



Compare and Contrast:

EMDR[®], “Traditional” Prayer for Emotional Healing, Theophostic[®] Ministry, and Cognitive Therapy¹

(©Karl D. Lehman, M.D. & Charlotte E.T. Lehman, M.Div. 2000, 2001, Revision 10/6/2006)

	EMDR [®] (Secular)	EMDR [®] (Optimal Christian)	“Traditional” ² prayer for emotional healing	Theophostic [®] prayer for emotional healing	Cognitive Therapy, PTSD	Cognitive Therapy, Traditional
Primary focus/target:						
*Permanent resolution of cognitive distortions at root memories:	+++	+++	+++	++++	+++	-
*Management of cognitive distortions in the present, symptom reduction	-	-	-	-	+	++++
Foundational trauma theory:						
*Unresolved psychological trauma as the cause of many physical, emotional, spiritual problems:	++++	++++	++++	++++	+++	-
*Current emotions, symptoms can lead us to the underlying trauma:	++++	++++	++?	++++	?	-
*“Trigger” phenomena, whole Post Traumatic Stress Disorder picture	++++	++++	++?	++++	?	-
*cognitive distortion (core lie) recognized as extremely important/central in the wound:	+++	+++	+? (not explicit)	++++ ³	+++	-
*replacing cognitive distortion (core lie) with positive cognition (truth from Jesus) is important/central in healing:	+++	+++	+? (not explicit)	++++	+++	-
⁴ Foundational Cognitive theory:						
*our thoughts, “what we really believe” drives our emotions and choices:	+? (Not explicit)	+?	+? (Not explicit)	++++	++++	++++
*cognitive distortions drive many mental illnesses	+?	+?	+?	++++	++++	++++

*cognitive distortions learned from previous experiences.	++++	++++	++++	++++	++++	++++
*root memories continue to energize and anchor cognitive distortions	++++	++++	++++	++++	+++	-
*resolution of cognitive distortions resolves current symptoms	++	++	+?	++++	+++	++++
All components must be present for healing, resolution to occur (memory, emotions, negative cognition/lie):	++++	++++	+?	++++	++++	-
³ “Stirring up the darkness”, connecting with the place in the mind where the lie is believed and the negative emotions are carried:	++ (less emphasis)	++	? (not explicit)	++++	++++	-
Jesus guides to the core memories/trauma:	-	+++	++++	++++	-	-
Jesus invited to come and bring healing into the core memories, traumas:	-	+++	++++	++++	-	-
Faith in Jesus’ presence, goodness, power:	-	+++	+++	++++ ⁵	-	-
⁶ Neurological stimuli, alternating hemisphere stimulation:	++++	-	-	-	-	-
Efficacy:						
*End result = Profound, dramatic, rapid, permanent resolution of old trauma:	++++	++++	++++	++++	++?	-
*Percentage of sessions with significant permanent healing (<i>optimal practitioner</i>):	40-60?	50-80?	5-25?	95-100 (Ed)	?	0
*My personal healing:	++	+++	+	++++	-	-
⁷ Trouble shooting: systematic and persistent trouble shooting. Overall attitude “if it doesn’t work, there is a reason”.	+++	+++	++	++++	++?	-
	+++	+++	++	++++	++?	-

Trouble shooting: Specific tools used, problems addressed:

*Spiritual warfare:	–	++++	++++	++++	–	–
⁸ Special exposure, binding:	–	++++	–	++++	–	–
*Bitterness, forgiveness:	–	++++	++++	++++	–	–
*Sin, repentance:	–	++++	++++	++++	–	–
*Vows	–	++++	Variable	++++	–	–
*Blocking beliefs/guardian lies:	++++	++++	–	++++	?	–
*Check the darkest corners:	++?	++?	Variable	++++	?	–
*Psychological defenses blocking the memories, emotions, healing (E.g., denial, repression, etc):	+++	+++	+?	++++	?	–
*Dissociation recognized as especially important in blocking memories, emotions, healing:	+++	++++	+?	++++ ⁹	?	–
⁷ Eye contact technique:	–	++++	–	++++	–	–
*Therapist/minister’s wounds and lies as sources of interference:	?	?	Variable	++++ ¹⁰	–	–
Faith/confidence in the therapy process, knowledge that 95+% results are possible:	+++	+++	++	++++ ¹¹	?	–
Expectation that complete healing can be accomplished for each wound:	+++	+++	Variable	++++ ¹²	?	–
Explicitly identifying and systematically including active ingredients:	++	+++	Variable	++++	++	–
Diversity within the technique/approach:	++	++	++++ ¹³	+[++] ¹³	++	+++
Can lay people use this tool?:	–	–	++++	+++	–	+
Amount of training required:	++++	++++	+	++[+]	++++	++++
Risk of accidental injury to clients:	++++	+++	+	++	++	+

Additional comments:

1. I believe that both EMDR® and Theophostic® provide valuable information that can enhance the effectiveness of any ministry that uses prayer for emotional healing.
2. Note that both EMDR® and Theophostic® agree on a number of points that traditional healing prayer has not recognized as clearly (e.g., relevance of trauma theory, importance of negative cognitions/core lies, importance of trouble shooting, importance of dissociation).

¹⁴End Notes:

1. See “Cognitive Therapy and Theophostic® Ministry” and “Theophostic® & EMDR®: F.A.Q.’s and Common Misunderstandings” on the Articles and FAQs page of our web site for additional discussion of EMDR®, optimal Christian EMDR®, “Traditional” cognitive therapy, and “PTSD” cognitive therapy.
2. In our assessment, Theophostic® includes everything taught and used in “traditional” healing prayer. Our experience with “traditional” healing prayer and Theophostic® healing prayer is that when they work (when the Lord comes with profound, rapid, and lasting healing), they look the same. We perceive that Theophostic® brings several new discoveries that increase the efficacy of prayer for healing of emotions – that increase the frequency of success (the Lord coming with profound, rapid, and lasting healing). See “Theophostic®, What is Unique?” for additional comments.
3. “Stirring up the darkness” and the central place and importance of the negative cognition/core lie are the unique foundational principles of Theophostic®. If you start with traditional prayer for healing of memories and add these two principles and Dr. Smith’s approach to trouble shooting, you have the core of Theophostic®. See “Theophostic®, What is Unique?” for additional comments.
4. Note that these three principles are a large part of the foundation of cognitive therapy theory. By resolving the traumas that fuel negative cognitions, these three healing modalities address the concerns of cognitive therapy, include the principles of cognitive therapy, and accomplish the objectives of cognitive therapy.
5. Faith is certainly not unique to Theophostic®. Most (if not all) ministries that use prayer for emotional healing acknowledge the value of faith. But as with several of the other points discussed here, Theophostic® has provided benefit in addition to that which I received from any other source. See “Theophostic®, What is Unique?” for additional comments.
6. This is one of Dr. Shapiro’s unique discoveries, and is central to EMDR®. We have discovered that this tool is transferable in certain settings, and routinely use it to augment our Theophostic® work.
7. “Trouble shooting” is not unique to Theophostic® (Dr. Shapiro does this well in her EMDR® training), but this is one of Dr. Smith’s most important contributions to prayer for emotional healing. See “Theophostic®, What is Unique?” for additional comments.

8. Dr. Smith taught us a particular approach/technique with exposure and binding prayer and a particular eye contact technique for working with dissociative phenomena. These have been powerful and helpful, but aren't central or inherent to Theophostic®. They could certainly be used in any other healing prayer setting. See "Theophostic®, What is Unique?" for additional comments.
9. The importance of dissociative phenomena: This is not inherently a part of Theophostic®, but Dr. Smith's training, demonstration, and manual included new insight (for us) into the frequency and importance of dissociative phenomena. See "Theophostic®, What is Unique?" for additional comments.
10. Identifying that the therapist/minister's wounds and lies can block the process is especially relevant and significant in the context of observable 95%+ results with Theophostic® in Dr. Smith's hands. See "Theophostic®, What is Unique" and "Unresolved Issues in the Facilitator: One of the Most Important Hindrances to Theophostic® Ministry," for additional comments.
11. Even though "faith" in the efficacy of Theophostic® ministry is ultimately founded on the faithfulness and power of Jesus, I think it is helpful to identify specific faith in the Theophostic® process and general faith in the presence, goodness, and power of Jesus as two separate active ingredients. See "Theophostic®, What is Unique?" for additional comments.
12. See "Theophostic®, What is Unique?" for additional comments.
13. Comments regarding "traditional" healing prayer are more tenuous and must be understood with the awareness that "traditional" healing prayer is not as homogeneous as EMDR® or Theophostic®. There is much diversity within "traditional" healing prayer. It has been around the longest and is used by millions of Christians. There are a number of leaders that contribute writing and teaching with respect to "traditional" healing prayer. There is some diversity within EMDR®, but it was discovered only recently (1988), and Dr. Shapiro continues to dominate as the leading author and teacher regarding EMDR®. With respect to what is *taught*, there is the least diversity within Theophostic®. It was discovered most recently (1996), and Dr. Smith continues to dominate as the central author and teacher regarding Theophostic®. However, as there is no certification process or accrediting body for people using the Theophostic® principles, and many lay people use them with no other counseling training, there is a wide range of effectiveness among people who claim to do Theophostic® Prayer Ministry. Also, from our experience in consulting, training, and observing others, many who claim to be using Theophostic® principles in their work do not adequately understand them, and are not actually using the process as taught.
14. Regarding our place in the Theophostic® community: We respect Dr. Smith tremendously and value our friendship with him, however, we are not in any way officially connected with or endorsed by Dr. Smith and Theophostic® Prayer Ministry. We want to share our reflections, experiences, and discoveries regarding the Christian ministry of emotional healing, and many of the thoughts we share have arisen as we have integrated Theophostic® principles and process into our professional psychiatric and lay pastoral counseling practices. But we want to be clear that the material on our web site does not *define* Theophostic® ministry. "Theophostic®" is a trademarked name, and Dr. Ed Smith, the founder and developer of Theophostic® ministry, is the only one who has the right to define Theophostic® ministry.

We have studied many sources, including medical psychiatry and neurology, psychological research, various secular psychotherapies, and various Christian emotional healing ministries. Our emotional healing ministry includes the core Theophostic® principles and techniques, but we also include "non-Theophostic®" material. For example, our material on medical psychiatry and the biological brain, EMDR, dealing with curses, dealing with spiritual strongholds, dealing with generational problems, and our material on journaling, spiritual disciplines, community, and on

dealing with suicide-related phenomena are not a part of what we understand Dr. Smith to define as Theophostic® Prayer Ministry.

The material on our website is not a substitute for the Basic and Advanced Theophostic® Ministry Training provided by Dr. Smith. For further information about Theophostic® Ministry, its developer Ed Smith, D.Min., or to order training materials, please visit www.theophostic.com.