

Jim Knipe's LOUA procedure: Level of Urge to Avoid:

The target is the *avoidance* itself.

1. Ask for representative visual image of the avoidance:
 - a. "So what image represents _____ (urge to avoid)?"
2. Scale intensity of the avoidance urge, 0-10 scale where 10 is strongest urge
 - a. "As you see that image, how much on that 0-10 scale (where 10 is the strongest urge imaginable) do you NOT WANT TO _____ (avoided object, issue or emotion)?"
3. Locate urge in the body and physical sensations
 - a. "Where do you feel that in your body?"
4. Start BLS.... "stay with that" or "just think of that" and do several sets
5. Return to target and original question and scale level of **current** urge to avoid, 0-10
 - a. "Go back again to the question we started with. When you see that image of _____, *right now*, on that 0-10 scale, how much do you NOT WANT TO _____ *right now*?"
6. Resume sets
7. Return to target with original question and scale level of urge to avoid as often as needed to reduce urge and change motivation:
 - a. "Right now, again, think of _____. How strong is the urge, *right now*, not to _____?"
8. Once urge is '0' and you hear positive statements, scale positive cognition 1-7 on how true the new belief feels.
 - a. "How true on a scale of 1-7 where 1 is completely false and 7 is completely true, does that statement (insert positive cognition: _____) feel to you *right now*?"

The "WHAT'S GOOD ABOUT....?" Method for Targeting an Avoidance Defense:

This is usually done where there is a dissociated part of a memory and an overwhelming negative affect. When the memory is dysfunctionally stored as **BASK** elements (Braun, 1988)-- behavior, affect, sensation and knowledge—which are stored separately and dissociated from each other. A person might have sensations of trauma without knowledge of what those sensations are about. Or a person might have knowledge, but no memory pictures. Or pictures but no affect etc.

1. Ask, "What's *good* about NOT having _____ (memory, images, affect etc.)?"
2. Start BLS as patient answers. "Stay with that"
3. When you notice less intensity of emotion or shift in cognitions, return to target.
 - a. "Go back to the question: What's good **RIGHT NOW** about NOT having _____?"
4. Set of BLS
5. Return to target as needed until there is a shift in cognition or intensity of emotion and motivation to continue with reprocessing
6. If there is no shift sufficient to move on with reprocessing, can ask the following question to allow for positive affect at end of session:
 - a. "What are you figuring out here today that helps you?"