



Maggie: More Than Healing
“Immanuel Interventions” to facilitate additional connection with Jesus
(explanatory comments, condensed version)

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The main purpose of the DVD “Maggie: More Than Healing, ‘Immanuel Interventions’ to facilitate additional connection with Jesus” is to provide live ministry session examples of the principles, techniques, and process described in our *Immanuel Series* presentations.¹ This DVD will be encouraging and educational for any viewer, but it will be much more valuable if you have first viewed the *Immanuel Series* presentations. If time constraints preclude viewing the whole set, I would encourage you to at least view “Immanuel, Emotional Healing, and Capacity: Parts I & II,” before seeing the “Maggie: More Than Healing, ‘Immanuel Interventions’ to facilitate additional connection with Jesus” live ministry session.

Very basic Immanuel interventions: This session portrays very basic Immanuel interventions, where the core of the interventions are simply to focus directly on the objective of perceiving the Lord’s presence, and then ask: “Lord, help me to perceive Your presence,” or “Lord, help me to perceive Your presence more clearly.”

Session summary: This session is about going deeper with Jesus. As described below, the primary objective is not so much to resolve traumatic memories as to find especially effective pathways for connecting with Jesus. Maggie begins with memories in which she had already received healing, but in which her perception of Jesus had been *very* subtle. “Immanuel Interventions” are then used to help her experience a more tangible and intimate connection with Jesus. Along the way, Maggie also receives healing for material that had not been fully resolved during the earlier Theophostic-based sessions. At the two month follow-up interview Maggie reports fruit from the healing, and also describes poignant experiences of connecting with Jesus when she repeated Immanuel Interventions with these same childhood memories during personal devotional time. This faith-building session illustrates the principles, techniques, and process described in our Immanuel Series presentations.

Deleted material: To put the “Condensed Version” in perspective: In order to make the 26 minute condensed version, 70 minutes of material have been deleted from the 96 minute complete version. The condensed version is valuable for providing an *overview* of what an Immanuel approach session looks like, and it’s great for inspiration and faith building; but if you are actually trying to learn how to facilitate Immanuel approach sessions, you will definitely want to view the complete version.

Primary objective and overall strategy: The primary objective of this session was not so much to resolve traumatic memories as to find especially effective pathways for connecting with Jesus. The overall strategy was to use Immanuel Interventions to facilitate *additional* connection with

¹ As of January 2007, we have completed five of the presentations for this series: “Immanuel: God With Us,” “Immanuel, Emotional Healing, and Capacity” parts one and two, and “Immanuel, An Especially Pernicious Blockage, and the Normal Belief Memory System” parts one and two. We are hoping to complete several more “Immanuel Series” presentations over the next year or so.

Jesus in memories that had already been processed with Theophostic[®]-based therapy/ministry. My hope was that previously processed memories might provide ideal *jumping off points* for Immanuel Interventions – that using Immanuel Interventions in the *context* of traumatic memories that had already been healed might be an especially effective pathway for connecting with Jesus. My thinking was that a memory that had already been successfully processed with Theophostic[®]-based therapy/ministry would provide a starting point that would be relatively free of blockages, since most or all of the blockages must be removed before a person can receive successful Theophostic[®]-based healing, and since the same kinds of blockages that hinder Theophostic[®]-based healing also hinder perceiving the Lord's presence.

The plan Maggie and I had discussed before beginning this session was for Maggie to start with memories where she had already received healing, but had not perceived the Lord's presence in any tangible way (or had only perceived the Lord's presence in ways that were very faint or vague), and then try Immanuel interventions with the goal of facilitating *additional* connection with Jesus. The plan was for Maggie to start by focusing on the places in these memories and the places in these previous sessions where she had received healing, and then pray: "Lord, help me to perceive Your presence," or "Lord, help me to perceive Your presence more clearly."

"Sometimes this is the way it is. There's nothing missing": At 25:18 in the full version of this session I make a comment referring to the story described below. This comment has been deleted from the condensed version, but I am still including the story because it makes a point that people need to be aware of as they learn about Immanuel Interventions.

When we first began using Immanuel Interventions in Charlotte's personal healing sessions, she experienced a long streak during which she perceived a visual image of the Lord's presence in every memory that she went to. We were taking some vacation time in the fall of 2005, and as has often been the case, we used our time on the road to work on our own healing agenda. We began trying Immanuel Interventions in Charlotte's personal healing between Chicago and Pittsburgh, and spent the first several hours working through layer after layer of blockages. Persistence paid off, and eventually she went to a memory, prayed the "Lord, help me to perceive Your presence" prayer, and then reported: "I may just be imagining this – it's not real vivid, and I'm not feeling dramatic emotions – but I can see Jesus standing beside me." Even though the image remained faint, she could describe where He was standing, what He was doing, and what He was saying/thinking. And He initiated beautiful, simple, gentle therapeutic interventions that resulted in healing benefits for the memory we were working on.

Encouraged by these results, I suggested: "Let's try another memory." She went to another memory, prayed the "Lord, help me to perceive Your presence" prayer, and then reported: "I may just be imagining this – the image is sort of vague, and I'm not feeling any intense emotions – but I can see Jesus sitting beside me." Once again, even though the image remained faint, she could describe where He was sitting, what He was wearing, what He was doing, and what He was saying/thinking. And He again initiated beautiful, elegant, gentle therapeutic interventions that resulted in healing benefits for the memory we were working on. So I suggested: "Let's try another memory!" She went to another memory, prayed the "Lord, help me to perceive Your presence" prayer, and then reported: "I may just be imagining this – the image is sort of vague,...etc." Once again, she could describe where He was, what He was doing,...etc. And once again, the Lord initiated therapeutic interventions that resulted in healing. From Chicago to Pittsburgh, from Pittsburgh to New York, and from New York back to Chicago we spent much of our time working with memory after memory after memory after memory. And we kept getting the same results in memory after memory after memory after memory. By the time we were half

way back to Chicago, on the last leg of our journey, Charlotte had been through 29 different memories, and had perceived a visual image of the Lord's presence in every single one.²

It will probably not surprise you to learn that I then suggested "Let's try another memory." Charlotte went to another memory, prayed the "Lord, help me to perceive Your presence" prayer, and then reported: "I have a sense of the Lord's presence, and I have a sense of what He's thinking/saying, *but I don't have any visual image of His presence in the memory.*" As we continued to work with this memory, Charlotte continued to be able to sense His presence, she continued to be able to sense what He was thinking/saying, she received healing as she cooperated with His guidance, and she continued to *not* have any visual image of His presence in the memory. She commented: "I can *feel* His presence, and I think the memory is resolved – it doesn't feel bad any more – I just can't *see* Him in the memory;" but since she had eventually been able to perceive the Lord's presence visually in every single one of the previous 29 memories, I assumed that there must be some kind of blockage hindering her from being able to see Him in this memory. However, when we tried to "trouble-shoot," with Charlotte praying: "Lord, show me what's in the way of being able to perceive Your presence more clearly," she immediately reported: "I think the Lord is saying: 'Sometimes this is the way it is – there's nothing missing.'" Just to make sure, we made several more attempts to identify any possible blockages, with Charlotte praying things like "Lord, show me *if* there is anything hindering me from being able to perceive Your presence more clearly," and "Lord, show me what choice I need to make to take the next step forward;" but the only result was that Charlotte kept hearing the same thing: "Sometimes this is the way it is – there's nothing missing," with the increasing sense that this was from the Lord. She felt like the Lord was saying, very clearly: "I *am* with you. You can *feel* My presence. You *know* what I am saying to you in this memory. You just can't see me, and sometimes this is the way it is – *there's nothing missing.*"

The Lord did not seem at all upset. He was not unhappy with us for asking for a more vivid, more tangible perception of His presence. Perhaps He was just making sure we did not become too narrow or rigid in our expectations. Sometimes we might start with a subtle sense of His presence, ask for His help and guidance regarding blockages, identify and resolve blockages, and then be able to perceive His presence with much more clarity and/or intensity. At other times, we might start with a subtle sense of His presence, ask for His help regarding blockages, and then receive a response along the lines of: "Sometimes this is the way it is. There's nothing missing."³

"Accidental" healing: It is interesting that Maggie experienced several pieces of "accidental" healing. Even though the objective of this session had *not* been to resolve traumatic memories, and even though the plan had been for Maggie to start with memories that had already been resolved, it is interesting that splinters of unresolved content kept coming forward as she focused on perceiving the Lord's presence, and that these unresolved splinters were very easily taken care of in the context of focusing on Jesus.

Persist until the person is able to "just" be *with* Jesus: As discussed earlier, the objective of

² She also experienced healing in every one of these memories, but the focus of this discussion is the details of Charlotte's subjective experience of perceiving the Lord's presence.

³ The piece that has been almost 100% consistent has been what happens if a person starts with *no* perception of the Lord's presence. When people start with *no* perception of the Lord's presence, and they are willing to persist in identifying and resolving blockages, we have seen almost 100% success in eventually perceiving His presence *in some way*.

this session was *not* resolving traumatic memories. The goal for this session was to help Maggie perceive the Lord's presence more clearly, and then for her to "just" spend time being with Jesus. Our intention was to start with memories that had already been resolved, and to focus on perceiving the Lord's presence in the context of these *already resolved* memories. However, as just described, Maggie kept running into splinters of unresolved content.

We started with Maggie's memory of almost being molested by a babysitter, and asked the Lord to help her perceive His presence more clearly. As the viewer will notice, Maggie *did* perceive the Lord's presence more clearly, but in the context of receiving more healing, as opposed to "just" being with Jesus. After the first piece of additional healing, we again asked the Lord to help Maggie perceive His presence more clearly, and asked that He would help us expose and resolve anything in the way of her perceiving His presence more clearly. Maggie then received *another* piece of additional healing. At this point, I should have continued to pursue the original objective – I should have persisted in asking the Lord to help us resolve anything in the way of Maggie perceiving and connecting with Him *until no more healing agenda came forward*, and then I should have encouraged Maggie to "*just*" focus on being with Jesus. At the end of this part of the session, when Maggie states: "It feels like we've gone to bed....It feels like it's over," I forgot the whole point of the session and fell back into the approach I usually use when the goal is to resolve traumatic memories – instead of encouraging her to go back into the memory and focus on "just" being with Jesus, I directed her to try working with another memory.

Fortunately, I was able to remember the original plan when working with the second memory. After several rounds of working with splinters, no more healing agenda came forward and I remembered to encourage Maggie to focus on "just" being with Jesus. Note also that in the follow-up interview Maggie reports that she was able to do this in her "homework" assignments. She returned to these memories for the explicit purpose of "lingering with Jesus," and was able to enjoy beautiful experiences of being with Jesus with no other agenda coming forward.

Little "t" Trauma: Some people read our case studies and/or watch the live video sessions and respond with: "I don't need this kind of healing because I've never experienced the kind of trauma that these people are working with. I didn't have a traumatic childhood. I'm glad these tools are available for the people in your case studies and videos, but I don't need to do this kind of healing work because I didn't have a traumatic childhood." One good way to respond to this kind of comment is to talk about big "T" traumas and little "t" traumas.⁴ Big "T" traumas are the life-threatening, terrifying, overwhelming experiences that we think of when we think of Post Traumatic Stress Disorder, such as combat, rape, earthquakes, and serious car accidents. Little "t" traumas are painful experiences that are much smaller and much less dramatic, such as the memory in this session where Maggie feels painfully misunderstood and disappointed when she gets a second hand bicycle instead of a new bicycle. Even though these little "t" traumas do not cause Post Traumatic Stress Disorder, *they still leave lasting negative effects until they are resolved*. As discussed elsewhere, trauma is not defined by the intensity of the painful experience, but rather by whether we are able to successfully process the painful event and by

⁴ To my knowledge, Dr. Francine Shapiro is the original source of the "big 'T' trauma/little 't' trauma" formulation. See, for example, her discussion of big "T" trauma and little "t" trauma in Shapiro, Francine & Silk Forrest, Margot. *EMDR: The Breakthrough Therapy for Overcoming Anxiety, Stress, and Trauma* (HarperCollins: New York, NY), 1997, pages 14, 15.

whether we come away from the experience with distorted conclusions (lies).⁵ Even small painful experiences become trauma if we are *not able to successfully process* them and if we *come away from the experiences with distorted conclusions*.

And we *all* encounter little “t” traumas. *Nobody* gets through childhood without going through many of these little “t” traumatic events. We have *all* experienced little “t” traumas, we are *all* hindered by the lingering affects of these little “t” traumas, and we *all* need to receive healing in order to resolve these little “t” traumas.

This session is helpful with respect to this issue because it is the first of our live session videos where the person works with a little “t” trauma. Even though trauma resolution is not the main focus of this session, Maggie ends up working on several “splinters” from her memory of being misunderstood and disappointed, she mentions how her experience with the second hand bicycle resulted in a distorted belief along the lines of “What is important to me isn’t really important,”⁶ and we can see how it was valuable for her to get healing for this little “t” traumatic event. Our hope is that this session will help the viewer understand how emotional healing can be important even for those who did not have “Traumatic” childhoods.

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

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

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

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.

⁵ Lehman, Karl, “The Processing Pathway for Painful Experiences: Non-traumatic Painful experiences vs Painful Experiences that Become Trauma,” www.kclehman.com, 2007.

⁶ Time on tape: 27:13