

**The Feeling-State Theory & Protocols
for
Behavioral and Substance Addictions**

Workshop Practicum Manual

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Practicum

Guidelines

- It is important to understand that the purpose of the practicum is to help you learn how to use the FSIP.
- As the client, you may not have the time needed to complete the processing the FSs.
- If you do not want to participate as a client in the practicum, you may participate as an observer and/or therapist if that is okay with your group. If there is a problem, contact staff
- As the client, choose a behavior that bothers you some but is not a major aspect of your life.
- Divide up into groups of three.
- Each person picks an initial role to play: therapist, client, or observer. Each will get a chance to play each role.
- Divide the total time so that each person will get a chance to play each role.

DAY 1

FSIP worksheet and instructions for steps 3 - 13

1. Explain the FSIP to the client (pg. 7).
2. Describe the addictive behavior.

3. The client and therapist fill out the chain analysis together (pg. 4).
4. Identify the specific part of the behavior that is most intense.

5. Therapist and client identify the FS (Tips for Eliciting Feeling-States, pg. 8).

6. Have the client visualize doing the behavior and lightly experience the feeling linked with the behavior.

7. Process with IFP.

- a. Between sets re-imaging, ask if the image is fading, blurring, or staying the same.
- b. If after 3 sets of re-imaging, nothing is changing, re-evaluate the FS. Read: what to do when the FSs don't change, pg. 9)

Chain Analysis for Day 1

1. What is the compulsive behavior?

2. What time of day is it performed?

3. What location is the behavior performed?

4. Detailed description, starting before the behavior begins to after it is finished.

5. Are other people involved? If so, what is the theme associated with the people?

6. What is the most intense aspect of the behavior?

7. When you are about to do the behavior, do you feel more aroused or relaxed?

8. What is the feeling you have just before you are about to do the behavior?

9. Does this feeling remind you of an earlier event? If so, describe the event.

10. Are there other behaviors that stimulate the same feeling?

11. What are the current triggers to this behavior?

DAY 2

Complete FSIP worksheet and instructions

1. Explain the FSIP to the client (pg. 7).
2. Describe the addictive behavior.

3. The client and therapist fill out the chain analysis together (pg. 8).
4. Identify the specific part of the behavior that is most intense.

5. Therapist and client identify the FS (Tips for Eliciting Feeling-States, pg. 8).

6. Have the client visualize doing the behavior and lightly experience the feeling.

7. Process with IFP.

- a. Between sets re-imagining, ask if the image is fading, blurring, or staying the same.
- b. If after 3 sets of re-imagining, nothing is changing, re-evaluate the FS. Read: what to do when the FSs don't change, pg. 9)

8. Identify the NC linked with the wanted feeling. (What's the negative belief you have about yourself that makes you feel you can't belong? connect? aren't important? et cetera.)

*9. Identify the image or memory linked with the NC.
(Can you remember an event that made you feel that way?)*

10. Process the NC or memory/image with ImTT.

Chain Analysis for Day 2

1. What is the compulsive behavior?

2. What time of day is it performed?

3. What location is the behavior performed?

4. Detailed description starting before the behavior begins to after it is finished.

5. Are other people involved? If so, what is the theme associated with the people.

6. What is the most intense aspect of the behavior?

7. When you are about to do the behavior, do you feel more aroused or relaxed?

8. What is the feeling you have just before you are about to do the behavior?
9. Does this feeling remind you of an earlier event? If so, describe the event.

10. Are there other behaviors that stimulate the same feeling?

11. What are the current triggers to this behavior?

What to tell your client about the FSIP

1. The Feeling-State Theory of Addiction states that addictions are caused by a fixated memory called a feeling-state (FS). The FS is created when a positive event is so intense that the memory of that event becomes fixated in the mind. Composed of the memory of the sensations, emotions, thoughts, and behavior of that event, the addiction is the result of the urges and cravings to do that behavior whenever the FS is triggered.
2. For example, a social gambler won a large hand playing poker. The experience of winning was so intense for him that a FS was created consisting of the feeling of excitement and the thought "I am a winner." From that point on, he became a compulsive gambler. Even though he lost over \$1,000,000 over 10 years, the fixated memory, the FS, did not change. He kept chasing that feeling of being a winner even though he had lost so much money.
3. (If the person uses an addictive drug) The major difference between behavioral addictions such as a gambling compulsion and substance addictions is that psychoactive drugs can create their own FS. For example, cocaine can produce an intense feeling of euphoria. The feeling of euphoria can be so strong that a FS is immediately created.
4. The Feeling-State Image Protocol, (FSiP) eliminates addictions by eliminating the FS. Once the FS is gone, there is nothing left to cause the urges and cravings of the addiction. Compulsive gamblers can gamble again, compulsive shoppers can shop, and sex addicts can have sex without triggering the previous addictive behavior

5. **The Real Need is for the Healthy Desires, Not Destructive Desires**

Addictions are caused by the linkage between feelings and behavior. The feelings you are seeking through the addictive behavior are actually normal, healthy feelings that everyone wants. For example, a gambler may want to feel like a winner, or a smoker may want to feel connected with people. Whatever the underlying feeling is, it is a healthy, normal desire that has just become fixated with a behavior that has become destructive. The good news for treatment is that it appears that, once this feeling-state is broken, the person automatically begins to seek more appropriate ways to obtain what he desires. Learning new social skills or other developments may then become the necessary focus of therapy.

Tips for Eliciting Feeling-States

Clients often have difficulty identifying specific feelings associated with an aspect of smoking. So it is useful to suggest different possible feelings in a querying kind of voice. “Did you feel a sense of belonging when you smoke with others?” “Do you feel that you are rewarding yourself by smoking after you work for a while?” “Does smoking make you feel like an adult?” These kinds of suggestions are often necessary. If you’re not on target with the suggestions, the client’s will usually let you know.

There are two feelings client’s associate with smoking that are not be real ASFs: comfort and relaxation. One smoker found smoking a comfort because, when upset, smoking triggered the feeling of “I’m okay” which was the real FS that created the effect of comfort. The same is also true of relaxation. So when you ask the client what he/she feels when they’re about to smoke, the answers may be about comfort and relaxation. To get beyond these sensations, the entire context of when and where the smoking is happening must be taken into account. For example, if the client feels comfort when smoking in the smoker’s area, a good focus for questioning would be feelings of connection, bonding, or relationship. One client, for example, would go to different smoker locations until he found one where another person was smoking. Another client associated smoking while driving with freedom. So look at the entire context of what the person may be wanting to feel in that particular situation.

Other methods of identifying an ASF is using the Morphing Technique or using one the Fantasy Technique.

Morphing instruction: Allow your mind to change the memory any way it wants to.

Fantasy instruction: Allow your mind to make up whatever scenario matches your feeling.

Possible ASFs associated with FSs

Freedom, Belonging, Connection, Reward, Bonding, I’m okay, Productive, approval, winning, competence, victory, joy, "I'm a man," I'm sophisticated, aliveness, high status, special, important, powerful, strong,

What to do when the client is stuck (the PFS does not change)

There are three reasons for the PFS not to change. If the PFS does not change from the beginning, it is likely that the FS has not been correctly identified. In this case, stop the BLS and return to identifying the FS. If on the other hand, the PFS changes some and then stops changing, there are two additional possible reasons. The first is that there was more than one FS within the image the person is focusing on. In which case, stop the BLS and identify the other FS. The other is that the client is resisting because of anxiety about what he/she will do when no longer smoking. In this case, identify the source of the anxiety and develop a future template about what they can do instead of smoking. Process the template with BLS which should lower the anxiety level. Then return to processing the FS.

Another reason for anxiety is that the client remembers the experience of withdrawals when he/she quit smoking previously. At this point, it is important to reassure the client that you are not trying to get them to quit – that he/she does not have to quit and no one is going to make him/her quit. Reassuring the client that you are not trying to get him/her to control the smoking behavior will prevent the client from suppressing of FS. A suppressed FS cannot be processed. So it is important to keep the client connected with the feelings linked with smoking.

Script: I understand that you've had previous bad experiences of quitting smoking. I am not trying to get you to quit. The goal of FSIP is that you will stop smoking when you are no longer interested in smoking. As long as you have the urge to smoke, then that just means that we haven't finished processing the FSs. Once the FSs are processed, you just won't be interested. So stopping or quitting smoking will not be an problem.

Image Transformation Therapy

Scripts for Therapists

**A Breakthrough in the Treatment of Trauma,
OCD, Anxiety, and Depression**

**Fourth Edition
3rd Revision**

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**ImTT Press
Del Mar, CA**

Image/Feeling Protocol (IFP)

The Image/Feeling Protocol (IFP) is used when the image is not energized by an embedded feeling (EF) such as pain, terror, guilt, or shame. These types of images include Feeling-State images, anticipatory images, and cultural images. In all of these images, the feelings are embedded in the image itself—not in a separate EF. This means that an EF does not need to be released using the F/SRP prior to deconstructing the image except in certain substance addiction situations as described in the *Feeling-State Protocols* book.

Discussion of images that can be deconstructed with the IFP.

Anticipatory images: Anticipatory images are images that are created by a person in anticipation of what might happen. On the other hand, images created as a result of trauma are created as a result of an event that did happen. This difference in how the images are created means that anticipated images are not created as a result of the same reactions as trauma-created images.

For example, shock and frozen reactions are psycho-physiological reactions that occur during an actual traumatic event. Since shock and frozen reactions are not present when an event is anticipated but has not occurred, these feelings are not embedded in the body. Rather, any feelings in an anticipated-event image are feelings that have been projected into the image itself. Since feelings in an anticipated event are embedded in the image and not the body, the feelings should be drained from the image itself.

Feeling-State Images: Feeling-State images are images resulting from a positive event. The intensity of the positive event creates a fixation between the behavior and the feeling. This means that the positive feeling is part of the image itself. For behavioral addictions, there is no separate EF apart from the image. Substance addictions may have an EF of a euphoric sensation.

Cultural Images: Cultural images are images of values promoted by the culture. For example, the images of what it means to be a man or a woman are cultural images. The cultural images are accepted by the person and each image is energized by the person's belief in that image. Often the feelings in cultural images are less intense and more subtle than in images resulting from intense positive or negative events. For example, the image of being a man may have the feeling of pride embedded in the image. Because the feeling is embedded in the image, the IFP can be used to deconstruct it.

Traumatic Images: When traumatic images contain images of people who are hurting the client or hurting someone else within the image, the IFP should be used to deconstruct the negative attitudes of those people in the image toward the client or toward the other people in the image. Only performing the IDP will leave the attitudes unprocessed.

Feelings that are reactions to the image:

Distinguishing between a feeling that is embedded in the image and a feeling that is a reaction to the image is important. For example, a woman may have a cultural image that a woman should submit to a man. Her likely reaction of anger or disgust is a reaction to the image, not a feeling embedded in the image. Once the image has been deconstructed, the reaction to the image will also be gone.

This distinction can usually be easily made by first noticing that the feeling the person is identifying is not congruent with the image. Also, the person will usually be able to distinguish between the two possibilities when asked if their feeling is embedded in the image or a reaction to the image.

Overview of the Image/Feeling Protocol

1. If the image was created as a result of a prior traumatic event, process that event-image first.
2. Identify the image.
3. Identify the feeling that is embedded in the image.
4. Identify the color of the feeling embedded in the image.
5. Drain the color out of the image.
6. Deconstruct the image.
7. Re-image the image.
8. Repeat steps 2 – 6 until the image cannot be re-imaged.
9. Release the pixel-particles of the image from the body as performed in the Image De-Construction Protocol.

Script for Releasing an Image/Feeling

We've now processed the memory of the event. But we may not be finished. What we tend to do is imagine what will happen in the future by accessing memories of what has happened in the past, and when we access past memories to help us imagine the future, we actually create new images. So now we also have to process the image our imagination created. Does that make sense to you?

1. *Okay, so what do you think or feel is going to happen?* [Client describes the anticipated image]
2. *What is the feeling that is embedded in that image? Not what your reaction to the image is but what the feeling is that is in the image?*
3. *What color is the feeling?* [Client identifies the color.]
4. *Now I want you to imagine that the [name that color] is dripping [or flowing, whatever word might best describe that process for that client] out of the image and falling to the floor and being absorbed into the earth.* [Client indicates when this is completed.]
5. *Now visualize the image as being composed of tiny, tiny particles like pixels on a TV screen.* [Client indicates when this is done.]
6. *Now we are going to deconstruct the image. You can deconstruct the image by dropping the particles to the ground, by using a hammer to break up the image, by washing the image away, or by using any other method that works for you. Pick a method you like and deconstruct the image. Tell me when you're finished.*
[Client indicates when this is done.]
7. *Now re-image it again, and tell me how it looks. Is the image as vivid as it was? Is it starting to blur, fall apart, or change in some way?* [Client describes the image.]
8. [Continue with steps 2 -7 until the image cannot be re-created.]
9. [Once the image cannot be re-created, release the pixel-particles of the image from the body. Allow about 3 breaths per part of the body, although more time can be given as needed.]
10. *Breathe into the center of your brain and see the tiny pixel-particles flow out the middle of your forehead.*
11. *Breathe into the center of your brain and see the tiny pixel-particles flow out your eyes.*
12. *Breathe into your chest and see the tiny pixel-particles flow down your arms and out the palms of your upraised hands.*
13. *See your spine as being composed of guitar strings that go from the bottom of your spine to the top of your head. Breathe into the guitar strings and, as you breathe out, release the tension on the guitar strings and see the tiny pixel-particles radiate out in all directions as you release the tension on the lower guitar strings.*

14. *See the tiny pixel-particles radiate out in all directions as you release the tension on the middle guitar strings.*
15. *See the tiny pixel-particles radiate out in all directions as you release the tension on the upper guitar strings.*
16. *See a spot 12 inches beneath your seat, in line with your spine...12 inches beneath your seat, in line with your spine. Breathe into that spot and see the tiny pixel-particles release and flow away from that spot. See the tiny pixel-particles releasing and flowing away from that spot.*
17. *Breathe into your abdomen and see the tiny pixel-particles flow out your navel area.*
18. *Breathe into your abdomen and see the tiny pixel-particles flow down your legs and out the bottoms of your feet.*
19. *See a spot 6 inches below your feet, between your feet...breathe into that spot... and see the tiny pixel-particles drain down your body, go through the spot, and be absorbed into the earth...see the tiny pixel-particles drain down your body, go through that spot, and be absorbed...absorbed...absorbed into the earth.*
20. *Place your feet flat against the floor. See a six-inch sphere 18 inches beneath your feet. Breathe into the sphere...breathe into the sphere and see the tiny pixel-particles release from the sphere...see the tiny, tiny pixel-particles releasing from the sphere.*
21. *Breathe into your diaphragm...breathe into your diaphragm and release the tiny, tiny pixel-particles out your diaphragm...releasing the tiny pixel-particles out of your diaphragm.*
22. *Breathe into your heart...breathe into your heart and release the tiny pixel-particles out your heart...releasing the tiny pixel-particles out of your heart.*
23. *Breathe into the depths of your heart...breathe into the deep, deep depths of your heart, and release the tiny, tiny pixel-particles from the deep depths of your heart... releasing the tiny pixel-particles from the deep depths of your heart.*
24. *Breathe into your throat...breathe into your throat and release the tiny pixel-particles out your throat...releasing the tiny pixel-particles out of your throat.*
25. *Breathe into your voice...breathe into the depths of your voice and release the tiny pixel-particles from your voice...releasing the tiny pixel-particles from the deep depths of your voice.*
26. *Breathe into the right side of your brain...breathe into the right side of your brain and release the tiny, tiny pixel-particles out the right side of your brain...releasing the tiny pixel-particles out the right side of your brain.*

27. *Breathe into the left side of your brain...breathe into the left side of your brain and release the tiny, tiny pixel-particles out the left side of your brain...releasing the tiny pixel-particles out the left side of your brain.*
28. *Breathe into the front of your brain...breathe into the front of your brain and release the tiny, tiny pixel-particles out the front of your brain...releasing the tiny pixel-particles out the front of your brain.*
29. *Breathe into the back of your brain...breathe into the back of your brain and release the tiny, tiny pixel-particles out the back of your brain...releasing the tiny pixel-particles out the back of your brain.*
30. *Breathe into the center of your brain...breathe into the center of your brain and see the tiny, tiny pixel-particles, releasing, radiating out in all directions from the center of your brain...see the tiny pixel-particles, releasing, radiating out in all directions from the center of your brain.*
31. *Breathe into your mind...breathe into the deep depths of your mind and release the tiny pixel-particles from your mind...releasing the tiny pixel-particles from the deep depths of your mind.*
32. *Breathe into the core of your self...breathe into what you think of as the core of your self and release the tiny pixel-particles from the core of your self...releasing the tiny pixel-particles from the core of your self.*
33. *Imagine that you are about to yawn. Imagine that you are yawning a deep, wide yawn. As you yawn, see the tiny pixel-particles release from the core of your self...as you feel the yawn throughout your whole body...as you feel the yawn throughout your whole body, see the tiny pixel-particles releasing from the core of your self.*
34. *Scan your body to see if there are any particles remaining in your body. If there are, breathe into that part of your body and then breathe the tiny pixel-particles out the pores of your skin in that area.*
35. *Let's reevaluate the image. What is your reaction to the image now?*
 [There should be some change in attitude toward the image even if some charge remains.]
36. [If the reaction is intensely charged, reevaluate the situation. There may be another feeling related to the image.]

When there are multiple feelings related to an image or a memory, the image may become less charged or altered in some way without being completely eliminated. This incomplete processing may not be noticed until the next session. If so, reevaluate the image for additional feelings that continue to energize the image.

The Morphing Technique

Morphing the image:

ASFs can sometimes be identified by allowing the mind to “morph” or change the image of the behavior.

Script: *“What I want you to do now is to allow your mind to change the image into anything it wants to. Just let your mind change the image.”*

Example: A woman had a memory of buying and eating candy as a child. When asked to allow her mind to morph the image, the image changed into a bird flying. This shift in image allowed her to identify the feeling of “freedom” that she had associated with the behavior of eating candy.

Choose an image from a memory or dream that likely has an underlying psychological dynamic. Allow your mind to change it to anything it wants to change that image to.

What is the image?

What are the different images that your mind created?

What is the psychological meaning of the original image?

Black Tar Practicum

Sometimes the colors or particles can be very sticky or hard to remove. Think of this as not a psychological issue but a physical one: How would you normally physically remove something that is hard or sticky? Dissolve with a solvent? Pry it loose? Vibrate it off? Try different approaches until the substance will release.

When the substance is very heavy or gooey, remove the substance from the nearest exit. Don't try to move it through the body.

Practicum:

Scan your body for a very heavy or sticky type of energy or particles or sensation. Remove it by creatively finding an approach that will work.

How does your body feel afterward?

