

*Light Stream*  *(Shapiro 2001)*

The client is asked to bring up some disturbing target and to concentrate on the body sensations that accompany the disturbance. The clinician asks the client to bring a disturbing target to mind and to notice the resulting changes in the body sensations. The clinician repeats the procedure until the client is easily able to identify body sensations that accompany disturbing material.

Once the client is able to concentrate on the body sensations, the visualization proceeds. The clinician tells the client that this is an imaginal exercise and that there are no right or wrong answers. The clinician then asks the client to concentrate on body sensations. “Concentrate on the feeling in your body. If the feeling had a shape what would it be?” After the client responds (e.g., the client might reply, “Round”), the clinician continues with “And if it had a size, what would it be?” (The same client might , for example, reply, “Like an apple.”) The clinician continues this line of questioning by asking about the feeling’s color, temperature, texture, and sound (e.g., *If it had a color, what would it be?*). When clients are asked about the feeling’s sound, they are told to simple describe it as “high-pitched or low;” otherwise they might become frustrated or anxious by trying to make the sound.

After the client has responded to these questions, he is asked, “Which of your favorite colors might you associate with healing?” It is important that the clinician accept the client’s answer – unless it is the same one he offered for the color of the feeling in the body In this case, the clinician should ask for another color. Once the client identifies a color, the clinician continues as follows:

> “Imagine that this favorite colored light is coming in through the top of your head and directing itself at the shape in your body. Let’s pretend that the source of this light is the cosmos: The more you see, the more you have available. The light directs itself at the shape and penetrates and permeates it, resonating and vibrating in and around it. As it does, what happens to the shape, size, or color?”

If the client indicates that it is changing in any way, the clinician continues, repeating a version of the italicized portion above and asking for feedback until the shape is completely gone, has become transparent, has assumed the same color as the light, or has undergone some other transformation. Change in the image usually correlates with the disappearance of the upsetting feeling. If no change occurs after the second attempt (the client might say, “nothing is happening; the light is just bouncing off”), the technique should be discontinued and another one tried.

After the feeling that accompanies the disturbing material dissipates, the clinician may continue in a slow, soothing tone:
“As the light continues to direct itself to that area, you can allow the light to come in and gently and easily fill your entire head, easily and gently. Now allow it to descent through your neck, into your shoulders, and down your arms into your hands and out your fingertips. Now allow it to come down your neck and into the trunk f your body, easily and gently. Now allow it to descent through your buttocks into your legs, streaming down your legs and flowing out your feel.”

Once the clinician perceives that the client is fully relaxed, he gives the client a positive suggestion for peace and calm until the next session. Then he asks the client to become awake and aware on the count of five. An audio version is available from EMDR-HAP.