

MIRACLE ROOMS

FOUNDATION SCHOOL

CHAPTER TEN

The Mind and Relationships

Inner Healing, and Knowing Exactly Where Our Competence Ends

"He heals the brokenhearted and binds up their wounds."

Psalm 147:3

TRAINEE MANUAL · VOLUME FIVE

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10.0 Chapter Overview

Two of the five Miracle Rooms dimensions are introduced here — mind and relationships. Both are introduced deliberately at an entry level, with the boundary drawn firmly and early.

The two sentences that govern this chapter

We pray for wounded hearts. This is real ministry, it is biblical, and people are genuinely helped by it.

We are not counsellors, psychologists, psychiatrists, social workers or doctors, and we must never present as any of these.

Trainees who can hold both are safe. Trainees who can only hold the first are the reason this chapter is written the way it is.

10.0.1 Learning outcomes

By the end of this session a trainee will be able to:

1. Explain why inner healing is handled separately from physical healing in this school.
2. State the pace rule and the no-digging rule, and explain the evidence behind them.
3. Minister forgiveness as a gift offered, never a duty imposed, and distinguish forgiveness from reconciliation.
4. Recognise grief and shame without treating either as a problem to be solved.
5. Pray about a relationship without taking sides, carrying secrets, or advising anyone to remain unsafe.
6. Recite the stop-and-refer list and demonstrate a warm handover.
7. Apply the escalation table correctly, including the reporting obligations that override everything else.

10.0.2 Session plan

Time	Element	Reference	Lead
0:00–0:20	Worship and waiting	—	Worship lead
0:20–0:30	Report-back: observed encounters	Ch. 9 App. 9B	Trainers

Time	Element	Reference	Lead
0:30–1:15	Teaching	§ 10.1–10.12	Teacher
1:15–1:30	Break	—	—
1:30–1:55	Table discussion	§ 10.14	Team leaders
1:55–2:25	Activation — referral scenarios	§ 10.15	Facilitator + trainers
2:25–2:30	Send-out and weekly practice	§ 10.16	Facilitator

Facilitator note

This chapter frequently surfaces trainees' own material. Some of them have been through the ministry practices this chapter warns against, and a few have been harmed by them.

Say at the start that nobody is required to share anything, that support is available afterwards, and name the person providing it.

Do not let the session become a group therapy hour. Notice, be kind, follow up privately, and keep teaching.

10.1 Why This Is a Separate Chapter

Physical and inner healing are both real, both biblical, and both belong in a Miracle Room. We separate them in the training for three reasons, and each is practical.

Reason	Consequence
It is slower	A knee can change in ninety seconds. A twenty-year pattern of shame does not, and treating it as though it should is itself harmful
It goes deeper	The material is closer to the person's identity, their family and their worst experiences. Handling it carelessly does more damage than a badly prayed knee ever could
It can destabilise people	Opening old material without the training or the follow-up structures to hold what comes out can leave someone worse than they arrived. This has happened often enough to be well documented (§ 10.12)

There is a fourth reason and it is the one that matters most: this is the area where the gap between what a well-meaning volunteer can do and what a trained professional can do is widest – and where the volunteer is least likely to notice the gap.

The Chapter Seven principle, applied

Compassion without competence is not enough.

Warmth is not therapy. Prayer is not assessment. Sincerity does not exempt anyone from the obligation to get help that is beyond them.

10.2 What We Do Minister

Within the boundary, there is a great deal of genuine ministry, and it is the ordinary work of the church.

Area	What that looks like in a Miracle Room	Anchor text
Forgiveness	Helping someone who wants to forgive to do so, in their own time	Matthew 6:14–15; Ephesians 4:31–32
Grief	Sitting with loss without hurrying it or explaining it	Psalms 34:18; Romans 12:15; John 11:35
Shame	Praying against the belief that they are worthless or beyond love	Isaiah 61:1–3; Romans 8:1
Fear and anxiety	Praying for peace, alongside — never instead of — proper care	Philippians 4:6–7; 2 Timothy 1:7
Rejection	Praying about the experience of being unwanted or cast out	Psalms 27:10; Isaiah 49:15–16
Identity	Praying that they would know themselves as loved and as God's own	Romans 8:15–17; 1 John 3:1
Renewing the mind	Praying about entrenched thought patterns, and pointing to Scripture	Romans 12:2; Philippians 4:8
Reconciliation	Praying for restored relationships, without taking sides	2 Corinthians 5:18–20; Matthew 5:23–24

10.3 How We Minister It

10.3.1 The pace rule

The person sets the pace, always. You go where they take you, at the speed they take you, and you stop when they stop.

1. Consent at every step, not once at the beginning. “Would it help to pray about that, or would you rather leave it?”
2. If they change the subject, let them. That is a decision, and it is theirs.
3. If they become distressed beyond ordinary tears, stop the ministry and care for the person. The watcher's job (Chapter Nine § 9.2.2).

4. Never press for detail. You do not need the details in order to pray, and asking for them is almost always for your benefit, not theirs.

10.3.2 The no-digging rule

Stated absolutely

We do not go looking for buried material. Not through questioning, not through visualisation, not through prayer that asks God to show a person the root of their problem, and not through any technique that invites memories to surface.

If something surfaces on its own, we handle it gently and we refer.

We never go hunting for it. The reasons are in § 10.12, and they are not theoretical.

This rules out a family of practices common in inner-healing ministry: asking God to reveal the earliest memory connected to a feeling; guiding a person back into a scene and asking what they see; asking where Jesus was in the memory; hunting for the moment a “lie” entered. Some of these are offered sincerely by people who have seen apparent good come of them. They are not permitted here, and § 10.12 explains what happened when the wider church adopted them.

10.4 Forgiveness

The most commonly ministered item in this chapter, and the most commonly mishandled.

10.4.1 What Scripture says

Be kind to one another, tenderhearted, forgiving one another, as God in Christ forgave you. Ephesians 4:32

Forgiveness is commanded, it is central, and it is genuinely liberating. Nothing in this section retreats from that. The problem is not the doctrine; it is what happens when the doctrine is applied by an untrained person to a wounded one under time pressure.

10.4.2 Four distinctions that must be kept

Forgiveness IS	Forgiveness IS NOT
Releasing a debt — giving up the right to repayment	Saying that what happened was acceptable
A gift offered to the wounded, for their freedom	A duty extracted from them by a minister on a deadline
Often a process, returned to many times	A single transaction completed in a prayer room
Compatible with continued anger, grief and consequences	The same thing as feeling better about the person
Entirely separate from reconciliation	A reason to resume contact with someone who is dangerous

The line this school will not permit to be crossed

Forgiveness never requires a person to return to, remain in, or resume contact with a relationship in which they are being harmed.

Forgiveness does not require them to drop a police report, withdraw a complaint, or stay silent.

Reconciliation requires two parties, repentance, changed behaviour and safety. Forgiveness requires none of those, and confusing them has kept people in danger.

A minister who tells an abused person that forgiveness means going back has done serious harm and will be removed from the roster.

10.4.3 How to minister it

Do	Don't
Offer it: "Would it help to pray about forgiving him — or is that not where you are today?"	Announce that they need to forgive before God can work
Let them use their own words, at their own pace	Lead them in a prepared prayer they are expected to repeat
Accept "I'm not ready" as a complete answer, with warmth	Treat reluctance as rebellion, bitterness or a root that must be dealt with
Say that it is often a process and they can come back to it	Imply it is now finished and should not trouble them again
Pray for God's help in it — it is His work in them	Make the healing conditional on it. "God can't heal you until you forgive" is forbidden (Chapter Eight § 8.9.2)

10.5 Grief

Grief is not a disorder, a lack of faith, or a problem to be prayed away. It is love continuing after loss, and Scripture treats it with enormous respect.

Jesus wept at the tomb of a man He was about to raise (John 11:35). Job's friends were at their best in the seven days they sat with him and said nothing (Job 2:13). Paul instructs us to weep with those who weep (Romans 12:15), which is a command to join someone rather than to fix them.

Do	Don't
Sit with it. Let there be silence	Fill the silence with reassurance
Use the person's name, and the name of the one who died	Avoid naming them, which communicates that the subject is unwelcome
Pray for comfort and for the nearness of God	Pray for them to “move on” or “get past it”
Accept anger at God without correcting it	Defend God. He does not require it, and the Psalms are full of the complaint
Offer to be there again	Explain the death — God needed them, it was their time, everything happens for a reason

If grief appears complicated — prolonged, immobilising, or accompanied by anything in § 10.8.2 — refer. Bereavement support is widely available and specialised.

10.6 Shame, Fear and Identity

10.6.1 Guilt and shame are different

Guilt	Shame
“I did something bad”	“I am something bad”
Points at an action, and has a remedy — confession, repentance, forgiveness	Points at the self, and cannot be resolved by confession because it is not about an act
Often appropriate and useful	Almost always corrosive and false
Ministered by pointing to the cross	Ministered by pointing to who they are to God

A large proportion of the people who come for prayer are carrying shame and describing it as guilt. Listen for the grammar — am versus did — and pray accordingly. Romans 8:1 and 1 John 3:1 do more work here than any technique.

Be careful of one thing: never treat shame as though it were guilt and invite them to confess their way out of it. That deepens it.

10.7 Relationships

Marriages, families, estrangements and friendships. People will bring these to you constantly, and there are four rules.

1. Never take sides. You are hearing one account of a relationship, from one participant, at one moment. That is not enough information to form a judgement and you are not being asked to.
2. Never carry information between parties. If both are present, you are not a mediator. If one is present, you are not a channel.
3. Never advise anyone to stay in a situation where they are being harmed, and never frame endurance as faithfulness.
4. Never counsel about the marriage. Pray for the marriage, and refer them to someone qualified for the rest.

Praying for a marriage without adjudicating it

“Father, we ask You to bring peace into this home, and to give both of them wisdom and kindness. We ask for healing where there's been hurt.”

Notice what that prayer does not do: it does not decide who is right, it does not name a fault, and it does not instruct anybody.

If a person is being harmed, that is not a marriage-prayer situation. It is § 10.9.

10.8 The Boundary

This section is examinable and it is the reason the chapter exists.

Learn this exactly

Miracle Rooms ministers are not counsellors, psychologists, psychiatrists, social workers, doctors or nurses, and must never present, describe or conduct themselves as any of these.

We do not diagnose. We do not treat. We do not advise on medication, therapy or clinical decisions. We do not offer ongoing counselling.

We pray, we love, we refer.

10.8.1 Why the boundary protects the person, not the ministry

Trainees sometimes hear this as institutional caution – the organisation protecting itself. It is not.

A person with an untreated psychotic illness who receives prayer instead of psychiatric care may lose years. A person with an eating disorder who receives spiritual encouragement instead of specialist treatment may die; these have among the highest mortality rates of any mental illness. A person in family violence who is prayed for and sent home may be seriously injured. In each case the prayer was sincere and the outcome was worse than if the volunteer had done nothing except help them find the right door.

10.8.2 Stop and refer – the list

If any of the following appears, ministry stops in its present form and the duty leader is involved. This list is memorised.

Presentation	Action
Any mention of suicide, self-harm, or not wanting to be alive	Stay with them. Do not leave them alone. Duty leader immediately. Do not simply pray and send them home
Abuse, violence, or risk to a child or a vulnerable adult	Duty leader immediately. Reporting obligations apply and are followed – see § 10.9
Psychosis – hallucinations, delusions, disordered speech	Do not affirm or interpret the content. Do not treat it as spiritual. Care for them; duty leader; medical referral

Presentation	Action
Mania — elevated mood, no sleep, rapid speech, grandiosity	As above. This is a medical emergency more often than it looks
Severe dissociation	Stop. Ground them gently in the present. Duty leader
Disordered eating of any kind	Refer only. No discussion of food, weight, bodies, exercise or targets — not even encouragement
Addiction, or a person who appears intoxicated	Do not proceed with ministry. Care for them; duty leader
Recent bereavement by suicide, or any traumatic death	Pray gently if wanted; refer to specialist bereavement support
A request to reduce or stop prescribed treatment	“That’s a conversation for you and your doctor.” Chapter Nine, non-negotiable 3
Anything you do not understand or feel out of your depth in	Refer. Being out of your depth is information, not failure

10.8.3 Referral is not a failure of faith

Say this to the person, and mean it

“What you’re carrying deserves proper care alongside prayer, and I’d love to help you find it. Can I introduce you to someone?”

Referral is what love looks like when a need is bigger than your training. We pray and we refer — the two are not in competition, and choosing between them is a false choice this school does not permit.

Never say, or imply, that you are referring because their faith is insufficient, or because this is beyond what God can do. It is beyond what we are trained to do. Say that.

10.9 Escalation and Reporting

10.9.1 The duty leader

Every session has a named duty leader, identified aloud before the doors open, who is present for the whole session and who is not on a ministry team. Their role is to take escalations, make the call on stopping an encounter, and own any reporting obligation that arises.

A trainee never carries an escalation alone and never decides alone whether something is reportable. You raise it; the duty leader owns it. That is the entire protocol and it is not negotiable.

10.9.2 Reporting obligations – TO BE COMPLETED

MUST BE COMPLETED AND LEGALLY VERIFIED BEFORE PUBLICATION

This section is deliberately left incomplete. Reporting duties differ by jurisdiction and change over time, and a manual that states them inaccurately is worse than one that states nothing.

Leadership must insert, and have verified by a qualified adviser: (1) the jurisdiction in which each Miracle Room operates; (2) who in this organisation is a mandatory reporter under that jurisdiction's legislation, and on what grounds; (3) the reportable grounds and the timeframes; (4) the agency and contact details for making a report; (5) the organisation's own reporting policy, which may impose obligations beyond the statutory minimum; (6) Working With Children clearance requirements; (7) the retention and privacy rules governing our records.

Review annually and on any legislative change. Date of last legal review:

Until this section is completed, no Miracle Room operates with minors present.

10.9.3 What holds regardless of jurisdiction

1. Any concern about harm to a child or a vulnerable adult is escalated immediately, without exception, and without the trainee first deciding whether it is serious enough.
2. It is escalated even if the person asks you not to tell anyone. Confidentiality does not extend to a risk of harm, and the person should be told this at the point of disclosure rather than afterwards.

3. It is escalated even if the alleged person is a member of this church, a leader, or a friend.
4. It is not investigated by us. We do not question the person further, seek corroboration, or form a view. We record what was said, in their words, and pass it on.
5. A concern is never resolved by prayer alone.

The sentence that overrides everything else in this manual

Where there is a risk of harm to a child or a vulnerable adult, the obligation to report overrides confidentiality, loyalty, reputation, the person's wishes, and every other consideration in this book.

There is no version of faith, forgiveness, or restoration that suspends it.

10.10 Finances: The Fifth Dimension

The Miracle Rooms vision names five dimensions of healing — mind, body, spirit, relationships and finances. Four of them are trained in this school. The fifth is not, and trainees should understand why.

What we do	What we do not do
Pray about financial fear, shame and pressure — which are frequently the real weight the person is carrying	Give financial advice of any kind
Refer into the Miracle Rooms stewardship and Kingdom enterprise pathway	Coach on debt, budgeting, investment or business
Refer to qualified financial counselling, which is free in many places	Assess anyone's financial decisions
Pray for provision, plainly and specifically	Promise provision, or attach an amount or a date

Two absolute rules about money in the room

No Miracle Rooms minister ever receives money, gifts or favours from a person they have prayed for. Matthew 10:8 — you received without paying; give without pay.

No Miracle Rooms minister ever suggests that giving — to this ministry or any other — will produce healing, provision or any other outcome. Not as a hint, not as a testimony, not as a principle.

Breach of either is a matter for removal, not correction.

10.11 From History: Möttlingen, and Healing That Came Out of Pastoral Care

Johann Christoph Blumhardt (1805–1880) was a Lutheran pastor and Pietist in the village of Möttlingen, in the Black Forest. With Dorothea Trudel – whom you met in Chapter Nine – he is regarded as one of the two forerunners of the modern divine healing movement.

10.11.1 What happened

Blumhardt became involved in the case of a severely afflicted young woman in his parish, Gottliebin Dittus. Accounts describe a prolonged and exhausting struggle, lasting around two years, in which he prayed with her, sat with her, and repeatedly doubted himself. It ended, in the traditional account, with the cry “Jesus is Victor”.

What followed is the part that belongs in this chapter. A spontaneous movement of repentance and confession swept Möttlingen. Villagers came to their pastor in large numbers, unprompted, to confess and to be reconciled. Healings – physical and otherwise – were widely reported in the same period, and people travelled to Möttlingen from considerable distances.

10.11.2 Why this is the model for a chapter on the mind

What Blumhardt did	What we take
He stayed for two years with one person in his own parish, as her pastor	Inner healing is pastoral work conducted over time inside a community – not an intensive session delivered to a stranger and never followed up
He doubted himself repeatedly and said so	Certainty is not a requirement for faithfulness. A minister who is sure of everything in this territory is the one to worry about
The healing that followed came in the context of confession, repentance and reconciliation – ordinary church life	The mind and the relationships heal together, in community, over time. This is why Chapter Nine's Step 10 exists
He was a parish pastor, not a travelling specialist	Chapter Nine's argument again: a room in a place, among people who will still be there next month

One thing we do not take

Blumhardt's case was a deliverance case, and this school defers deliverance ministry entirely to post-apprenticeship advanced training. Chapter Twelve explains why.

Note that even Blumhardt's account describes two years of pastoral care by a man who knew the family, in a community that knew them both — not a technique applied to a stranger in fifteen minutes. Anyone citing Möttlingen to justify rapid deliverance ministry has misread it.

10.12 From History: When the Church Went Digging

This is the most important historical section in the manual for a chapter on inner healing, because the harm was extensive, it was recent, and the church participated fully.

10.12.1 What happened

Recovered memory therapy was developed in the 1980s as a way of retrieving supposedly lost childhood memories of abuse, using techniques including hypnosis and sustained suggestive questioning. It was widely adopted, and it required no serious training or certification to practise.

It fuelled a moral panic. Over twelve thousand unsubstantiated cases of Satanic ritual abuse were reported, beginning in North America in the 1980s and spreading internationally — a panic generally traced to the 1980 book *Michelle Remembers*, itself produced through recovered memory techniques. Law enforcement agencies conducted investigations and in some cases excavations. FBI special agent Ken Lanning examined hundreds of such claims and found no compelling evidence that these cults existed; his 1992 report put the question back to the mental health professionals to explain why victims were alleging things that did not appear to have happened.

Experimental work, notably by Elizabeth Loftus, demonstrated that detailed false memories of childhood events can be produced in test subjects. Research found that patients who underwent recovered memory techniques experienced a decline in psychological health, functioning and wellbeing. Diana Russell, whose 1986 work had been foundational in defending recovered memories, concluded in her 1999 edition that the majority of retrieved memories are false. Families accused on the basis of recovered memories organised; the False Memory Syndrome Foundation, formed in Philadelphia in 1992, received requests for help from more than twenty-five thousand American families by the end of the decade. Lawsuits followed, some settling for millions, and by the end of the 1990s many of the clinics specialising in the approach had closed. The practice has been largely abandoned by the therapeutic community.

Even people who later concluded their recovered memories were false — and retracted them — have been described as continuing to suffer lasting harm.

10.12.2 And the church did not merely watch

This is the part usually omitted when the story is told in Christian settings.

Leading evangelical psychologists published books teaching recovered memory approaches to Christian audiences. Respected Christian therapeutic institutions adopted the approach. Because Satanic ritual abuse featured centrally in many recovered memories, prominent spiritual warfare writers endorsed the idea as well. For a great many Christians, recovered memory arrived not through a therapist's office but through healing-of-memories ministries, and it became central to widely practised forms of inner-healing prayer.

These were not fringe operators. They were sincere, prayerful, well-regarded ministries staffed by people who believed they were helping, using a method that felt spiritually fruitful and was later found to manufacture the very thing it claimed to uncover.

10.12.3 What this school concludes

Lesson	The rule it produces
Suggestion in a trusted setting can create detailed, sincere, false memories	The no-digging rule (§ 10.3.2). We never invite material to surface
A prayerful, loving atmosphere increases suggestibility rather than reducing it	Our warmth is not a safeguard. It is a risk factor, and must be paired with restraint
The people harmed were being ministered to by people who loved them	Sincerity is not a safeguard either. Chapter One said this about Kuhlman; it is true here too
Apparent spiritual fruit accompanied a method that was doing harm	Chapter Eight § 8.8 – Edwards tested fruit over time, not the felt quality of the experience
The church adopted it from the surrounding culture without examining it	Anything we import into ministry practice gets checked against Scripture and against evidence, not against how well it seems to work in the room

The instruction

If a person spontaneously discloses something from their past, you receive it kindly, you do not question them about it, you do not pray it back into view, and you refer.

If nothing surfaces, you do not go looking. Ever.

God does not require our excavation to heal anybody, and He has not asked us to conduct it.

10.13 What This Means for a Miracle Room

Because...	Our room is...
Inner healing is slower and deeper	Patient. No expectation that twenty years resolves in fifteen minutes
The person sets the pace	Consenting at every step, not once at the start
Suggestion can manufacture memory	Never digging. We receive what surfaces; we never invite it
Forgiveness is a gift, not a duty	Free of pressure. "I'm not ready" is a complete answer
Forgiveness is not reconciliation	Safe. Nobody is ever sent back to someone who is harming them
Grief is love continuing, not a problem	Willing to sit in silence and to say the dead person's name
Shame is not guilt	Listening for am rather than did
We hear one side of any relationship	Never adjudicating, never carrying messages
Our competence has a hard edge	Quick to refer, with a real directory and named contacts
Reporting overrides everything	Escalating every concern to a named duty leader, without exception

10.14 Table Discussion

Groups of three or four. Twenty-five minutes. Question 5 is the one that changes practice.

1. Why is the temptation to overstep strongest with people in emotional pain?
2. Rehearse aloud in your team: how do you refer someone without making them feel rejected? Say it three different ways.
3. Have you seen forgiveness taught in a way that pressured someone? What did it do?
4. Where in your own church culture might a grieving person feel their grief was unwelcome?
5. Sincere, loving ministries harmed people by digging for memories. What in our practice would stop us doing something like that in twenty years' time?
6. What would make it hard, in this room, for a trainee to say "I'm out of my depth"? How do we remove that?

10.15 Activation – Referral Scenarios

10.15.1 Part A – Identify and hand over

Teams of three. Each team receives scenario cards from Appendix 10C. For each, the team must (a) decide whether to continue, refer, or escalate, (b) name the reason, and (c) perform the handover aloud, warmly.

The handover is the part that is assessed. Getting the decision right and delivering it coldly is a failure.

10.15.2 Part B – The forgiveness offer

In threes. One person describes – in general terms only, nothing they are not ready to share – a situation where they were wronged. The other two must offer prayer about forgiveness using the language in § 10.4.3, and must accept “I’m not ready” without altering their warmth.

Half the speakers are instructed in advance to decline. The listeners are not told which.

What is being trained

Trainees consistently handle a yes well and a no badly. The tell is a small change in tone, a pause, or a follow-up that reopens the subject.

The person can always feel it, and the next person they tell will get a different answer.

10.15.3 Facilitator pre-session checklist

- ☐ Appendix 10A completed with real local services before this session – a blank directory makes the exercise meaningless
- ☐ Appendix 10B and 10C printed for every team
- ☐ Duty leader present, named aloud, and available to receive practice escalations
- ☐ Stated at the start that nobody must share anything personal
- ☐ Trainers briefed to watch for tone change after “I’m not ready” in Part B
- ☐ Support person named for anyone affected by § 10.12 – some trainees will have experienced these practices
- ☐ Follow-up allocated – contact within 24 hours for anyone visibly affected

10.16 This Week's Practice

1. Learn the stop-and-refer list in § 10.8.2 until you can recite it.
2. Learn the referral sentence in § 10.8.3 word for word.
3. Read Appendix 10A. Know three actual local services by name, including one crisis line.
4. Learn the four forgiveness distinctions in § 10.4.2.
5. Written, half a page: where am I most likely to overstep, and what will stop me?
6. Continue your rule of life, listening journal and team contact.

10.17 Sources and Further Reading

10.17.1 Scripture

Psalm 34:18; 147:3; Isaiah 61:1–3; Matthew 6:14–15; 18:21–35; John 11; Romans 8; 12:2, 15; 2 Corinthians 5:18–20; Ephesians 4:31–32; Philippians 4:6–9; Job 2:11–13.

10.17.2 On Möttlingen

Johann Christoph Blumhardt's ministry at Möttlingen, the Dittus case and the movement of repentance that followed are documented in standard histories of the divine healing movement, which place him alongside Dorothea Trudel as a forerunner of the modern movement.

10.17.3 On recovered memory

The history is extensively documented. Key threads include Ken Lanning's 1992 FBI report on Satanic ritual abuse claims; Elizabeth Loftus's experimental work on memory implantation; the formation and caseload of the False Memory Syndrome Foundation from 1992; Diana Russell's 1999 reversal of her earlier position; and the substantial literature on the decline of the panic. For the church's own participation — including uptake by evangelical psychologists, Christian therapeutic institutions, spiritual warfare writers and healing-of-memories ministries — see the treatment in *Christian Scholar's Review*. Read at least one account written by someone inside the Christian counselling world.

10.17.4 Standing instruction

Before adopting any ministry practice, ask two questions: what does Scripture say, and what happened when other people did this? The second question is the one churches skip.

Appendix 10A – Referral Directory

COMPLETE WITH REAL LOCAL SERVICES BEFORE ANY ROOM OPENS. Reviewed every six months. A copy is held in every room.

Need	Service	Contact	Notes / hours
Crisis — suicide or self-harm			
Emergency services			
Mental health crisis / triage			
General practitioner (after-hours)			
Counselling — general			
Counselling — low or no cost			
Family violence support			
Child protection — reporting line			
Eating disorder support			
Bereavement support			
Addiction and alcohol services			
Sexual assault support			
Financial counselling (free)			
Miracle Rooms stewardship pathway			
Duty leader — this session			

Directory last reviewed: **By:** **Next review due:**
.....

Appendix 10B – Escalation Decision Table

Displayed in every room. When in doubt, escalate. Nobody has ever been criticised here for escalating unnecessarily.

If you hear or see...	Continue?	Action
Ordinary distress, tears, grief	Yes, gently	Slow down. Offer to stop. Watcher monitors
Suicide, self-harm, not wanting to be alive	STOP	Stay with them. Do not leave them alone. Duty leader NOW
Harm to a child or vulnerable adult	STOP	Duty leader NOW. Reporting obligation applies. Do not investigate
Family violence, or fear of a partner or relative	STOP	Duty leader. Never advise returning. Refer to specialist service
Psychosis, mania, severe dissociation	STOP	Do not interpret the content. Duty leader. Medical referral
Disordered eating	STOP	Refer only. No discussion of food, weight, exercise or targets
Intoxication or acute addiction	STOP	Care for them. Duty leader. Do not minister
Request to stop medication	Yes, but	"That's for you and your doctor." Duty leader afterwards
Disclosure of past abuse, spontaneously	Pause	Receive kindly. Do not question. Do not pray it back into view. Refer
A team member breaches a non-negotiable	STOP	Watcher ends the encounter. Report the same evening
You feel out of your depth	STOP	Refer. This is information, not failure

Appendix 10C – Scenario Cards

Cut and distribute. Teams decide: continue, refer, or escalate — then perform the handover aloud.

#	The person says...	Correct handling
1	"I can't forgive my brother. Everyone keeps telling me I have to."	Continue. Offer, do not press. Accept "not ready". Never make healing conditional on it
2	"My husband gets angry and I'm frightened to go home some nights."	STOP. Duty leader. Specialist family violence referral. Never advise returning or frame endurance as faithfulness
3	"I've been hearing voices telling me I'm being watched."	STOP. Do not interpret the content spiritually. Duty leader. Medical referral
4	"I've hardly eaten for three days. I feel closer to God when I'm empty."	STOP. Refer only. No discussion of food, weight or fasting. Duty leader
5	"Since my son died I can't pray. I'm angry with God."	Continue gently. Do not defend God. Do not explain the death. Say the son's name. Offer bereavement referral
6	"I think something happened to me as a child but I can't remember it. Can you pray for God to show me?"	Do not pray for recall. § 10.3.2. Pray for peace and God's care. Refer to a qualified professional
7	"Honestly, some days I think everyone would be better off without me."	STOP. Stay with them. Do not leave them alone. Duty leader immediately
8	"I want to give you something for what you've done for me."	Decline warmly. § 10.10. Never receive money or gifts

Appendix 10D – Trainee Self-Check

Complete before Chapter Eleven. Not collected, not marked.

- ☐ I can explain why inner healing is trained separately from physical healing
- ☐ I can state the pace rule and the no-digging rule
- ☐ I can explain what happened when the church adopted recovered memory approaches
- ☐ I can state the four forgiveness distinctions, and that forgiveness is never reconciliation
- ☐ I know that forgiveness never requires anyone to return to someone harming them
- ☐ I can tell the difference between guilt and shame by listening for am versus did
- ☐ I can pray for a marriage without adjudicating it
- ☐ I can recite the stop-and-refer list
- ☐ I can say the referral sentence word for word, warmly
- ☐ I know the escalation table and I know the reporting obligation overrides everything
- ☐ I know three actual local services by name, including one crisis line
- ☐ I know that I never receive money or gifts from anyone I have prayed for

Chapter Ten – Summary Card

Retain and review

We pray for wounded hearts. And we are not counsellors, psychologists, psychiatrists, social workers or doctors, and never present as any.

The person sets the pace. Consent at every step, not once at the start.

We do not go digging. We receive what surfaces; we never invite it. Ever.

Forgiveness is a gift offered, never a duty extracted. "I'm not ready" is a complete answer.

Forgiveness is not reconciliation. It never requires anyone to return to a person who is harming them.

Grief is love continuing after loss. Sit with it. Say the name. Do not explain the death.

Guilt says I did something bad; shame says I am something bad. Do not treat shame as guilt.

Never take sides, never carry messages, never counsel a marriage — pray, and refer.

Referral is what love looks like when a need is bigger than your training. Being out of your depth is information, not failure.

Reporting a risk to a child or vulnerable adult overrides confidentiality, loyalty, reputation and the person's wishes. No exceptions.

Blumhardt stayed two years with one person, in his own parish, doubting himself — and the healing came through confession and reconciliation in community.

Sincere, loving Christian ministries manufactured false memories in people who trusted them. Warmth is not a safeguard. Sincerity is not a safeguard. Restraint is.

End of Chapter Ten