



*Technique of Moving to Emptiness:
Brief Operational Process*

Presented By David Zhang





Acknowledgement

I acknowledge the Aboriginal and Torres Strait Islander peoples as the traditional custodians of this land and recognize their enduring connection to land, water, and culture. I pay my respect to their Elders past, present, and emerging, and commit to supporting and respecting their cultural heritage and practices.



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Introduction

Technique of Moving to Emptiness (TME) is rooted in the ancient Chinese Buddhist and Taoist practices of focused imagination and mental stillness, guided by therapists to enable clients to fully utilize their imagination. First, the target mental illness or disorder is symbolically objectified and placed into a personally crafted imaginary container. Then the imagined container carrying the symbolic object is moved back and forth at different psychological distances in imagination, leading the symbol and the container to gradually change or even disappear during the process, to relieve the psychosomatic symptoms (Tianjun Liu, 1994).

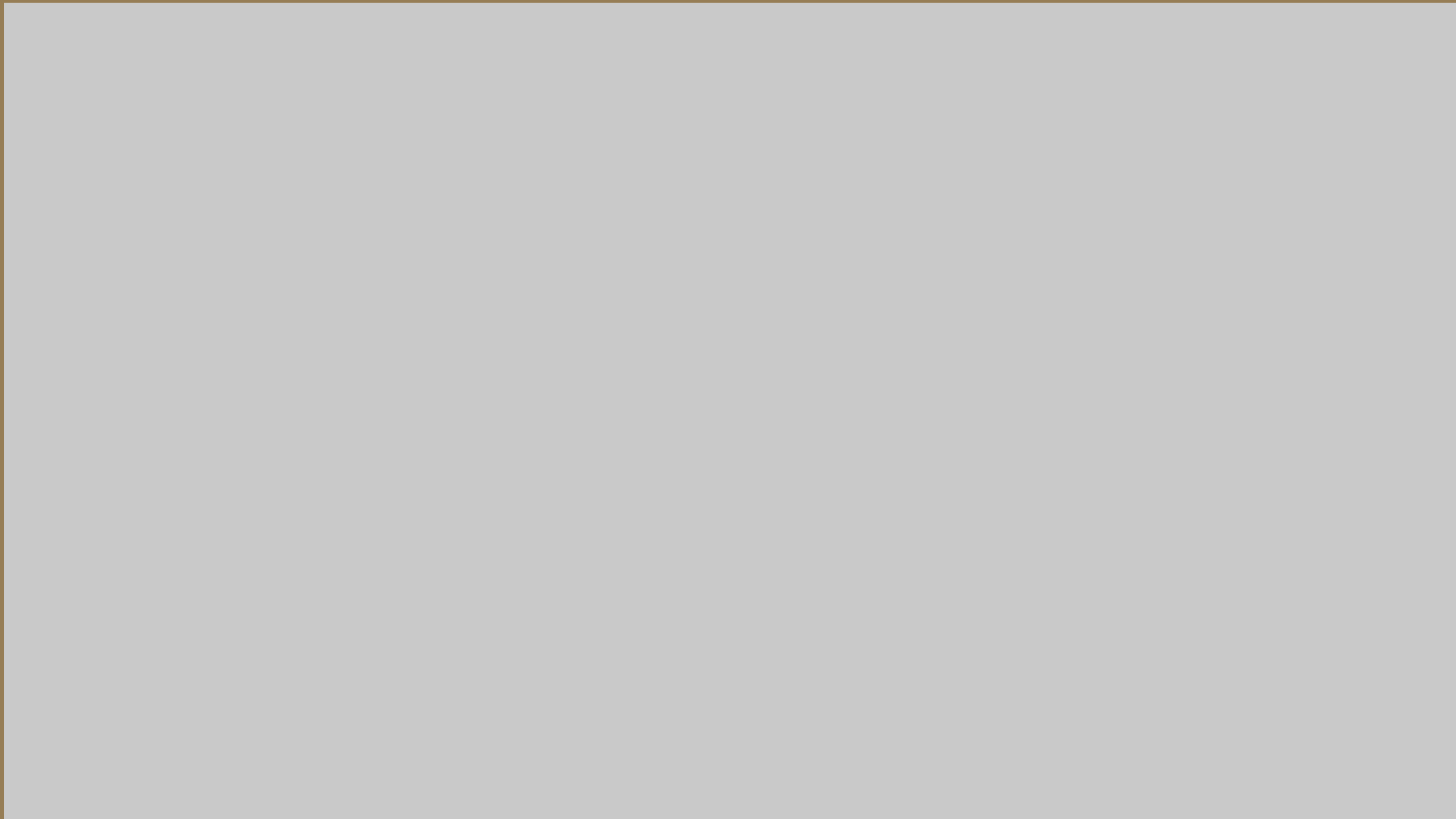
Qigong

Qigong is an ancient Chinese healing art that dates back 7000 years (Koh, 1982). The practice of qigong aims to cultivate energy via systematic training exercises, including the coordination of different breathing patterns, rhythmic movements, and meditation, in contrast to conventional exercise (Lee et al., 2003).

“qi” the vital energy of the body;

“gong” the training or cultivation of qi (Sancier, 1999).

Video About Qigong



2. Static phase

Objective: Choose a target problem, visualize its symbolic representation, and select an object to put the problem in.

2.1 Three-Step Relaxation

2.1.1 Body Relaxation: Sit up straight, place both hands on your knees, and lightly close eyes.

2.1.2 Breathing Relaxation: Focus only on breathing out for 1-2 minutes; leave some room for air, allowing a smooth transition to the next breath.

2.1.3 Mind Relaxation: Achieve calmness; let thoughts flow out with each exhalation.

2. Static phase

2.2 Identify the Problem

2.2.1 Select Target Problem

Psychological Symptoms: Emotions such as depression, anxiety, anger, fear, etc., should be categorized clearly.

Physical Symptoms: Issues like headaches, chest tightness, abdominal bloating, etc., should specify the body area.

Note: TME targets the symptoms, which may stem from various psychological disorders, hence is different from diagnosis. Additionally, its primary focus is on the somatic manifestations of psychological disorders, though it may also have some efficacy for similar symptoms arising from physical illnesses.

2. Static phase

2.2 Identify the Problem

2.2.1 Select Target Problem

2.2.2 Measure Influence: Self Report on a scale of 0-10. 0 means no influence at all and 10 means being deeply influenced. Client should record the influence point on record paper A.

2.2.3 Set Quantitative Criteria: Choose a problem with a minimum impact score of 7 or multiple problems with the total score of at least 7.

2. Static phase

2.3. Imagine the Symbol of the Target Problem

2.3.1. Imagining the Problem as a Symbolic Object

The therapist guides the client to imagine his/her physical and mental symptoms as specific objects. For example, upset emotions can be imagined as tangled threads, and feelings of chest tightness as a stone.

2.3.2. Deep Imagining of the Symbolic Object

The therapist asks a series of questions targeting the symbolic object, to help the visitor visualize it clearly.

i.e. What is the texture on the surface of the tape? Does the smell of the medicine inside come from traditional or Western medicine?

2. Static phase

2.3. Imagine the Symbol of the Target Problem

2.3.1. Imagining the Problem as a Symbolic Object

2.3.2. Deep Imagining of the Symbolic Object

The objective is to create a vivid mental image.

2. Static phase

2.4. Imagining a Container for the Symbolic Object

2.4.1. Imagining a Suitable Container

The therapist guides the visitor to imagine a suitable container where the symbolic object can be placed. For instance, tangled threads can be placed in a cloth bag, and a stone can be placed in a wooden box.

2.4.2. Repairing or Replacing the Container

If the symbolic object is obviously mismatched with the container, like a stone in a paper bag, the therapist should advise the client to reimagine the container in case it may break the container during future movement.

2.4.3. Deep Imagining of the Container

The same method of questions is used to help have a specific and clearly visible mental image of the container.

2. Static phase

2.5 Draw the Symbol and Object

Draw and list important characteristics of the object.

2. *Static phase*

2. Static phase

2.1 Three-Step Relaxation: Body, Breathing, Mind

2.2 Identify the Problem

- 2.2.1 Select Target Problem: Mental & Physical
- 2.2.2 Measure Influence
- 2.2.3 Set Quantitative Criteria

2.3. Imagine the Symbol of the Target Problem

2.4. Imagining a Container for the Symbolic Object

2.5 Draw the Symbol and Object

2. *Static phase*

2. Static phase

2.1 Three-Step Relaxation: Body, Breathing, Mind

2.2 Identify the Problem

- 2.2.1 Select Target Problem: Mental & Physical
- 2.2.2 Measure Influence
- 2.2.3 Set Quantitative Criteria

2.3. Imagine the Symbol of the Target Problem

2.4. Imagining a Container for the Symbolic Object

2.5 Draw the Symbol and Object

3. Intentional Movement Stage

Objective: Move the container with the symbol of the problem while in the Deep imagine state, to address and resolve the problem.

3. Intentional Movement Stage

3.1. Three-Step Relaxation

Same as 2.1.

3.2. Placing the Symbolic Object in the Container

3.2.1. Inspecting and Cleaning Both Symbol and Container

Guide the client to examine and clean the symbol in an appropriate way, e.g., wiping it with a cloth or dusting it off. Then clean the container in a similar way. If the container is a vessel, make sure to clean both the inside and the outside.

3.2.2. Putting the Symbol into the Container

Place the cleaned symbol into the container carefully and properly.

3.2.3. Securing or Reinforcing the Container

If the container is not secure enough, advise the client to take reinforcing measures to prepare it for moving, such as locking the wooden box that holds the stone.

3. Intentional Movement Stage

3.3. Moving the Container Holding the Symbolic Object

3.3.1. Initial Movement

Start from a close distance.

A. Ask the client to imagine placing the container in front of him/her, pause for a moment, and observe it.

B. Tell the client to move the container 1m → 3m → 1m in front of him/her, pausing between each movement, and then return it to its original position.

Repeat this 1-2 times.

3. Intentional Movement Stage

3.3.2. Visible Movement

Within the range of visibility, move the container back and forth at different distances.

A. Perform 3-5 movements initially, then ask the client if there is a perfect distance, and move it approximately 10 times. 1m → 5m → 10m → 5m → 10m → 20m (perfect distance) → 30m → 20m → 10m → 1m.

B. Move about 10 times to the farthest visible point, and ask the client to confirm the distance. 1m → 10m → 30m → 20m → 50m → 100m (farthest point) → 50m → 30m → 10m → 20m → 10m → 1m.

3. Intentional Movement Stage

3.3.3. Beyond-Visibility Movement

Move the container to an infinitely far distance where it disappears.

A. 1m → 10m → 30m → 20m → 50m → 100m → 50m → 1000m → infinitely far.

B. Pause at the infinitely far distance (1-3 minutes) and experience calm, rest, emptiness, and a quiet mind.

C. Gradually move the container back. E.g.: infinitely far → 1000m → 100m → 50m → 100m → 20m → 10m → 3m → 10m → 3m → 1m.

3. Intentional Movement Stage

3.4. Assessing Efficacy Based on Changes in the Symbol and Container

1) Move the container back in front of the client.

Ask the client to closely observe any changes in the appearance of the container, like size, weight, colour, shape, material, condition, etc., and describe them specifically.

2) Tell the client to open the container and carefully examine any changes in the symbolic object, such as size, weight, form, nature, etc., and describe them specifically.

3) Ask the visitor about any changes in their physical and emotional feelings, including changes in the affected body part, overall emotional changes, and changes in their understanding and attitude towards the problem; describe specifically.

4) Re-measure the impact of the problem and mark it on Record Sheet B.

3. Intentional Movement Stage

3.5. Draw the Symbolic Object and Container After Movement

- 1) Use Record Sheet B, same as 2.5.
- 2) The therapist fills in the relevant content on Record Sheet B.

3. Intentional Movement Stage

3.5. Draw the Symbolic Object and Container After Movement

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- 2) The therapist fills in the relevant content on Record Sheet B.

4. *Effectiveness Criteria*

4.1. Qualitative

Table 1. Qualitative Effectiveness Criteria

Symbolic object ↵	Container ↵	Target Problem ↵	↵
completely disappeared↵	Empty↵	Resolved↵	↵
shrunk, deformed, etc.↵	N/A↵	Reduced↵	↵
completely transformed into another object↵	N/A↵	The nature has changed↵	↵

4. Effectiveness Criteria

4.2. Quantitative

Table 2. Quantitative Effectiveness Criteria

A	B	Effectiveness
any number	0	Completely Solved
7	3 or lower	Significantly Effective
7	5 or lower (inclusive)	Effective
8 or 9	4 or lower	Significantly Effective
8 or 9	6 or lower (inclusive)	Effective
10	5 or lower	Significantly Effective
10	7 or lower (inclusive)	Effective

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Thank You

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The Treatment of the Obsessive Ideas of a Junior Middle School Boy by the TME: A Case Report

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Introduction

A 14-year-old boy, transitioning from the eighth to ninth grade, approached his mother before summer break with two issues he wanted to address: getting orthodontic treatment and consulting a psychologist. The initiative to see a psychologist was his own, feeling the urgency to resolve his tendency to "overthink trivial matters" as he enters ninth grade, which he believes is crucial for his studies and future education. His mother, through acquaintances, found a consultant for him.



Introduction

The boy, tall and slim, seemed to possess an inner vitality that was somewhat concealed. He was neatly dressed in a T-shirt, shorts, and sneakers. During our initial consultation, when discussing the schedule, he looked towards his mother, conveying a sense of helplessness as his summer was already filled with tutoring classes. His mother appeared to be overly involved in his academic life, treating him like a young scholar. In sixth grade, he showed tendencies towards compulsiveness, particularly liking to organize things.



Thank you!