day life, and this protects against the slow, subtle, sneaky drift toward all of the distractions that compete and away from an Immanuel lifestyle.
- Finally, if your Immanuel lifestyle has been derailed by an especially difficult life challenge, or if you realize that you have been drifting away due to distractions, being surrounded by IA community can make it much easier to re-engaging.

4. Examples of IA community: In case you are wondering, "So what does IA community actually look like?" here are a few specific, concrete examples:

- Practice partners: At the "Lite" end of the IA community spectrum, you can find one (or several) practice partners – people you get together with every one-to-several weeks and trade off facilitating for each other. You can also compare notes

⁸⁸It is especially easy to share our Immanuel stories with others who are already familiar with the Immanuel Approach. So when we are in IA community, we are much more likely to both share and hear Immanuel stories.

regarding principles and techniques as you learn together and support each other.

- Discussion/practice groups: One of the best options in the middle of the spectrum is discussion/practice groups. For example, I know of several groups that get together once each month for a long evening of Immanuel Approach study and practice. They share a pot-luck meal, discuss one of the chapters from this book, watch a demonstration by the group leader (an alternative is to watch a clip from one of the live-session DVDs), and then break up into smaller clusters to practice. The participants I have spoken with report that this has been very rewarding and effective for learning, and also encouraging, life-giving, energizing, and inspiring with respect to building and living an Immanuel lifestyle.
- Deluxe IA community: At the ideal, deluxe end of the spectrum, you start with both options already mentioned and then add/recruit a network of family, friends, and colleagues who are increasingly living IA lifestyles.
- Anyone who knows about the Immanuel Approach: Anyone in your life who knows about the Immanuel Approach will contribute to your IA community in one way or another.

5. *Finding/building your IA community:* In case you are wondering, “So how do I find/build my IA community?” here are a few suggestions:

- Use materials from the Getting Started page to introduce your family, friends, and colleagues to the Immanuel Approach. (This is the ideal plan from my perspective, since it also helps to actively spread the Immanuel Approach.) Again, anyone in your life who knows about the Immanuel Approach will contribute to your IA community in one way or another.
- Use the network directory to find others looking for a study/practice group.
- You can sometimes meet people who are a good fit for your personal IA community in training/practice groups associated with other ministries that teach the Immanuel Approach, such as Immanuel Practicum with Patti Velotta, Face to Face with Cathy Little and Melinda Wilson, or Alive and Well with Margaret Webb.
- Many people have built very life-giving IA communities by starting an IA study/practice group at their church.

6. *IA community people are my tribe:* In addition to the benefits described above, I just love being with others who know about the Immanuel Approach and who are living Immanuel lifestyles. IA community people are my tribe. It’s especially fun and encouraging to be with them. I experience especially deep, meaningful, satisfying connection when I am with them. And I experience especially generous, robust relational-connection joy when I am with them.

B. They are doing _____ (fill in the Blank) differently. Are they still doing the Immanuel

Approach? One can make potato salad with regional/cultural variations. For example, you can add some chili powder and make Tex Mex potato salad, you can add some curry powder and make Asian Indian potato salad, and you can add some panang red curry paste and make Thai potato salad. But if you bring me a dish that has slices of banana, chunks of pineapple, strawberries, blueberries, and slices of orange -- oh, and no potatoes at all -- then please do not call it potato salad. If you are making fruit salad, then call it fruit salad.⁸⁹

I want to encourage Immanuel Approach facilitators and trainers to be flexible, to learn, to experiment - I want our providers to adapt the Immanuel Approach to fit best in their particular context. But I also want our providers to facilitate and teach the Immanuel approach as opposed to something else -- I want our providers to make potato salad as opposed to fruit salad. It is important for the Immanuel Approach community to care for both of these concerns -- it is important for the Immanuel Approach community to be creative, flexible, and adaptable *while still making potato salad as opposed to fruit salad.*

Possibly the most important force driving healthy potato salad variation is that all providers facilitate sessions and develop training materials with adjustments that reflect their specific cultural settings, the specific logistical challenges they are dealing with, and their own personal experiences with the Immanuel Approach.

See the essay, “Variations That Are Still Immanuel Approach (Potato Salad Analogy),” for a detailed discussion of six examples of acceptable variations within genuine Immanuel Approach:

- The amount of emphasis placed on visual imagery
- The amount of emphasis placed on body sensations
- Whether or not to start each session with relaxation
- Deliberate appreciation focusing especially on the goodness of God, as opposed to focusing especially on the details of the positive memory
- Group exercises – large group vs dividing up into small practice groups
- Perceiving and connecting with Jesus in the context of the positive memory vs in the context of the IA session in the present

Again, each provider facilitates sessions and develops training materials with adjustments that reflect their specific cultural settings, the specific logistical challenges they are dealing with, and their own personal experience with the Immanuel Approach. This is a powerful, universal phenomenon. I think being aware of this phenomenon will help to avoid unnecessary misunderstanding, confusion, and division, and help us to keep learning and growing together as a community. Especially as facilitators and trainers, it is helpful to be aware that others have different experiences with respect to these aspects of the Immanuel Approach, and it is important to make space for these people who have different experiences from our own.

⁸⁹Thank you to pastor Patti Velotta for this helpful analogy/metaphor.

C. I have a concern about somebody in the IA community. Can you talk to them?

I occasionally get emails from someone in the IA community expressing concern about another member of the IA community and/or describing a conflict they have had with another member of the IA community. And some of these emails also include some form of, "Can you please get involved and address the problem?"

- *Nobody perceives all of the details with perfect accuracy:* In my experience, nobody is able to perceive all of the details in these difficult situations with perfect accuracy. In addition to the background reality that we are all finite and fallible, my experience is that all of the players in these difficult situations have at least some triggering impairing their discernment.
- *I am not able to clarify/verify the details:* Since the people bringing me these concerns are never able to perceive all of the details with perfect accuracy, if I were to get in the middle of these situations I would need to do a fair amount of investigation – talking to all of the people involved – in order to clarify/verify the details. In light of the size of the IA community, and the corresponding number of people who might ask me for help with these situations, simple limitations of time and energy make it utterly impossible for me to get involved with individual conflicts/concerns.
- *I keep these concerns in the back of my mind (and in a folder):* The above points having been made, if you have a negative experience with someone in the IA community, please do share this with me. As much as possible, just describe what happened. This will give me information that will help me discern as I go forward. I have a folder where I keep all concerns that I receive. When I receive a concern, I keep it in the back of my mind and watch for any evidence that I can observe for myself that will clarify the situation. If a number of different people contact me regarding the same concern, I am especially attentive to watch for anything that I can observe for myself. Other than this, I am unable to investigate the details or get in the middle of specific concerns/conflicts.
- *I hear and ponder concerns in context:* I hear and ponder these concerns in the context of my experience that nobody perceives these difficult situations with perfect accuracy. Again, there is always at least a little misperception and triggering on both sides.
- *My most important contribution:* My most important contribution is that I make the same invitation/request/exhortation to each of the people involved. Please, please, please:
 1. Check for triggering: (Do your relational circuits go off when you think about, talk about, or interact with the person in question?). And then check for triggering again. And then check for triggering again.
 2. *Work to resolve your triggers:* It is not always possible to completely resolve all triggers that are getting stirred up, but the more triggering you remove from the situation, the better your relational skills and discernment will be and the better chance you will have of navigating an ideal resolution.
 3. *Work to keep your relational circuits online:* If you have triggers related to the person and/or specific situation, it will be very easy to slide into nonrelational mode (enemy

mode) when you think about, talk about, or interact with the person and/or specific situation. When your relational circuits are on, it's easy for Holy Spirit to work in your heart. When your relational circuits are off, it's easy for the enemy to work in your heart. So even as you are working to find and resolve the underlying traumas, it is also important to use the principles and interventions described in *Outsmarting Yourself* to get your relational circuits back online whenever you get triggered.⁹⁰

1. *Others in IA community are not my employees:* Especially those who are new to the IA community sometimes misunderstand my relationship with other Immanuel Approach leaders. I provide training and mentoring *as a consultant* to Immanuel: A Practicum, Face to Face Ministries, InterVarsity Christian Fellowship, Alive and Well, Healing Center International, and many other ministries and churches. And everybody in the Immanuel Approach community uses my material as the foundation for their Immanuel Approach work. But I do not employ any of these people, and they are not under my supervision in any kind of official organization.
2. *Use any established channels that are available:* Within most churches, and within many ministries (for example, InterVarsity), there are established channels for raising concerns/lodging complaints/sorting out interpersonal conflicts. If you and the person you are concerned about are both in any such organization, please use those established channels.

D. How can I help spread the Immanuel Approach? I get quite a few e-mails along the lines of, "I love the Immanuel Approach! I and my family (and friends, clients, parishioners, etc) have experienced (fill in various poignant benefits and blessings) through the Immanuel Approach. Is there anything I can do to help spread the Immanuel Approach?"

First of all, I LOVE getting these e-mails. I love hearing about the many ways in which people are experiencing blessings with the Immanuel Approach, and it is very encouraging that so many are wanting to help more people benefit from this wonderful resource. Here are a few quick thoughts:

- Embrace the IA lifestyle, with regular IA sessions in one context or another. One of the most powerful ways to spread IA is to exhibit increasing, lasting, observable fruit in your life, and then be ready to share about your experience with IA as those around you start asking about the positive changes in your life. As those around you see, be ready to share.
- Look for opportunities to train one or two at a time, in your closest circles. For example, "I can facilitate a session for you if you would like to try it - and we can do just the first steps...if that feels more comfortable." And then, "If you would like, you can try facilitating for me..."
- Be familiar with the intro resources on the Getting Started page, and when people ask you about IA, refer them to the specific intro resources that would be most appropriate for their

⁹⁰For a detailed discussion of triggering, how to tell when you are triggered, relational circuits, how to tell whether or not your relational circuits are online, and how to deliberately get your relation circuits back online if they are off, see *Outsmarting Yourself*.

particular situation.

Thank you to all of you who are helping with this!

E. Do You Offer Scholarships/Discounts for Immanuel Approach Training/Materials?:We occasionally get the question, “Are scholarships/discounts available for Immanuel Approach training and/or materials?” Here is our response for people in first-world countries, and also for ministers/ministries that raise support in first world countries:

It would be wonderful if there were a university, a larger ministry, or a charitable organization behind Charlotte and I that could provide the funds and the discernment process for awarding scholarships. Unfortunately, this is not the case. So if you really, really, really want Immanuel Approach training/materials but don’t have the funds, I would encourage you to pursue a “Do It Yourself” scholarship.

For example, check with your church, or the healing ministry you are volunteering with regarding the possibility that they might help. If your church or ministry are not able to help, then explain your Immanuel Approach work to your family, friends, and wider faith community. Just like you would do if you were raising money for a mission trip – tell them about the exciting things the Lord is doing through the Immanuel Approach and invite them to be a part of your vision to use these principles and tools to help people experience the living, tangible, interactive, personal, friendship presence of Jesus. I also encourage you to talk to the Lord about this need. Again, just as you would do if you were raising money for a mission trip – ask the Lord for help with raising the needed funds. Finally, if you are providing inexpensive or free ministry to family, friends, fellow-parishioners, or clients, it would be reasonable to ask them to help you with the cost of training.

And remember that there is a huge amount of free-download material on our website.

XI. Questions regarding additional training

A. How would you suggest someone go about learning the Immanuel Approach? We frequently get questions along the lines of how/where can I get training regarding the Immanuel Approach, and I am constantly updating my response to this question. Here’s my updated response as of May 2024:

- *Live training seminars, especially for the supervised practice exercises:* Ideally, the core of Immanuel Approach training should be learning directly from someone who is already knowledgeable and experienced regarding the Immanuel Approach. There is nothing like going to a training event where you can watch a live demonstration, get practical tips for the specific circumstances in which you will be practicing, and then have a calm, confident, experienced trainer checking in with each small group as you are actually taking the step of facilitating your first session. Unfortunately, at this time I do not have any kind of training institute, I do not offer internships/apprenticeships, and I am not providing any *regular schedule* of seminars designed to train people to use the Immanuel Approach.

However, even though I am not offering regularly scheduled training events myself, there is a small but steadily growing handful of others who are providing Immanuel Approach training, such as pastor Patti Velotta (and those she has now trained) and Melinda Wilson and Cathy Little with Face-to-Face Ministry. Information regarding these

trainers is available through the Immanuel Approach network directory,⁹¹ and information regarding additional trainers will become available through this same network directory as more people become trainers and post profiles.⁹²

- *Dr. Lehman Basic Training Videos:* There is good news for those of you who are not able to get to a live seminar. I spent three thousand hours during the COVID pandemic putting my basic training seminar on video. There is a separate training segment for each component of the Immanuel Approach process, and each of these training segments includes a short teaching block explaining the theory, a live demonstration portraying the component just explained, and then detailed instructions for practicing the component that has just been explained and demonstrated. Gathering together a practice group, viewing the teaching segments and demonstrations together, and then going through the practice exercises with each other will be almost as good as going through my in-person seminar.⁹³ And especially if you are in a remote location, this do-it-yourself seminar with my training videos will be much more convenient and much less expensive.⁹⁴
- *Both Live Seminars with Others and Dr. Lehman Basic Training Videos:* A number of people have told me that they went through my basic training videos, and then also participated in one or more basic seminars presented by other trainers. All of these people have reported that this combination was particularly effective. In addition to the teaching repetition helping them to get a stronger grasp on the core principles, and the extra practice exercises helping them to gain confidence as facilitators, they found that going through the training with several different presenters helped them get a feel for which pieces are foundational components that always need to be included and where it is okay to modify details in order to produce a better fit for different audiences.
- *Keep practicing:* A really important part of training is to *keep practicing*, (in the context of conference exercises, study groups, or some other setting) until you *feel comfortable* facilitating IA sessions. This usually requires at least 4-6 successful repetitions through the whole Immanuel Approach process, from the opening prayer and initial positive memory through resolution of a traumatic memory and then the closing prayer.
- *Big lion book:* For intermediate-advanced training, you will want to work through the big lion book (ideally with a study group).
- *Live ministry sessions:* Your right hemisphere wants demonstration – “*Show me what it*

⁹¹The network directory can be accessed from the “Referrals” page of the Immanuel Approach website, www.immanuelapproach.com.

⁹²Note that different trainers may approach Immanuel Approach training very differently. For example, Pastor Velotta places more emphasis on biblical support for the Immanuel Approach and more emphasis on visual imagery, whereas the Alive and Well team places more emphasis on brain science and on body awareness. If you are not having a good experience with one trainer, please try working with another trainer before deciding that the Immanuel Approach is not worth pursuing.

⁹³The ideal foundation for a video-training practice group is for at least some of the members to attend a live seminar with supervised practice exercises.

⁹⁴See the Store page of www.immanuelapproach.com to purchase the Immanuel Approach Basic Training DVD set or register for the online course.

looks like--*show* me how to do it.” Our Live Ministry Series (LMS) sessions⁹⁵ are the most convenient resource to obtain this. LMS #24 *Ian*: “*I’m not enough*,” LMS #18 *Rita* #3: “*Jesus is better than candy*,” and LMS #19: *Maggie* #3: *Labor & Delivery Trauma* are all excellent basic sessions. More specific suggestions regarding which live ministry sessions are best for specific learning objectives are provided in the big lion book appendix B (see below).

- *Basic Training for Recipients*: I have found that recipients are able to cooperate with the process more easily when they have a basic understanding of what we are trying to do. So especially when you are just learning to facilitate, it is ideal for any recipients you work with to go through the introduction and the first three training segments of the basic training videos, as an introduction to the Immanuel Approach, before you start working with them. And if you are going to work with a person on an ongoing basis, it will be helpful for them to read through to at least Chapter 19 in the big lion book, as you continue working together. (I realize that this is a significant chunk of reading, but I think the benefits are worth the effort.) Chapters 16 and 17 will especially help recipients to embrace the “describe everything that comes into your awareness” part of the Immanuel Approach process.
- *Discussion/Practice Groups*: Discussion/practice groups can be an excellent way to learn the Immanuel Approach. For example, I know of several groups that get together once each month for a long evening of Immanuel Approach study and practice. They share a pot-luck meal, discuss one of the chapters from this book, watch a demonstration by the group leader (an alternative is to watch a clip from one of the live-session DVDs), and then break up into smaller clusters to practice. The participants I have spoken with report that this has been very rewarding and effective. (The “Psychological Trauma, Implicit Memory, and the Verbal Logical Explainer” teaching series can also be a good resource for the discussion component of this kind of study group.) And again, keep practicing until you feel comfortable facilitating Immanuel Approach sessions.

Note: it should be safe to practice the Immanuel Approach in the context of discussion/practice groups if you use the safety nets and exercise instructions described in Chapters 14 and 24.⁹⁶ (Without skilled Immanuel-Intervention troubleshooting, some people may not be able to establish an interactive connection during the initial steps of the process. And these people will be disappointed when the safety net guidelines require that they not participate fully in the later steps of the process. Nevertheless, it is very important to abide by these group exercise safety nets unless your group is full of experienced facilitators.)⁹⁷

- *Mentoring Groups*: Mentoring groups can be very helpful for anyone who is struggling with getting started with facilitating basic Immanuel Approach sessions. For example, if

⁹⁵Live Ministry Session (LMS) streaming downloads and DVDs can be obtained from the Store page of www.immanuelapproach.com.

⁹⁶This same material is also presented in the IA Basic Training video series, and in the Exercises, Prayers for Groups and Beginners section of the Resources page of www.immanuelapproach.com.

⁹⁷Groups with severe trauma and poor discernment can still get into trouble, but most discussion/practice groups should be able to practice safely if they carefully apply the safety nets recommended for group exercises.

you have specific triggers that are getting in the way, or there are portions of your maturity-skill profile that need to be strengthened, participating in a mentoring group can help you get past these initial difficulties. And mentoring groups are also one of the best resources for intermediate and advanced training. For example, I run several mentoring groups in which I provide intermediate and advanced teaching, modeling, coaching, and supervision for small cohorts of eight participants in each group.

The bad news with respect to my mentoring groups is that they are reserved for leaders in the wider Immanuel Approach community and/or those who are actively helping to promote/spread the Immanuel approach. Fortunately, there is also good news with respect to mentoring groups. A steadily growing cohort of others are now also providing excellent mentoring groups. For example, pastor Patti Velotta provides a variety of training groups very similar to my mentoring groups, for those who are a part of her Immanuel: A Practicum network. Andy Ross is now providing mentoring groups. Melinda Wilson and Cathy Little with Face-to-Face Ministries provide training groups similar to my mentoring groups. And Sharon Ogden and Molly Emerson with Immanuel Way Ministries are now providing several mentoring groups.

Information regarding these trainers is available through the Immanuel Approach network directory (accessed from the Referrals page of our Immanuel Approach website), and information regarding additional trainers will become available through this same network directory as more people become trainers and post profiles.⁹⁸

- *“This Is What It Looks Like” Models:* As mentioned above in the comments regarding our Live Ministry Series sessions, the best way to learn the right-hemisphere skill component of facilitating the Immanuel Approach is to watch someone else do it. In the ideal Immanuel Approach training package, you will find someone who is already getting good results with the Immanuel Approach and who can provide a live “this is what it looks like” model. The most straightforward way to get this piece is to participate in training events in which the trainer provides live demonstrations, or to be a part of a mentoring group; but occasionally you will also be able to find other facilitators and recipients who will allow you to observe. It may not always be possible to find this, but it is ideal, and I encourage you to ask the Lord for guidance and then actively watch for opportunities in which you can observe effective facilitators.⁹⁹ As mentioned above, our Live Ministry Series sessions can provide “this is what it looks like” modeling to some extent.

Unfortunately (or fortunately, depending on your perspective), at this early point in the journey regarding the Immanuel Approach, the Lord may be calling you to be one of the pioneers—one of the people who embraces the special challenge of helping to lead the way in learning and practicing something new. If this is the case, then may the Lord bless you to go forth with both boldness and humility, and then to provide modeling for others.

For several additional points, and a section on supplementary resources, see Appendix B.¹⁰⁰

⁹⁸Note again that different trainers may approach Immanuel training very differently. If you are not having a good experience with one trainer, please try working with another trainer.

⁹⁹For example, some of the training events provided by the people/ministries in the “Trainers” section of the “Training” page of www.immanuelapproach.com routinely include live demonstrations.

¹⁰⁰The updated, most recent version is available as the last file with the Draft version of the big lion book – accessed from the drop-down menus from either Getting Started or Resources tabs on the

Summary headings/brief summaries for the additional points have been included here for the readers convenience.

- *Consultation and Backup:* In the ideal Immanuel-Approach training package, you will also find someone who can provide ongoing consultation and backup as you learn.
- *Observation and Feedback:* Yet another piece of the ideal Immanuel Approach training package is a coach who can observe you work and then offer feedback/constructive criticism.
- *Go Back to the Basics If You Feel Overwhelmed:*
 1. Care for your own connection with the Lord.
 2. Build an increasingly strong and accurate experiential knowledge of who the Lord is and how He works.
 3. Get your own healing.
- *Additional Thoughts Regarding Do-It-Yourself Immanuel Approach Training Programs:*
 1. Beginners can use group-exercise safety nets as they practice.
 2. There is a wide range with respect to difficulty, it's okay to say, "This One Is too Much for Me."
 3. Relational maturity skills, capacity, and discernment.
- Supplementary/Do-It-Yourself Resources:

B. Do you offer continuing education credit (CEUs) for Immanuel Approach training?

Unfortunately I have not been able to find a way to offer CEUs. (I spent more than one hundred hours investigating a number of different possibilities, but could never find a plan that was workable.) Sorry I can't give you better news regarding this one.

C. How can I become an Immanuel Approach trainer? Occasionally someone will ask, "How do I become an Immanuel Approach trainer? What do I need to do to be able to teach the Immanuel Approach to others?" Unfortunately, I do not have an established program for training or certifying those who want to teach the Immanuel approach. That being said, here are my thoughts about becoming a trainer in the absence of an official "training for trainers" program:

- *Start in small settings and start right away:* All of the additional points presented below are for people who want to put on seminars to train large groups. However, anyone who discovers the Immanuel Approach and is excited about it can start sharing with others immediately. You can talk to your friends, family, and colleagues about what you are learning. You can tell them about the book and essay excerpts, video clips, *Live Ministry Series* DVDs, and other resources that you have found to be most helpful.¹⁰¹ You can share about your own experiences with receiving and/or facilitating the Immanuel approach. And if you begin using the Immanuel Approach in your emotional healing ministry/therapy

Home page of www.immanuelapproach.com.

¹⁰¹The Getting Started page of www.immanuelapproach.com especially provides resources that will be helpful for talking about the Immanuel Approach to people who are just starting to learn about it.

practice, you will gain additional teaching practice as you explain the Immanuel Approach principles and tools to your clients.

One of the easiest ways to provide training for a group of friends and/or family and/or colleagues is to shepherd them through the basic training videos. For each training segment, you can watch the explanation and demonstration parts of the segment with the group, followed by time for questions and answers, and then coach them through using the exercise handouts to do the practice portion of the segment.

Note: if you are really excited about the Immanuel Approach and want to share it with others, please read through *An Introduction to the Immanuel Approach* and carefully review chapter thirty-nine in the big lion book. If you are talking about it to everyone you know, it will be really helpful to the wider Immanuel Approach community for you to explain it correctly (and it can be really costly to the wider Immanuel Approach community for you to present a confused version of the Immanuel Approach.)

- *Become an effective facilitator:* If you want to be a trainer, you first need to become a consistently effective facilitator. *One-hundred percent* of those I know who are currently effective trainers first became consistently effective facilitators. One practical point here is that live demonstrations are an important resource for training. As people are learning the skill aspects of facilitating, their right hemispheres want to see someone model/demonstrate, “this is how to facilitate.” (I always include at least one live demonstration whenever I provide Immanuel Approach training.) And, obviously, you cannot include live demonstrations in your training if you cannot consistently facilitate successful sessions.

So the next obvious question is, “How do I learn to facilitate?” The FAQ question immediately prior to this one and Appendix B in *The Immanuel Approach for Emotional Healing and for Life* address this question in detail.

- *Thoroughly understand the basic principles and tools:* If you want to be a trainer, you also need to have a clear cognitive understanding of the principles and tools included in the Immanuel Approach. I think of *The Immanuel Approach: For Emotional Healing and for Life* as required reading for anyone who wants to become a trainer. You do not have to master every page (it’s a very large book), but you should have a strong understanding of Parts I and II, and also chapters 24, 25, 31, and 35 from Part III.
- *Be familiar with Chapter 39 from the big lion book:* If you want to train others, please be familiar with the material in Chapter 39, “How Do I Know If I Am Receiving/Facilitating/Teaching the Genuine Immanuel Approach?” If you claim to be teaching the Immanuel Approach, please do teach the Immanuel Approach. As explained in Chapter 39, it is very costly for people to teach an inadequate and/or contaminated version of the Immanuel Approach, but then still call it the Immanuel Approach. (If you don’t yet have a copy, the store page on our website, <http://www.immanuelapproach.com/products-page/>, has a link to the team that does our online fulfillment.)
- *Receive regular Immanuel Approach healing:* We ALL have wounds and triggers that hinder our discernment, get in the way of peak performance, and make us vulnerable to ministry disasters. If you want to be the best possible trainer, you should be using the Immanuel Approach to shovel away at your own wounds and triggers. Ideally, you should

develop and live the Immanuel lifestyle. (For a discussion of the Immanuel Lifestyle, see “What is the Immanuel Lifestyle?” in section I above, and also supplementary chapter 35b from the Getting Started page of the Immanuel Approach website.)

- *“Training/Practice Exercises for Groups & Beginners”*: The “Training/Practice Exercises for Groups & Beginners” overview explanatory essay includes many practical tips regarding how to teach/share/train the basic principles and tools. (This essay can be accessed from the “Training/Practice Exercises for Groups and Beginners” section of the Resources page of www.immanuelapproach.com.)
- *Immanuel Approach Basic Training videos*: As mentioned above, one of the easiest ways to provide training for a group is to shepherd them through the basic training videos. Again, for each training segment, you can watch the explanation and demonstration parts of the segment with the group, followed by time for questions and answer, and then coach them through using the exercise handouts to do the practice portion of the segment.

If you decide to develop your own training materials, to accomplish the best possible fit for the particular cultural and logistical issues that you will be dealing with, then I would strongly encourage you to go through my Immanuel Approach basic training videos with this very specific training task in mind. I have worked for many years and thousands of hours to put together my current basic training package, and hopefully you can benefit from my many rounds of beta-testing – you can note which lecture explanation content I include in my basic training (and also the theoretical explanations I choose to leave out, as content that is *not* strategically necessary for basic training); you will see how I alternate back and forth between explanation of theory, demonstrations, and experiential exercises; and you will experience, and get written notes for, the practice exercises that carefully add each component of the process.
- *Attend an in-person seminar (or several)*: When you get to the point at which you want to start providing training events, you will want to attend an event that is as close as possible to what you are wanting to provide. Again, the right-hemisphere part of your brain that learns *skill* aspects of being a trainer will want to see someone *demonstrate* what you are trying to learn to do. For example, one of the most challenging parts of providing Immanuel Approach training seminars is leading a whole room full of participants through the practice exercises. You will greatly benefit from observing an experienced trainer who is doing this well. Finally, it would be ideal to observe several different experienced, effective trainers, to provide several skill-learning repetitions for your right hemisphere, to get a feel for acceptable variability between different trainers, and to get a sense of which variations you prefer.¹⁰²
- *Inspire, find people who want to learn from you*: You will also need to find people who want to learn from you and/or inspire people to want to learn from you. I do not have an established structure for training people regarding the Immanuel Approach; and, as mentioned earlier, I do not have any kind of official certification to establish people as trainers. All of this is to say that I do not have a system where you can just get certified as a

¹⁰²For discussion of acceptable variability with respect to how different trainers present the Immanuel Approach, see the “Variations That Are Still Immanuel Approach (Potato Salad Analogy)” section at the end of chapter forty-eight.

trainer, and then say, “Sign me up as the trainer for the next seminar request that comes in.” Rather, you will need to develop your own connections with respect to people who want to learn about the Immanuel Approach, and, specifically, people who want to learn about the Immanuel Approach *from you*.

- *Pastor Patti Velotta with Immanuel: A Practicum*: Pastor Patti Velotta has been doing Immanuel Approach training for a number of years, and she is now raising up others to present the training package she has developed. If you are interested in this possibility, the first step would be to attend one of her basic training seminars, in which you will experience Pastor Velotta delivering her basic training package. If you like her material, and can see yourself presenting it as the way you would provide Immanuel Approach training, you and she can discern together regarding whether you should be one of her training presenters. (Note: this discernment process would not merely be the subject of a couple of meetings, but rather would need to take place over time. In order to become one of her presenters, you need to be doing your own Immanuel Approach healing work, and you need to demonstrate good relational maturity skills, high emotional capacity, and a trustworthy character (among other things). And you need to do/demonstrate all of these pieces consistently over time.) For more information on Pastor Velotta and her Immanuel Approach ministry, see www.immanuelpracticum.com.

XII. Questions regarding specific training resources

A. Do you have a “cheat sheet” that summarizes the Immanuel Approach very briefly – something much shorter than the full exercise instructions – something that just briefly reminds the facilitator of the key components of the Immanuel Approach? Most ministry teams use more detailed exercise instructions (such as those I use for the exercises in the Basic training seminar) for facilitators who are just learning the Immanuel Approach process; and then once the facilitators have a bit of experience, they use a much shorter (ideally just one page) prompt/cheat sheet to give the facilitators brief reminders that are easier to find. Several variations of our one-page cheat sheet can be found at the bottom of the “Exercises, Prayers for Groups and Beginners” section on the Resources page of www.immanuelapproach.com. (Thank you to the Immanuel Approach team at Laguna Niguel Community Vineyard Church for the graphic layout.)

B. What are the best resources to purchase for starting an Immanuel Approach ministry at my church? *For each of the resources mentioned below, see Appendix B in the big lion book for thoughts regarding how to use the resource as part of your IA training program.*

If you have a generous budget:

- Get a copy of each of the books (*Outsmarting Yourself* and the big lion book) for each person who will be participating.
- Get a full set of the Lehman DVDs (both the Live Ministry Session DVDs and also the teaching DVDs) for the team library. If you really do develop an ongoing Immanuel Approach ministry, every one of these resources will eventually be valuable. Note that taking advantage of the “one of everything” package will provide substantial savings.

For a moderate budget:

- Get a copy of each of the books (*Outsmarting Yourself* and the big lion book) for each of the people involved in leadership for the ministry.
- Get the following as good representatives of basic, intermediate, and advanced Immanuel Approach sessions:

Basic: LMS #24, Ian: “*I’m not enough*”, LMS #19, Maggie #3: *Labor & Delivery Trauma*; LMS #18, Rita #3: *Jesus is Better than Candy*, LMS #17, Renae: *Healing Helps Parenting*.

Intermediate: LMS #7, Eileen: *Immanuel Intervention (Intermediate)*; LMS #9, Doug: *Immanuel Interventions (Intermediate)*.

Advanced: LMS #3, Patricia: *First Session with Internal Parts*; LMS #26, Rita #1: *Advanced Immanuel Intervention*.

- Get Condensed Sets Four and Five (Live Ministry Series #20 and #25) to serve as an especially effective resource for introducing the Immanuel Approach to new people.
- Get the following four teaching sets: *Immanuel Approach Basic Training*; *Immanuel: God with Us*; *Psychological Trauma, Implicit Memory, & The Verbal Logical Explainer (VLE)*; and *The Immanuel Lifestyle and Sustaining Joy for a Lifetime*.

For a minimal budget:

- Get as many copies of *Outsmarting Yourself* and the big lion book as you can afford.
- Get the following as good representatives of basic and intermediate Immanuel Approach sessions (wait until the ministry is going well to invest in advanced sessions):

Basic: LMS #24, Ian: “*I’m not enough*”, LMS #19, Maggie #3: *Labor & Delivery Trauma*.

Intermediate: LMS #7, Eileen: *Immanuel Intervention (Intermediate)*; LMS #9, Doug: *Immanuel Interventions (Intermediate)*.

- Get Condensed Set Four (Live Ministry Series #20) to serve as an especially effective resource for introducing the Immanuel Approach to new people.
- Get the following three teaching sets: *Immanuel Approach Basic Training*; *Psychological Trauma, Implicit Memory, & The Verbal Logical Explainer (VLE)*; and “*The Immanuel Lifestyle and Sustaining Joy for a Lifetime*.”

C. Do you have Immanuel Approach materials that have been translated into other languages? As of May 2024, we have limited materials translated into the following languages:

- Chinese
- Dutch
- Farsi
- French
- German
- Indonesian
- Japanese
- Korean
- Polish
- Portuguese
- Romanian (pending)
- Russian (pending)
- Spanish
- Swahili
- Thai
- Turkish
- Ukrainian

For additional information regarding the specific materials translated into each of these languages, see Translated Materials, accessed from the left-hand sidebar on the Home page of www.immanuelapproach.com.

D. Is Dr. Lehman available for sessions and/or consultations? I get many requests for individual sessions, and I totally understand peoples' desire to work with a facilitator with extensive experience and proven efficacy. Especially when they have a particularly difficult, complicated situation and/or have already tried working with other ministries and/or therapists, even including others who facilitate Immanuel sessions. If I were in this situation, I would also ask for sessions with Dr. Lehman. Unfortunately, intense time constraints make it impossible for me to provide individual sessions. It saddens me to say "no" to so many earnest requests, but I just can't find a way to fit more than twenty-four hours into each day.

I also get many requests for consultations. And I totally understand people's desire to get consultation input from someone with extensive experience and proven efficacy. Especially when they have a particularly difficult/complicated situation, and especially when they have already tried many other resources and/or ministries and/or therapists. If I were in this situation, I would also ask for a consultation from Dr. Lehman. Unfortunately, intense time constraints make it impossible for me to provide consultations regarding specific situations. Again, I just can't find a way to fit more than 24 hours into each day.

One small piece of good news: At the end of the Advanced Topics section below, I offer a few thoughts that might be helpful for those of you who are dealing with a situation with some aspect that is beyond your current training and/or experience and/or skill and/or capacity (and therefore you are understandably looking for consultation input as one way to bring additional resources into the situation).

XIII. Questions from Trainers

A. Is it okay to use a recent upsetting event as the initial target for teaching demos and/or practice exercises? The first and most important point, which provides context for all of the

comments that follow, is that if a person has persistent upset about a recent event in their adult life it is almost always because the recent event is triggering deeper, earlier memories. With this reality as context, I deliberately avoid recent adult life events as initial targets for demonstration sessions because:

1. If the recipient and facilitator just stay with the recent event because they are unaware of deeper, earlier memories, then tangible benefit will be minimal because the session won't address the underlying trauma that are the real source of most of the distress. Demonstrations or practice exercises focusing on recent upsetting events will therefore often be disappointing/ unsatisfying.
2. If the underlying memories are intense and highly defended, the recipient and facilitator will often spend the whole demonstration/practice exercise fighting with blockages, and never get to the deeper roots. The overall experience will therefore often be confusing and/or unsatisfying.
3. If the recipient and facilitator understand that there are usually deeper, earlier, underlying memories, and deliberately pursue this possibility, it often takes a while to connect with the recent event, focus the negative thoughts and emotions, lean into the negative thoughts and emotions, follow them to the underlying memories, and then work through the underlying memories. This is not a problem with ongoing therapy work, where you can use multiple sessions if you need to. However, with the space usually available for demonstrations and practice exercises, you will often run out of time.
4. Finally, if the recipient *does* go to earlier, deeper underlying trauma, you have no idea where she'll end up. She might end up in moderately intense traumatic memories, in which case the demonstration/practice exercise can be very encouraging (if there is enough time to find the underlying trauma and then also work through it). But the recipient might also end up in underlying trauma that is bigger/messier/more intense/more complicated than what you want for a demonstration/practice exercise.

B. How much time should I plan on for teaching demos?

For basic teaching demos:

1. Demos from teaching videos: An especially simple option is to just use the demos from the basic training seminar. The basic training videos include demos for connecting with Jesus in a non-God positive memory, connecting with Jesus in a God positive memory, basic troubleshooting, basic and intermediate safety nets, and three variations of trauma work. With this option, you know exactly how long the demo will take and you know exactly what material the demo will include.
2. Live demos: If you want to do your own live demos, I recommend planning for the amounts of time specified for the practice exercises in the Basic Training outline/summary (<https://www.immanuelapproach.com/wp-content/uploads/2025/05/Outline-IA-Basic-Training-Segs-MHPs.pdf>) or <https://www.immanuelapproach.com/wp-content/uploads/2025/05/Outline-IA-Basic-Training-Segs-Non-MHPs.pdf>), and also in each of the practice exercise instruction handouts (<https://www.immanuelapproach.com/exercises/>)

For intermediate-advanced teaching demos:

1. Live ministry series sessions: An especially simple option is to just use intermediate-advanced sessions from our Live Ministry Series (LMS) videos. With this option, you know exactly how long the demo will take and you know exactly what material the demo will include.
2. Live demos: When I do intermediate-advanced teaching demos with a recipient I don't know, I plan for 90 minutes for the actual session time. With 90 minutes you should get to a good place of resolution 75% to 90% of the time (depending on your skill level). And when you occasionally run out of time and have to use the safety net, you can remind the trainees that this is part of the plan with the Immanuel Approach. (It is good to actually demonstrate this once in a while.)

C. What about “extras” that we want to include in our Immanuel Approach teaching/training? I get a lot of requests, from people all over the world, who have discovered/developed various “extras” that they include as part of and/or in association with their Immanuel Approach work. Understandably, all of these folks would like me to look at what they are doing and approve it to be officially included as part of the Immanuel Approach. Unfortunately, I just don't have the time or energy to even begin to look through all of the potential extra concepts, principles, techniques, tools, and interventions that people ask me about. So my response to all of these requests is that I ask the people to just make it clear, when they are teaching about these extras: “This (fill in the blank -- technique, principle, tool, intervention, phenomena that we observe, etc.) is not part of Dr. Lehman's official teaching about the Immanuel Approach, but it is something that we have observed/developed/discovered and found to be helpful.”

XIV. Practical Logistics (Billing Insurance, Informed Consent, etc)

A. Can Immanuel Approach sessions be provided via phone/Skype/Zoom?: I regularly provide both phone and Zoom Immanuel Approach sessions, and have had excellent results with both. And I have heard this same report from many others. In fact, I have colleagues whose practices consist mostly of doing Zoom Immanuel Approach sessions with international mission teams. Given the desperate lack of IA facilitators, many people can't find a local IA facilitator (with the training, maturity, capacity, skill, etc. necessary for the specific issues in question). In this context, I am profoundly grateful that phone and Skype sessions are an option.

These points being made, there are also several important caveats:

- If possible, it is ideal to start the relationship face-to-face, and/or to have a good relationship with the person that can serve as a trust, relational-connection foundation for the IA work.
- Certain intermediate-advanced interventions are easier/more effective face-to-face. For example, the direct eye contact technique is easier and more effective face-to-face (especially when first establishing a connection with internal parts), and the enhanced

safety net interventions are more effective face-to-face. However, with more effort and skill, intermediate and advanced interventions can be adequately effective over Zoom. (I have used both the direct-eye-contact technique and enhanced safety nets over Zoom.)

- Especially for recipients who have some combination of severe trauma, inadequate coping skills (in light of the size of the trauma), and poor support network (in light of the size of the trauma), it is ideal to work face to face. The intense, complicated assessment and care around personal safety is especially more difficult to provide at a distance. *However*, even in these very difficult situations, if a local IA facilitator is not available then phone/Zoom IA work is better than no IA work. (This is the painful reality for many, especially in high-need, low-resource areas of the world.)

B. As a mental health professional, can I bill insurance for Immanuel Approach sessions?

First of all, in light of the discussion above regarding empirical evidence supporting the Immanuel Approach, it should be clear that it is appropriate to include the Immanuel Approach as part of the treatment plan for a wide variety of clinical mental illnesses.¹⁰³

Secondly, mental health professionals will be providing the Immanuel Approach in the wider context of a psychotherapy practice, and this wider context includes resources that will be important and valuable for whatever specific psychotherapy principles and techniques that might be applied. For example, mental health professionals receive training regarding boundaries and ethical practices, and they practice under the supervision and regulation of professional boards. This provides important protection for vulnerable recipients. Mental health professionals also receive training regarding basic therapy principles, tools, and techniques, such as listening skills, mindsight, mindfulness, attunement, relaxation techniques, and other tools for finding and resolving trauma-anchored blockages (very important for recipients who are not yet able to perceive or connect with Jesus). In this wider context of a psychotherapy practice, I think it is appropriate for mental health professionals to consider Immanuel Approach work as a form of psychotherapy.

Thirdly, there are literally hundreds of different approaches to psychotherapy currently being used by mental health professionals, and most of these psychotherapeutic approaches have less case study support, less indirect research support, and less theoretical support than the Immanuel Approach. As of 2023, my understanding with respect to therapists in the United States is that if you are a licensed mental health professional authorized to bill insurance, all you have to specify is “psychotherapy.” That is, you don’t have to specify which of the many forms of psychotherapy you are using when you fill out the insurance billing paperwork.

Therefore, as a licensed mental health professional (physician, specialty of psychiatry), I bill Immanuel Approach sessions as psychotherapy; and in the chart notes I label the session as “Psychotherapy with components of EMDR, coherence therapy, exposure therapy, and cognitive-behavioral therapy, with the explicit goal of memory reconsolidation, and with faith-based components at the patient’s request.”¹⁰⁴

If someone asked me to defend this policy of billing for Immanuel Approach work, I would

¹⁰³ For additional discussion regarding the appropriateness of including the Immanuel Approach in the treatment for clinical mental illnesses, see “The Place of the Immanuel Approach In the Treatment of Clinical Disorders.” (Available as a free download from the Special Subjects/Advanced Topics section of the Resources page of www.immanuelapproach.com.)

¹⁰⁴ I present the Immanuel Approach as an option, and then we include it if the patient says, “Yes, I would like to include that as part of my care.”

point out that my Immanuel Approach work is provided in the wider context of the many psychotherapy resources I bring to the table, I would point out that the faith-based components of the Immanuel Approach are included at the patient's request and with the patient's informed consent, and I would point out that the Immanuel Approach incorporates many of the key principles and techniques from mainstream psychotherapies, including those that are most strongly supported by empirical research (such as cognitive-behavioral therapy, exposure therapy, Eye Movement Desensitization and Reprocessing (EMDR), and coherence therapy¹⁰⁵).¹⁰⁶

C. Should I obtain informed consent from my clients?: In light of the fact that the effectiveness and safety of the Immanuel Approach have not yet been confirmed by empirical research, mental health professionals sometimes ask whether they should obtain informed consent from their clients before using the Immanuel Approach. I am not a legal expert, but here is what I do in my own practice, and also some thoughts regarding other possible situations:

- If someone already knows about the Immanuel Approach and comes to me specifically *asking* for it, I make sure that she has done enough preparatory reading to know what to expect, and I ask her to read and sign a short informed-consent form regarding my practice policies and emotional-healing work in general. But in these situations, I don't go through a longer informed consent process specifically regarding the Immanuel Approach. And at this point in my career, this situation in which the recipient is specifically asking for the Immanuel Approach is pretty much the only scenario that I encounter. (There are so many people asking for Immanuel Approach sessions and so few facilitators available that if people call and they are not asking for Immanuel Approach work, I simply refer them to other providers.)
- If you have a client who does *not* already know about the Immanuel Approach, and you are the one to initiate discussion of the Immanuel Approach as an option for treatment, I would encourage you to go through the informed-consent process described in the essay referenced below.
- If you are in an academic or professional setting in which your colleagues might be critical and/or skeptical, and especially if your academic or professional environment might be hostile toward a faith-based intervention, I would strongly encourage you to go through an informed consent process, such as the one described in the essay referenced below.

¹⁰⁵ Coherence therapy is the psychotherapy that most deliberately and systematically incorporates the discoveries from memory-reconsolidation research.

¹⁰⁶ For additional discussion of the principles and techniques that are shared between the Immanuel Approach and research-supported psychotherapies, see the following essays: "Cognitive Therapy and the Immanuel Approach," "The Immanuel Approach and EMDR: FAQs and Common Misunderstandings," and "Exposure Therapy and the Immanuel Approach." (These three essays are available as free downloads from from the "Special Subjects/Advanced Topics" section of the Resources page of www.immanuelapproach.com.) And see Dr. Mark Hattendorf's 466 page doctoral thesis (Mark Elliott Hattendorf, *Immanuel: Narrative Case Studies Exploring Inner Healing in Clinical Settings* (Ann Arbor, MI: ProQuest LLC, 2014)).

- I would also encourage you to go through an informed consent process if there is any reason to be concerned that the client might become adversarial and/or litigious. (For example, clients with borderline personality disorder or narcissistic personality disorder are more likely to turn on you if the therapeutic process does not go well.)

For additional discussion of informed consent, and also a sample informed consent form for the Immanuel Approach, see “Informed Consent: General Comments and Sample Form for Immanuel Approach Emotional Healing,” available as a free download from the “Resources” page of www.immanuelapproach.com.

D. Is the Immanuel Approach Psychotherapy or Prayer Ministry? Occasionally people ask whether the Immanuel Approach is prayer ministry or psychotherapy. My perception is that Immanuel Approach principles and techniques can be applied in either context. Pastors and lay ministers can apply Immanuel Approach principles and techniques in the context of *prayer ministry*, and build an Immanuel-Approach-based form of Christian emotional healing *ministry* that is Immanuel *Prayer Ministry*. Christian mental health professionals can apply Immanuel Approach principles and techniques in the context of psychotherapy, and build an Immanuel-Approach-based form of *psychotherapy*.

For additional thoughts regarding how mental health professionals can use the Immanuel Approach in the context of their psychotherapy practices, see “The Place of the Immanuel Approach In the Treatment of Clinical Disorders” and “Informed Consent: General Comments and Sample Form for Immanuel Approach Emotional Healing” in the Special Subjects/Advanced Topics section of the Resources page (<https://www.immanuelapproach.com/special-subjectsadvanced-topics/>). And see the other questions addressed above in this “Practical Logistics” section.

E. Shouldn't lay people offer IA sessions for free? Or, to put this another way, is it okay for lay people to charge for facilitating Immanuel Approach sessions? People are often puzzled/concerned, and sometimes even angry and/or offended that some lay people charge for Immanuel Approach sessions. The parallel they often describe as comparable is a family member or friend, or maybe a fellow parishioner at church, who would charge to pray for some concern they might bring to them. I would offer the following thoughts:

- We are trying to train as many lay people as possible to be able to facilitate basic sessions, and I encourage these lay facilitators to offer Immanuel Approach sessions as a gift to their family, friends, and community as much as possible.
- Those who turn out to be particularly good facilitators often get more training, and then spend more and more of their time engaged in Immanuel Approach related activities. Mostly, the question of whether or not to charge for their time just comes down to simple life logistics. If people spend an hour or two each week facilitating Immanuel Approach sessions with family and friends, there is no problem with providing sessions for free. But if they want to make a lot of time available for Immanuel Approach work, there is no magic—that time and energy have to come from somewhere (not to mention the money they spend on training and supervision). If they get paid for their time, it is a lot easier to make space for it. If folks are expecting a lay minister to offer Immanuel Approach sessions for free, then they should not be surprised when the person says, “Sorry, I don’t have any more space. I’m currently using all of the free time I have available, and don’t

have time/energy for any more.”

My short summary is that some of the best Immanuel Approach facilitators out there are lay people, and they can make a lot more space in their lives for doing Immanuel Approach ministry if they charge for it.

I think a useful parallel is someone asking you to paint their garage. How would you feel if someone came up to you and said, “I need to get my garage painted, but I don’t want to pay a professional painter. I was wondering if you might come over for a couple hours every Saturday morning and do it for me? And, of course, since you’re not a professional painter, I would expect that you would do it for free.”

If you want free Immanuel Approach sessions, I would encourage you to take the initiative to form a practice group with family/friends, and then both give and receive Immanuel Approach sessions in that context.

F. How do lay facilitators identify themselves?: There is quite a bit of variability. For example, a lay person facilitating Immanuel approach emotional healing sessions might refer to herself as a lay minister, a lay counselor, a prayer minister, an Immanuel approach facilitator, an Immanuel approach prayer counselor, an Immanuel prayer minister, or an emotional healing facilitator. Note: if you are a lay person and you do not include the word “lay” in the phrase you use to identify yourself, make sure to quickly and clearly identify yourself as a lay person in any descriptive material you provide.

G. Is it legal for lay people to charge for facilitating IA sessions?: As of May 2024, as far as we know regarding states we are familiar with, it is perfectly legal for lay people to charge for counseling/prayer sessions as long as they do not misrepresent themselves. That is, it is legal for a layperson to offer their services as a lay counselor/lay minister, and to charge whatever fee they deem appropriate, as long as they make it clear that they are a lay person. If they misrepresent themselves as having training and/or degrees that they do not actually have, they are guilty of fraud and can expect that somebody will eventually figure this out and that they will then be in serious trouble of some kind or another. They can especially expect to get in trouble if they make fraudulent claims regarding professional training and licenses in the context of billing insurance companies.

An analogy might be helpful. If I hear you mention that you had a minor accident and therefore need to have some minor repair work done, I can say “Hey, I’m not a mechanic, but I can fix that for \$100.00.” If you decide this is a good deal, I fix your car, you are happy with the job, and you pay me \$100.00, nobody will have a problem with this arrangement. I can offer to fix your car (and charge you for this service), even though I am not a trained/certified/licensed mechanic, as long as I do not misrepresent myself. However, I will get in trouble if I pretend to have training and/or certification and/or licensing that I do not actually have. And I will especially get in trouble if I fraudulently bill your insurance company under the pretext of having training/certification/licensing that I do not actually have.

H. What kind of reimbursement do lay facilitators receive?: Again, there is quite a bit of variability. People who offer Immanuel sessions for only a few hours/week and who are offering sessions to friends, family, and people in their small group usually offer the sessions for free. In contrast, people who are offering Immanuel sessions to the general public and who spend many hours each week facilitating Immanuel sessions tend to charge a fee. My observation is that it is very hard for people to make enough space in their lives to offer many

hours of sessions to the general public without charging a fee. If the person who has some other source of income (a spouse, retirement income, etc) that provides for most of the families living expenses, they can charge a very small fee to cover the costs of training, consultations, supervision, and other small concerns. On the other hand, if the person is the primary provider for his/her family, he/she will need to charge substantial fees (similar to professional therapists). Some lay people facilitating Immanuel sessions ask for free will gifts (as opposed to charging set fees); but, unfortunately, the free will gifts they receive are often very meager.

One simple, practical issue here has to do with effectiveness. We know some lay people using the Immanuel approach who are getting better results than most professional psychotherapists. If you have developed your skill, grown your capacity, built your faith, and gotten rid of your own blockages to the point that people get exceptional results when you facilitate Immanuel approach sessions, they will generally be happy to pay substantial fees and you will be able to afford spending a large part of your time each week offering Immanuel sessions. In contrast, if you still have a long way to go with respect to skill, faith, capacity, and blockages, and people experience much more modest benefit from the sessions you facilitate, you will need to charge a lot less if you want folks to keep coming back.

XV. Miscellaneous General Questions

A. Does the Immanuel Approach use guided imagery? As described in Chapters 6 and 8 in the big lion book, with the Immanuel Approach we coach the recipient to deliberately recall and re-enter memories for past positive events *that have actually happened*. And as described in Chapters 16 and 17, we coach the recipient to observe and report content that comes into her awareness *spontaneously*. However, we do *not* coach the recipient to *deliberately, proactively generate imaginary content*. In fact, we specifically coach the recipient to *avoid* generating her own imaginary content, since this actually gets in the way of receiving content from the Lord. And as described in Chapter 36 (pages 505-513), we teach the recipient to watch for the sense that she is proactively generating imaginary content with her own mind, and whenever this is noticed it is taken as an indicator that the content is *not* coming from the Lord.

For additional discussion of how Immanuel Approach perceptions of God's presence and Immanuel Approach interactive connections with God are *not* guided imagery, see chapter 6 (page 111), chapter 8 (page 125), and chapter 47 (page 746) in the big lion book.

B. Is Immanuel Approach visual imagery created by my imagination? Occasionally I hear someone say, "we use our imaginations to construct Immanuel Approach visual imagery," or "Immanuel Approach visual imagery is just the same thing as imagination visual imagery," or "Immanuel Approach visual imagery is created by our imaginations." Neurological case studies and brain scan studies indicate that this is by no means certain. As I explain below, I think there is actually an alternative explanation that is stronger.

Neurological case studies: An exceptionally well-documented case study describes a patient who experienced complete color blindness (he could only see in black and white) after a brain injury; and very careful evaluation revealed that he experienced the exact same color blindness in his waking vision, in the visual hallucinations he experienced during migraines, in the visual imagery of his dreams, in the visual imagery of all his memories, and in his

imagination visual imagery.¹⁰⁷ Similarly, a number of well-documented case studies of patients with visual-field defects caused by brain injuries revealed that the patients experienced the exact same visual-field blind-spots in their waking visual perception, in the visual imagery in all of their memories, and in their imagination visual images.¹⁰⁸

Brain scans: EEGs, functional MRIs, PET scans, and other brain scans show that waking vision, visual hallucinations, visual imagery in dreams, visual imagery in memory, and imagination visual imagery all use *some* of the same neurological circuitry.¹⁰⁹

These neurological case studies and brain scan studies clearly show that waking visual perception, visual hallucinations, visual imagery in dreams, and visual imagery in memories all use *some* of the same neurological circuitry as imagination visual imagery. But nobody believes or says, “Waking vision, visual hallucinations, visual imagery in dreams, and visual imagery in memory are all just the same thing as imagination visual imagery.” And nobody believes or says, “Our experience of waking visual perception is created by our imagination.”

We do not have neurological case studies or brain scan studies for Immanuel Approach visual imagery, but I expect that they would show the exact same results—that Immanuel Approach visual imagery uses *some* of the same neurological circuitry as imagination visual imagery, just as all of these other visual phenomena use *some* of the same neurological circuitry as imagination visual imagery. And just as with waking visual perception, visual hallucinations, visual imagery in dreams, and visual imagery in memories, it does not make sense to say, “Immanuel Approach visual imagery is just the same thing as imagination visual imagery.” And it does not make sense to say, “Immanuel Approach visual imagery is created by our imagination.”

My belief is that the Lord can directly activate our visual-imagery neurological circuitry, and that this is what is happening when Immanuel Approach recipients experience visual imagery as part of perceiving the Lord’s tangible, living, interactive presence. And again, this is *not* the same thing as recipients themselves activating parts of these neurological circuits in order to produce imagination visual imagery. In fact, if my perception is correct, then Immanuel Approach visual imagery is more like waking vision than like imagination, in that

¹⁰⁷ Oliver Sacks, *An Anthropologist on Mars: Seven Paradoxical Tales* (Vintage Books: New York, 1995), pages 3-41.

¹⁰⁸ See, for example, Martha Farah, Michael J. Soso, and Richard Dasheiff, “Visual Angle of the Mind’s Eye Before and After Unilateral Occipital Lobectomy,” *Journal of Experimental Psychology: Human Perception and Performance*, Vol.18, No. 1 (1992): pages 241-246; and Henry Head and Gordon Holmes, “Sensory Disturbances from Cerebral Lesions,” *Brain*, Vol. 34, No. 2-3 (Nov 1911): pages 102-254.

¹⁰⁹See, for example, Scott D. Slotnick, William L. Thompson, and Stephen M. Kosslyn, "Visual Memory and Visual Mental Imagery Recruit Common Control and Sensory Regions of the Brain," *Cognitive Neuroscience*, Vol. 3, No. 1 (2012): pages 14-20. DOI: 10.1080/17588928.2011.578210. Epub 2011 Jun 3; Giorgio Ganis, William L. Thompson, and Stephen M. Kosslyn, "Brain Areas Underlying Visual Mental Imagery and Visual Perception: an fMRI Study," *Brain Research. Cognitive Brain Research*, Vol. 20, No. 2 (Jul 2004): pages 226-41. DOI: 10.1016/j.cogbrainres.2004.02.012; Joel Pearson, Thomas Naselaris, Emily A. Holmes, and Stephen M. Kosslyn, "Mental Imagery: Functional Mechanisms and Clinical Applications," *Trends in Cognitive Sciences*, Vol.19, No. 10 (Oct 2015): pages 590–602. DOI: 10.1016/j.tics.2015.08.003; Satoru Miyauchi, Masaya Misaki, Shigeyuki Kan, Takahide Fukunaga, and Takahiko Koike, "Human brain activity time-locked to rapid eye movements during REM sleep," *Experimental Brain Research*, vol. 192, No. 4, (Feb 2009): pages 657-67; R. J. Howard, A. David, P. W. Woodruff, I. Mellers, J. C. Wright, M. Brammer, and S. C. Williams, "Seeing visual hallucinations with functional magnetic resonance imaging," *Dementia and Geriatric Cognitive Disorders*, Vol. 8, No. 2 (1997): pages 73-77. DOI: 10.1159/000106610.

both waking vision and IA visual imagery use neurological circuits from our visual systems to enable us to receive/perceive phenomena from *outside of ourselves*.

C. Questions regarding anger: Is anger inherently sinful? Is there an appropriate, healthy function for anger? Are anger and judgment the same thing? First, let me offer several very brief answers: No, anger is not inherently sinful. Yes, there are appropriate, healthy functions for anger, but anger has a very short shelf life before it becomes toxic. And no, judgment is not the same thing as anger; but judgment does give anger a bad name.

For much more detailed discussions of why anger is not inherently sinful, of what the appropriate functions of anger are, of what it means for anger to have a short shelf life, of how judgment and anger are different, and of how judgment gives anger a bad name, see Charlotte's fantastic essay about anger, "On the Art of Being Relationally Angry, or 'I Have a Pet Tiger,'" posted on the Special Subjects/Advanced Topics section of the Resources page.

D. Do you ever see physical healing with the Immanuel Approach? Yes, we do occasionally see physical healing with the Immanuel Approach. I have never directly asked for physical healing in an Immanuel Approach session, but I have seen spontaneous physical healings that seemed to be side effects, by-products, or indirect results of the emotional healing, spiritual healing, and deliverance that were the intended/expected results of Immanuel Approach sessions. And a number of our colleagues have also reported this same phenomenon. For an excellent example, see the story described at the end of chapter eight in the new (2024) intro book.¹¹⁰ (Here's the *very* short summary: A lady came in requesting prayer for emotional issues, but not asking for any kind of help with respect to her physical concerns. By the end of the Immanuel Approach session, both the facilitator and recipient were grateful (but not surprised) to see that the emotional wounds they had been working with had been resolved. But then they were amazed to discover that her paralyzed leg had also been healed, even though they had not even asked for this.)

E. Does an Immanuel lifestyle really need to include regular, deliberate, proactive trauma work? As described in detail in chapter three of the big lion book, the first step in expanding from the Immanuel Approach *for emotion healing* to the Immanuel *lifestyle* is widening the agenda to include many additional aspects of life, such as capacity building, maturity-skill mentoring, receiving comfort for pain in the present, and spending time with Jesus as a friend, as opposed to restricting the agenda to just emotional healing. As understanding regarding the Immanuel lifestyle and this generous buffet of agenda options has spread through the IA community, many facilitators have become convinced that after helping the recipient to establish a connection with Jesus at the beginning of the session, the next step should always be to just ask Jesus, "What do You want to do today, Lord?"

And this is understandable, because this approach is especially simple and it usually results in life-giving interactions with Jesus. In fact, when I facilitate demonstration sessions in my mentoring groups, I sometimes start the sessions in exactly this way. *However*, I am convinced that deliberate, proactive trauma work should *also* be a regular part of an Immanuel lifestyle.

- We tend to lean away from painful trauma work: My observation is that most of us (all of us?) tend to lean away from painful trauma work. If the only thing we ever do is to get a connection with Jesus, and then just say, "What do You want to do today?" our

¹¹⁰Karl Lehman, *An Introduction to the Immanuel Approach*, (Evanston, IL: Immanuel Publishings, 2024), pages 62-63.

psychological defenses will tend to subtly (or not so subtly) avoid working with trauma. Even those of us who *sometimes* cooperate with guidance from Jesus directing us to do trauma work, will, at other times, subtly resist/avoid/ignore invitations from Jesus to work with Him to resolve traumatic memories.

In my own healing journey, it has been helpful to counteract this tendency to avoid working on trauma by deliberately including regular healing work in my Immanuel lifestyle. I have Immanuel prayer times where I just enjoy being with Jesus, or look at some issue with Jesus, or do intercessory prayer in the context of and Immanuel connection, or just talk to Jesus about what's on my heart; but I also have sessions where I start with trauma work as the tentative agenda. For example, "Jesus, I've been noticing this trigger that is hindering my relationship with Charlotte. I think this is coming from underlying trauma and that it would be good to work on it with you. If my sense of direction regarding this is correct, could You please give me a sense of confirmation regarding this tentative agenda and then show me the next step forward." Or even, "This trigger is hindering my relationship with Charlotte, and unless You give me clear guidance otherwise, I'm assuming it would be good to work on this," and then I focus on the trigger and ask Jesus to help me find and resolve the underlying roots. And my observation is that these regular, proactive, deliberate trauma-work sessions have enabled me to do important, strategic healing work that I otherwise would have continued to subtly avoid.¹¹¹

- Trauma is affecting us more than we realize: Part of my discernment regarding this issue is that I am convinced we all have trauma that is affecting us more significantly than we realize. And we all have trauma that is especially affecting our important relationships more significantly than we realize. We can (at least partially) compensate for this widespread lack of self-awareness by deliberately, proactively watching for triggers, and then deliberately, proactively making time for Immanuel Approach work to address them, as part of living an Immanuel lifestyle.¹¹²
- Memory-anchored distortions, hindrances, and blockages: We all have implicit memory from past painful experiences that is hindering our relationships with the Lord (and again, more significantly than we realize). We should all be watching for places where we have distorted perceptions regarding God's character and heart, and whenever we notice this, we should deliberately, proactively make time for Immanuel Approach work to find and resolve any underlying trauma that is contributing to the problem.¹¹³

This point is discussed at length in chapter forty-two of the big lion book, but the short summary for our purposes here is that *it is very difficult to spot trauma-anchored distorted perceptions because they just feel true*. (After we find and resolve the underlying trauma, it is easy to see the distorted perceptions *in retrospect*, but they are VERY hard to see while they are still active.) In my experience, the most effective way to get around this problem is just to make trauma work a regular part of our Immanuel lifestyles. If we are regularly working on any trauma we are aware (and any trauma we can find by following triggers), we will regularly find and resolve trauma that is hindering our relationships with the Lord

¹¹¹I have also observed this with every person for whom I have facilitated regular, ongoing sessions.

¹¹²See chapters two through four in *Outsmarting Yourself* for a detailed discussion regarding why we all have such poor self-awareness regarding trauma and triggering.

¹¹³See supplementary chapter 35-c for the big lion book for additional discussion regarding how we all have implicit memory from past painful experiences that hinders our relationships with the Lord.

just by accident. For myself, persisting with this approach for the past twenty years has resulted in finding and resolving many memory-anchored distortions regarding the Lord's character and heart, and this has PROFOUNDLY blessed my relationship with the Lord.

- Observable, lasting positive changes that accumulate over time: As discussed at length in chapter thirty-six of the big lion book, the gold-standard confirmation that we are engaging with the genuine presence of Jesus is observable, lasting positive changes that accumulate steadily over time as we do regular healing work. As explained in chapter thirty-six, this is the **only** discernment criteria that has 100% reliability for differentiating between the genuine presence of Jesus and counterfeits. And "...accumulate steadily over time as we do regular healing work" is a necessary part of the 100% reliability. Obviously, "accumulate steadily over time *as we do regular healing work*" requires that we include *regular healing work* as part of our Immanuel lifestyles.
- Christianity is profoundly, inherently, foundationally relational: When we deliberately, proactively include regular healing work as part of our Immanuel lifestyle, we do more healing work than if we just "leave it to Jesus." And those who do more healing work demonstrate more observable positive changes (especially over time) -- less triggering, many different aspects of their lives getting better, *and all of their relationships improving, including their relationships with God*. In this context, I want to point out that Christianity is profoundly, inherently, foundationally relational. Putting these pieces together: If we do more healing work when we deliberately, proactively include regular healing work as part of our Immanuel lifestyles, if more healing work results in more improvement in all of our relationships, including our relationships with the Lord, and if Christianity is profoundly, inherently, foundationally relational, we can safely assume that God's usual plan is for us to deliberately, proactively include regular healing work as part of our Immanuel lifestyles.
- Baseline relational circuit status: Yet another reason for deliberately, proactively including regular healing work as part of our Immanuel lifestyles is that this will improve our baseline relational-circuit status. As we keep shoveling away—resolving more and more old wounds and bruises—we will spend less and less time subtly (or not so subtly) triggered, and we will therefore spend more and more time with our relational circuits on line. And having our relational circuits on line more and more of the time will make it easier and easier to be aware of, and connect with, the living presence of Immanuel.

An important caveat: Combinations of low capacity and/or poor support system and/or especially severe trauma and/or especially intense difficulties in the present will sometimes create situations in which it is *temporarily* strategic to mostly just spend time with Jesus (and correspondingly do minimal trauma work).¹¹⁴

F. Is the Immanuel Approach Psychotherapy or Prayer Ministry? See the "Practical Logistics" section above.

XVI. Advanced topics

¹¹⁴The story about the internal child part who spent eighteen months just sitting in Jesus' lap provides an excellent example. (See the big lion book, chapter twenty-five, pages 331-333.)

A. What do I do if I encounter something strange/unusual – something I’ve never seen before, and I have no idea what it is? When I encounter some new phenomenon that is dramatically strange and unusual – something that I have never seen before, and I have no idea what it is, I try to respond with something along the lines of, “Let’s go forward together, watching the fruit especially carefully, and being especially careful to check with Jesus regarding any questions or concerns that come up – let’s go forward together, and keep looking at, and thinking about, all of this *with Jesus*.”

I also encourage the recipient to just observe and gather data. For example, I encourage them to notice any thoughts and/or feelings and/or behaviors that seem to be changing spontaneously, and also to notice how they are changing. Whenever I encounter new, different, unusual phenomena, I find that more data always helps with respect to understanding what is happening and with discerning how best to move forward.

Finally, I have noticed a helpful perspective that I think comes from thousands of hours of observing recipients engaging with the living, life-giving, tangible presence of Jesus. I feel a profound confidence that things will make more and more sense as we continue to look at them and think about them *with Jesus*, and this gives me a more relaxed attitude regarding needing to have everything make sense right away. My spontaneous internal response is something along the lines of, “No need to go crazy trying to figure everything out right away, because it will be easier and easier to make sense out of all of this as we go forward together with Jesus. We will get more and more light as we go forward, and it will be easier and easier to make sense out of all of this as we get more light.”

B. How do you help someone who is working on infant primary-caregiver absence wounds, and says something along the lines of, “I don’t want Jesus, I want my mother!!”? This is the blockage that most often hinders a recipient from being able to receive healing for infant attachment trauma from loss of a primary caregiver. Fortunately, there are two fairly simple interventions that are usually effective:

- *Offer attunement:* The first thing I do is to offer attunement, with comments along the lines of, “Of course you want your mom. That’s the way it’s supposed to work. You should have gotten these things from your mom. It’s totally okay to want to get these things from your mom. It’s also okay for you to be hurt and sad and angry.”¹¹⁵
- *Help them engage directly with Jesus:* After they receive my attunement, and can feel that I am with them and on their side, I help them engage directly with Jesus regarding the problem/issue/blockage. For example, “Would you be willing to let Jesus be present and say all of this directly to Him? Would you be willing to let him be present and just tell him directly, ‘I don’t want You, I want my mom. And I don’t know how to change it – I don’t know how to make it different – I don’t know how to fix it. Could You please help?’”

These two pieces work for most people. If the recipient is still refusing to receive Jesus’ presence and let Him fill the absence wounds after both of these interventions, I explain “This is one of the most difficult healing blockages we ever encounter. If you can let Jesus help you get past it, that would be great. Otherwise you can wait another year (or two...or five...or

¹¹⁵Note that these comments will only be helpful if your relational circuits are on and you truly are attuning to the recipient.

twenty) until you're ready. The good news is that Jesus will keep loving you, and He will wait patiently until you are ready.”

For additional discussion regarding infant attachment trauma from loss of a primary-caregiver, for explanation regarding why the living presence of Jesus is uniquely effective for healing this particularly difficult absence wound, and for a profoundly encouraging true story illustrating this point, see chapter 30 in the big lion book and chapter 8 in *An Introduction to the Immanuel Approach for Mental Health Professionals*.¹¹⁶

C. What are your thoughts regarding SRA and DID (Satanic Ritual Abuse and Dissociative Identity Disorder)? First, I do not consider myself an expert on SRA and DID. SRA and DID are not the primary focus of my practice or my study and writing. However, over the past thirty-five years I have gathered at least a couple thousand hours of experience working with maybe ten to twenty different SRA and DID clients, and I have spent maybe a thousand hours of study specifically focused on SRA and DID. Within this context, I will offer a few thoughts:

- *Big picture with respect to dissociation:* First, I want to make a few quick comments regarding the wider context with respect to dissociation: There are many people with mild to moderate dissociation who are not DID. (My experience is that most of us fit into this category.) And there are many people with DID who are not SRA. That is, DID can be caused by other sources of severe childhood trauma besides SRA.
- *Include the Immanuel Approach:* I definitely encourage including the Immanuel Approach in any plan for working with SRA and DID. One will, of course, need to use advanced troubleshooting at many points, and one will especially encounter complex problems with blockages that are anchored in specific (often deliberately planned) traumatic memories. But I still strongly recommend including the Immanuel Approach in the overall plan. The Immanuel Approach is the foundation for work with SRA and DID in my practice.
- *Help every part you encounter to connect with Jesus:* Here is the really short summary of the central principle I try to keep my eyes on: For every part that you identify, do troubleshooting work until the part is able to allow Jesus to be present; and then help the part engage directly with Jesus regarding every issue, problem, fear, question, and trauma that comes up.
- *Go through the big lion book:* There are many principles and tools in the big lion book that will be helpful. For example, everything about capacity and the Immanuel Approach as a resource for building capacity; the three chapters on discerning between the genuine presence of Jesus, internal parts, and demonic spirits; the material on how to resolve anger and/or fear that is blocking connection with Jesus; the chapter about blocking thoughts/fears that are anchored in specific traumatic memories; and the deliberate, thorough opening and closing prayers have all been helpful at many points in my work with SRA and DID clients.
- *Additional resources on the website:* There are also additional resources in the “Special

¹¹⁶Karl D. Lehman, *An Introduction to the Immanuel Approach for Mental Health Professionals*, (Evanston, IL: Immanuel Publishing, 2023), pages 51-54.

Subjects/Advanced Topics” section that will be helpful.¹¹⁷ For example, I have found the direct eye contact technique to be very helpful in working with my DID and SRA clients, and I have also found the material on discerning between internal parts and demonic spirits to be especially helpful.

- *Build your own capacity and get your own healing:* Working with SRA and DID is often both intense and complicated, and you need to be able to keep your relational circuits on, stay relationally present, and operate at peak performance during this intense, complicated work. For one, there will be blocks of time during which the recipient is not able to connect with Jesus, and you will need to be the relationally present, attuning bridge during these times. You will also need to lead the sessions during these times when the recipient is not able to connect with Jesus, and you will need to have your discernment and skills at peak performance to do this challenging work. To be able to provide the relational, attuning bridge and keep your discernment and skills at peak performance, you will need to have high capacity to stay with intense negative emotions while still keeping your relational circuits online, and you will need to be free of triggered reactions from your own unresolved issues. So you will want to deliberately build your capacity and do your own healing work in preparation, and you will want to continue deliberately building your capacity and doing your own healing work as you are facilitating for recipients with history of SRA trauma and/or DID. (Working with SRA and DID is a good way to find triggers that you need to work on.)
- *Facilitator recommendations:* I often get e-mails asking me to recommend experienced, skilled, high-capacity Immanuel Approach facilitators to provide care for people with DID and/or histories of SRA. The key problem with this is that all of the most experienced facilitators I know have practices that are full, with waiting lists so long that they don't even offer a waiting list any more. I wish I had more to offer here, but my current thoughts are to first pray for guidance and then watch for any guidance the Lord provides. And second, try looking through the network directory, and for any facilitators you think might be a good fit, communicate with them regarding exactly what you are looking for. Also, feel free to move to a different facilitator if a trial period of working together does not seem to go well.
- *Does SRA actually exist, or is it just the result of misguided suggestive therapy techniques and false memories?:* One question that occasionally comes up is whether SRA is even real – a question that is somewhat understandable when one hears the details, which are so horrific and so far beyond what most of us have ever experienced that they can be hard to believe. People also understandably wonder how such horrific crimes can be fairly common without being regularly discovered, proven, and reported on the front page of our newspapers. People sometimes suggest that supposed SRA is just the result of misguided suggestive therapy techniques and false memories (and possibly also some kind of conspiracy of deliberate deception). I would like to respond very briefly to this question with three quick points:

1. Similarity of elaborate details between many different clients: Over the thirty-five years during which I have worked with a number of SRA survivors, I have been struck

¹¹⁷“Special Subjects/Advanced Topics” section on the Resources page of www.immanuelapproach.com.

by the similarity of their stories. I think it is significant that many different people from all over the country and all over the world describe certain very elaborate components that are so similar. I am very careful to *not* suggest details with respect to trauma that might come forward, and most of these people have had no contact with each other SRA survivors. Furthermore, most of the people I have worked with have avoided reading about the subject – partly because it would be intensely painfully triggering, but also to specifically avoid suggestion. To my assessment, it seems *very* unlikely that many different people would independently fabricate elaborate details that are so similar. It seems much more likely that they have all survived similar experiences, and are simply recalling and describing them.

2. Dramatic, lasting, observable, progressively-accumulating positive changes: There are several SRA survivors who I have worked with for many years (almost 20 years for one person); and I have observed dramatic, lasting, progressively accumulating positive changes with each of these clients. The usual session is that the person comes in with a painful reaction to some trigger in the present, we ask Jesus for guidance, Jesus leads the person to an underlying traumatic memory (often a memory that they previously had no conscious awareness of), Jesus works with the person to resolve the traumatic memory, and the painful triggered reaction resolves as the underlying trauma is resolved. And over time, as we have eliminated the sources of many, many painful triggered reactions by shoveling out piles and piles of traumatic memories, the person experiences dramatic, lasting, progressively-increasing positive changes. To my assessment, it makes complete, easy sense that the observed lasting positive changes would be produced by resolving memories for real traumatic events. In contrast, it is hard for me to imagine how working on false memories for fabricated traumatic events could produce dramatic, observable, lasting, accumulating fruit in these client's lives.

3. Red Dragon Cast Down by Dr. E. James Wilder: Dr. Wilder provides a very thorough, detailed, carefully documented, totally compelling discussion of this question in his book, *Red Dragon Cast Down*.¹¹⁸ To my assessment, any reader who goes through Dr. Wilder's book carefully and honestly will be convinced that Satanic Ritual Abuse is both real and soberingly common.¹¹⁹ (Two caveats: 1. People with intense unconscious reasons to not believe in SRA will not be able to receive Dr. Wilder's evidence and arguments; 2. People with conscious-but-hidden reasons to deny SRA will not acknowledge the validity of Dr. Wilder's evidence and arguments.)

D. Additional thoughts for those who are dealing with especially difficult situations: I get a steady stream of emails describing extremely difficult, complicated situations, and then asking for help along the lines of individual sessions and/or consultations. Unfortunately, I am not able to provide individual sessions or consultations for specific situations. However, I would like to offer several additional thoughts that I hope will be helpful to those of you who are dealing with situations that are beyond your current training and/or experience and/or skill

¹¹⁸ E. James Wilder, *The Red Dragon Cast Down: A Redemptive Approach to the Occult and Satanism* (Grand Rapids, MI: Chosen Books, 1999).

¹¹⁹Two caveats. First: people with intense unconscious reasons to not believe in SRA will not be able to receive Dr. Wilder's evidence and arguments. And second: people with conscious-but-hidden reasons to deny SRA will not acknowledge the validity of Dr. Wilder's evidence and arguments.

and/or capacity:

- *Ask the Lord for help:* Ask the Lord for help in finding the right additional resources (with the right consultation being only one possibility), and be persistent in prayer.
- *Website resources:* Look through the material on our websites. I have gotten many consultation questions that have already been answered in one or more of the essays available as free downloads.
- *The Immanuel Approach (big lion book):* Get a copy of the big lion book *and use the index.* (We paid thousands of dollars to have an indexing expert generate a professional index, so please use it as you are looking through this very large book in search of answers to your consultation questions.) I have gotten many consultation questions that have already been answered in the big lion book.
- *Possible future FAQ questions:* One indirect option for obtaining consultation input is to formulate your questions, as clearly and concisely as possible, into questions that might be FAQs for the general public. I am not able to respond to individual e-mails, but I am constantly watching for questions that would be helpful as FAQs, and I will try to answer them as I am able.
- *Get your own healing and keep your relational circuits on:* When you are helping with an especially difficult, complicated situation, it is strategically important to optimize your own discernment, capacity, and maturity skills. As discussed at length in *Outsmarting Yourself*, getting triggered and/or losing access to your relational circuits will dramatically impair your discernment, capacity, and maturity skills. And when you are helping with an especially difficult, complicated situation you need your discernment, capacity, and maturity skills to be at peak performance. Therefore, it is especially important to watch for triggering and/or loss of relational circuits at the difficult points at which you have not yet been able to discern an effective plan or facilitate some kind of progress. Notice the strategic points at which you get triggered and/or lose access to your relational circuits, and then work on your own stuff (that is, find and resolve the underlying memories/issues). And use the tools described in *Outsmarting Yourself* to keep your relational circuits on-line.
- *Help others in the system to get healing and keep their relational circuits on:* When working with an especially difficult, complicated situation, it is strategically important to optimize the whole support network. And with respect to the wider support network, it is tremendously helpful to have as many people as possible functioning at peak performance with respect to discernment, capacity, and maturity skills. Therefore, try to get as many people as possible to watch for where they get triggered and/or lose access to their relational circuits, and then to work on their own stuff and use the tools described in *Outsmarting Yourself* to keep their relational circuits on-line.
- *Optimize connection to Jesus and let him lead:* Use the Immanuel Approach whenever possible, with the ideal being for both the facilitator and the recipient to establish an interactive connection with the Lord. To the extent that the facilitator and recipient can receive guidance from the Lord, He can make all of the toughest clinical judgment calls.

For example, Jesus can make the judgment calls regarding when to deliberately build capacity, when to rest, and when to push into painful memories; Jesus can make the judgement calls regarding which memories to work on when; and Jesus can make the judgement calls regarding which internal parts to work with, how to navigate complex internal systems, etc.

- *Help the recipient build capacity by “just” spending time with Jesus:* If the recipient is struggling with complicated, severe, difficult problems, where the need for her to have more capacity is part of the picture, use the Immanuel Approach to help her establish an interactive connection and then help her to spend time “just” being with Jesus. This is one of the best interventions for helping her to build capacity. Also, if the recipient has internal parts, help them get to the point at which they can perceive the Lord’s presence, and then help them allow him to come close (or at least close enough so that they can receive benefit). I have worked with situations in which the recipient and I spent every session for months just helping part after part identify and resolve blockages, so that an increasing number of internal parts were able to perceive the Lord’s presence and allow him to come close. Then one day the recipient spontaneously started going to memories, and the whole healing process started moving forward. (Prior to this we had tried every other troubleshooting technique we could think of, but none of these other techniques had enabled the recipient to go to memories).