



Rita #3: Jesus is Better than Candy (Immanuel approach, basic-intermediate)

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The main purpose of the DVD “Rita #3: Jesus is Better than Candy (Immanuel approach, basic-intermediate)” is to provide live ministry session examples of the principles, techniques, and process described in our essays and presentations about the Immanuel approach to emotional healing. This DVD will be encouraging and educational for any viewer, but it will be much more valuable if you have first read the “Brain Science, Psychological Trauma, and The God Who is With Us” essays. If time constraints preclude reading all five Parts, I would encourage you to at least read Part I and Part V. This session demonstrates **Basic and Intermediate** principles, techniques, and process.

Original session, debriefing immediately following the session, and 5 month follow-up interview: This DVD presents the original session (March 2008), the debriefing discussion immediately following the session, and portions of the follow up interview that took place five months later.

Contents of Video Tape	Location on the tape	Length of the segment
Initial comments and opening prayer	Minute 0	5 minutes
Recall positive memory, deliberate appreciation, refreshed connection	Minute 5:15	12
Core of session	Minute 17:32	31 minutes
Closing prayer	Minute 48:27	3 minutes
Debriefing immediately after session	Minute 51:34	4 minutes
Follow-up (five months later)	Minute 55:34	18 minutes

Chapters:

1. Start, initial comments
2. Opening Prayer (3:49)
3. Recall positive memory, deliberate appreciation, and refresh connection with Jesus (5:15)
4. Begin core of session (17:32)
5. 20 minute mark
6. Focus on perception of Jesus, ask Him to guide/move session forward, session moves forward (23:53)
7. Specific memory comes forward (26:55)
8. Immanuel intervention invitation in memory, with guardian lie blockage that is rapidly resolved (28:41)
9. 40 Minute Mark
10. Another Immanuel intervention invitation, with internal part quickly perceiving Jesus following invitation (45:35)

11. Closing prayer (48:12)
12. Debriefing/discussion immediately after session (51:19)
13. Five-month follow-up interview (55:20)
14. Changed subjective experience of sweets, so that they now seem “too sweet” (55:39)
15. Spontaneous changes in eating habits, with corresponding weight loss (57:45)
16. Dramatic decrease in judgement, much more grace (1:00:15)
17. Little girl child part abiding with Jesus (continues to perceive and interact with Jesus) since the session (1:05:26)
18. Follow-up regarding original trigger, with report that it is no longer active (1:07:07)
19. Ongoing healing for type “A” attachment wounds (1:09:02)

Session summary: In this 2008 session, Rita starts with recalling times of past positive connection with the Lord, deliberately appreciating these, and re-establishing a living, interactive ~~her~~ connection with ~~him~~ Jesus in the present. Rita then talks about a recent event in which she felt excluded; and since she has already re-established an interactive connection with Jesus, I coach her to focus on Him and ask Him to guide/move the session forward. She then goes to childhood memories with similar dynamics of being painfully excluded, and especially to a specific memory where she was turning to candy for comfort. Rita invites the Lord to be with her in these childhood experiences, and she receives healing as she interacts with Jesus in the context of these memories throughout the rest of the session. Finally, during the five months following the session Rita observes a number of lasting changes, including that the initial trigger no longer bothers her, that her relationship with “sweets” has changed, and that her weight is now resting at a set point ten pounds lighter than her previous baseline.

Deleted material: Several segments were deleted because they referred to family details not appropriate for a public training DVD or because they included theoretical comments that would not be the most efficient use of teaching time for the general public. These deletions did not include anything important with respect to Immanuel interventions or the overall Immanuel approach process.¹

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

The Immanuel approach to emotional healing: One way to define our current version of the Immanuel approach to emotional healing would be to first identify the contributing components:

- Recall of previous positive connections with the Lord, in combination with deliberate appreciation, to prepare for connecting with Jesus;
- Refreshed perception of the Lord’s presence, and establishment of a living, interactive connection with the Lord *in the present* as the starting foundation;
- Once the person has established a living, interactive connection with Jesus in the present,

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

coach her to engage directly with Jesus for guidance and assistance at every point in the session;

- Immanuel Interventions, especially from inside traumatic memories, but also at any point the person loses connection with the Lord;
- Describe whatever comes into your awareness (your brain works better in community)
- Our modified version of Theophostic® theory, tools, and techniques;
- Understanding regarding capacity;
- Understanding regarding attunement and relational connection circuits; and
- Understanding regarding processing tasks at each of the brain levels.

Then, if you take all of these components, organize them around the living presence of Jesus as the central focus, and clearly identify connecting more intimately with Jesus as the primary objective (with resolution of trauma as a secondary objective), you have the Immanuel Approach to emotional healing. This is all described at more length in the “Brain Science, Psychological Trauma, and The God Who is With Us” essays, but for those of you who have not yet had a chance to review the more detailed discussion, here is a very brief summary of the key process components:

•*Recall of previous positive connections and deliberate appreciation to prepare for connecting with Jesus:* Recalling past positive experiences and deliberately appreciating them prepares your brain–mind–spirit system for positive relational connection. At the beginning of each Immanuel approach session, we therefore include positive memory recall and deliberate appreciation *focused on the Lord* to prepare the person’s brain-mind-spirit system for refreshing/re-establishing a positive relational connection with Him. With people who are new to the Immanuel approach, I very deliberately lead them through this process – we ask the Lord to bring forward a memory of a previous positive experience with Him, I ask the person to describe this experience (in detail), and I coach the person to describe specific things she especially appreciates about the Lord in the memory experience. In contrast, people who are familiar with the process usually go through an abbreviated version (asking the Lord for help, thinking about the positive memories that come forward, and deliberately appreciating the Lord in the context of the positive memories), without the need for coaching from me. In fact, this often happens smoothly and quietly during the opening prayer.

Rita’s session provides an excellent example of this initial positive memory recall and deliberate appreciation (time on tape 5:15 to 15:25).

•*Refreshed perception of the Lord’s presence and connection with Him in the present as the starting foundation:* After the person has identified one or more memories of past positive connection with the Lord, and *feels* appreciation for His presence and care in these past experiences, I coach the person to spend several minutes reentering/reconnecting with the memory/memories.² As she does this, I ask the Lord to help her perceive His presence and establish an interactive connection,³ so that these are real and living in the present, and then I

² Note that coaching the person to spend several minutes very deliberately reentering/reconnecting with the memory is a new piece as of fall 2010.

³ In most cases, the person perceives the Lord’s living presence and establishes an interactive connection in the context of the memory imagery. That is, they perceive that the Lord’s presence in the memory imagery comes alive, and that (still in the context of the memory imagery), His presence begins to engage with them interactively. However, some people will perceive the Lord’s living, interactive

coach the person to describe whatever comes into her awareness. The person is usually able to transition smoothly and easily from positive memory recall and appreciation to a living, interactive connection with the Lord in the present (and if this doesn’t happen, we troubleshoot regarding what’s in the way).

Rita’s session provides an excellent example of establishing this ideal starting foundation of refreshed connection with Jesus (time on tape 10:56 to 11:30). This session also provides a good example of how this connection can happen spontaneously as the person thinks about positive memories and names specific appreciations. Sometimes the person does not perceive the Lord’s presence and experience a connection with Him in the present until she takes time to reconnect with the memory more deeply and we specifically, explicitly ask the Lord to reestablish an interactive connection; but in many sessions (such as this one), the person begins to perceive the Lord’s presence and re-establishes a positive connection with Him, spontaneously, while she is focusing on positive memory recall and deliberate appreciation.

•*Ongoing coaching to engage directly with Jesus:* Once the person has a connection with Jesus in the present, the therapist/ministry facilitator coaches the person to turn to Jesus, focus on Jesus, and engage with Him directly at every point in the session. The person might engage with Jesus for guidance in choosing an initial target, for help with finding underlying memories, for assistance with resolving unfinished processing tasks, for capacity augmentation when dealing with inadequate capacity, or for help with any other questions, needs, or problems that come up.⁴ For example, at 23:53, it’s unclear what’s happening with respect to Rita’s triggering, and it’s unclear exactly how to proceed. I coach Rita to focus on Jesus and ask Him for guidance regarding what to do/where to go next, and then as she does this the next piece comes forward.

•*Immanuel Interventions, especially from inside traumatic memories, but also at any point the person loses connection with the Lord:* As described at more length in “Brain Science, Psychological Trauma, and The God Who is With Us, Part V,” Immanuel interventions are *specific, focused, systematic interventions* with the goal of helping the person receiving ministry to perceive the Lord’s presence, connect with Him, receive from Him, and be **with** Him. For those of you who have not yet had a chance to review the more detailed discussion, here is a very brief summary:

Specific, explicit invitation and request: The most basic, simple component is the specific, explicit prayer: “Lord, I make a heart invitation for You to be *with me*, here in this place. I also ask You to help me perceive Your presence, to help me connect with You, to help me receive from You, and to help me be *with You*.” For example, at 29:30 Rita makes this heart invitation from the perspective of being inside the memory where she was turning to candy for comfort, and then she immediately perceives the Lord’s presence with her in this place. This session provides another example of an Immanuel intervention invitation at 45:35, where the internal part carrying the many memories of the thematic “I’m on the outside”

presence in the room where they are receiving ministry; some people will perceive the Lord’s living, interactive presence in the context of a different memory that comes forward spontaneously; some people will perceive the Lord’s living, interactive presence in the context of imagery that does not seem to be coming from any specific memories, and some will experience two or more of these simultaneously.

⁴ The therapist/ministry facilitator will also want to coach the person to engage directly with Jesus when good things happen, to thank Him and share her heart with Him.

wound makes a heart invitation to Jesus, and then Rita reports that this internal part does perceive the Lord’s presence *with* her in a new way.

Trouble-shooting: If the person is *not* able to perceive the Lord’s presence (or connect with the Lord, receive from the Lord, or be with the Lord), you “trouble-shoot.” Start with praying “Lord, what’s in the way of my being able to perceive Your presence? (or connect with You/ receive from You/ be with You)” and then follow-up on whatever the Lord brings forward. For example, when I suggest that Rita make a heart invitation for the Lord to be with her in the memory where she is turning to candy for comfort, she is initially hesitant to allow Him to be present due to the concern that He might confiscate her candy. In this session it seems that simply expressing this guardian lie fear was all that was needed to resolve it, but this is a good example of the kind of blockage that might hinder a person from being able to perceive the Lord’s presence, and in most situations more deliberate trouble-shooting interventions are required to resolve a guardian lie fear such as this one. (Time on tape: 28:41 to 29:40)

For those who are able to establish a refreshed connection with Jesus, *in the present*, at the beginning of the session, an additional resource is available if the person loses connection with Jesus at some later point in the session and is *not* able to receive adequate guidance in response to the direct question: “Lord, what’s in the way of my being able to perceive Your presence (or connect with You/ receive from You/ be with You)?” You coach the person to return to the place of refreshed positive connection from the beginning of the session, and then *in the context of the refreshed connection*, you coach her to ask the Lord about the place where she is *not* able to perceive His presence.

Why the candy memory?: When Jesus lead Rita to the memory about the hidden candy, I was a little surprised, and didn’t immediately see the connection with the healing target we were focusing on (pain around being excluded). As I edited the tape and worked on this commentary, I continued to be a bit puzzled by the Lord’s choice regarding the candy memory. Why not go to a memory that much more clearly represented being excluded – some memory where her mother and siblings were engaged in a fun activity, but Rita had not been invited to participate, or some memory where Rita was watching from the sidelines as her mother focused affection and affirmation on her brother and sister? In fact, it wasn’t until years later (2011), when I was doing more editing for the condensed versions subtitle disc, that I finally understood the Lord’s strategy.

The key is that the Lord needed to deal with the “solution” that was already in place. Rita had found her own solution for the loneliness and pain she felt from being excluded by her mother and siblings. She had turned to candy in an attempt to comfort this pain and fill this place of emptiness, and as long as she was holding onto her own solution she could not stand straight in the pain and receive healing from the Lord. In our experience, this is a common hindrance to healing, and it is often difficult to resolve.⁵ Knowing all of this, the Lord took her to a memory where this could be addressed. When you watch the session with this issue in mind, you can see it very clearly (for example, you will notice that the first response from the child part in the candy memory was to be afraid that Jesus might take away her candy).

⁵ The session with Eileen also illustrates this point – Eileen was still trying to solve the problem by focusing on her mom, in hopes that her mother would somehow finally be able to give her the love and connection she longed for. She wasn’t able to get healing until she released her attempt to solve the problem in some other way, so that she could stand straight in the pain and receive healing from Jesus.

Fortunately, Rita had already had many positive healing experiences with the Lord, and even the initially cautious child part was quickly able to allow the Lord to be present and to cooperate with His healing work. As she engaged directly with Jesus in the context of this memory, she changed her focus from the candy to Jesus, she was able to receive His love, and she received beautiful, powerful healing.

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

First, there are phenomena other than dissociation that can lead to the subjective experience of perceiving “internal child parts.” For example, one can carry an unresolved traumatic memory in a memory *package* that includes not just the autobiographical content of the memory, but also the overall subjective experience of being *inside the child ego-state present at the time of the memory*. When this memory package is open and activated, the person will not only “remember” the explicit, autobiographical story content of the memory, but will also have the subjective experience of being *inside* the ego-state of the child in the memory. And no other indicators of dissociative phenomena will be present. For example, there will be no amnesic barriers (the person will report that the event has always been available to her voluntary, conscious recall, and the event will continue to be available to her voluntary, conscious recall after the session), and the different pieces of the memory, including the emotions, will all be present and connected.⁶ The subjective experience of being inside the child in the memory *does also* occur when one has *dissociated* internal child parts, but the important point here is that dissociation is not the *only* phenomena that can cause this subjective experience of “internal child parts.”

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

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

Jesus Fills/Heals Type “A”⁷ Trauma (absence wounds): Some believe that emotional healing

⁶ I am not aware of any research supporting these statements about non-dissociative “internal child parts,” but I have personally had this experience on a number of occasions, and I have observed many emotional healing sessions where non-dissociative internal child parts appeared to be present.

⁷ The expressions “type A” and “type B” traumas come from *The Life Model: Living From the Heart Jesus Gave You*, by James Friesen, E. James Wilder, and others (Shepherd’s House, Inc: Van Nuys, CA), 2000. See p.42 and following for their definitions and commentary. For more of our thoughts about type

ministry can only provide resolution for type “B” trauma (wounds from the *presence* of *bad* things that *shouldn’t* have happened), and that type “A” trauma (wounds from the *absence* of *good* things that *should* have happened) can only be healed in the context of relationships in the present. We agree that the Lord *sometimes* heals type “A” trauma in the context of relationships in the present, but we also believe that the Lord can care for type “A” trauma through Immanuel approach emotional healing. This session provides a good example (time on tape 39:25 to 39:38), where Rita is interacting with Jesus in the context of memories of being emotionally neglected, and reports: “...He’s filling me with what I didn’t have, which was the unconditional love and acceptance for who I was, for who He created me to be as a unique person....” Furthermore, our observations are that it is often a very slow process for a person to heal/fill absence wounds *by receiving from other people in the context of relationships in the present*, but that a person can heal/fill absence wounds much more quickly *by receiving directly from Jesus in the context of the original childhood absence wound memories*.⁸

Jesus’ presence and guidance are so helpful: As mentioned above, at the beginning of the session it was unclear what was happening with respect to Rita’s triggering (she reports: “It seems like it doesn’t bother me any more), and we were unclear regarding how to proceed. Fortunately, Rita could perceive the Lord’s presence and had already established a strong connection with Him, so I just coached her to focus on Him and ask Him for help. When she did this, images began to come into her mind, these turned out to be significant, and the session began to move forward. When the person receiving ministry can perceive the Lord and has established a good connection with Him, we always find his presence and guidance to be helpful.

Low emotional intensity: Many emotional healing sessions, such as the “Rocky: Father-Son Wounds,” “Lisa: Childhood Surgery, Panic Attacks, and Abreaction,” and “Patricia: First Session with Internal Parts” sessions, include intense emotional reactions during the healing process. This is common enough that some have come to believe this is always the case, and that no real healing can occur unless the person displays intense emotions. However, as is clear from this healing work with Rita, it is possible to experience important healing in a session where emotional intensity remains subdued. We have now seen many sessions where emotional intensity never gets above two or three (on a scale of one to ten), but careful follow-up reveals lasting fruit from important healing.

More information: For more information from Karl Lehman M.D. and Charlotte Lehman M.Div, including our teaching about the Immanuel approach to emotional healing, our assessment and recommendations about Theophostic[®] Ministry, our teaching about how Christian emotional healing can fit into professional mental health care, and much more, please help yourself to the free information on our website, www.kclehman.com.

“A” trauma, see “Theophostic[®]-based ministry and type ‘A’ trauma” on the “Articles and FAQs” page of www.kclehman.com.

⁸ See the “Rocky: Father-son Wounds” and “Eileen: Immanuel Intervention (intermediate)” sessions for examples of Jesus rapidly resolving absence wounds through Immanuel interactions in the context of the original memories.