UNC CHAPEL HILL SCHOOL OF SOCIAL WORK CLINICAL INSTITUTE

All parts are welcome:
Using the internal family systems
model with individuals and partners,
with
(or without) trauma history

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IFS Basics

- Created by Richard Schwartz, Ph.D., LMFT.
- Combines systems thinking and family systems theory with the notion of multiplicity of the mindthe human psyche is not monolithic but is made up of many various parts and a Self.
- Everyone has an unknown number of parts.
- Parts are functional, and all parts are good.
- And everyone has a Self, the essential core of our being that is by nature a compassionate presence and has the capacity to be an active leader.

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The External System



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General Systems Theory

 Systems theory is a conceptual framework based on the principle that the component parts of a system can best be understood in the context of the relationships with each other and with other systems, rather than in isolation.

-Originated by Ludwig Von Bertalanffy

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A System is a System is a System

- Systems theory tells us that all living things operate as part of one or more systems.
- Systems function according to certain principles, including that of maintaining homeostasis.
- If one thing in a system changes, it throws the whole system out of balance and the system tries the "right the ship" and return to the previous interactive dynamics, or it must find a new set of dynamics that create a new homeostatic balance.

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A System is a System is a System

- According to family systems theory (Bateson, Bowen, et al.), families are systems that operate according to these same principles.
- The way family members interact (e.g., enmeshed or disengaged, with alliances, coalitions, and polarities) are governed by systems principles.
- IFS says that an individual is a system, a family of parts that operate the same way.

Do I contradict myself? Very well, then I contradict myself, (I am large, I contain multitudes.)

-Walt Whitman in Song of Myself (1892)

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The Internal System: Types of Parts

- In IFS therapy, the focus is on two primary types of parts: *protective* parts and *vulnerable* parts.
- Vulnerable parts hold painful emotional states and/or negative beliefs about themselves from past wounding experiences.
- Protective parts' job is to protect vulnerable parts from being activated, and to protect us from being flooded by the pain that vulnerable parts hold.

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Vulnerable Parts: Exiles



Exiles

- When a wounding experience occurred in the past, the internal system "exiled" the wounded part, like locking a metaphorical crying child in a metaphorical basement. The system "encysts" the Exile.
- This enables us to continue to function, rather than being overwhelmed or paralyzed by the pain contained in the vulnerable part.
- Their painful emotional states and negative beliefs about themselves are referred to as "burdens."
- Essential qualities that originally belonged to an Exile get squeezed out by the weight of burdens.

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Exiles

- Exiles are younger, and of varying ages.
- An exile is the age of the person when the wounding circumstance occurred.
- Exiles are stuck in the *past*. **Their "present" experience** is **eternally** the wounding circumstance.
- They become desperate in their attempts to be cared for, banging on the metaphorical basement door.
- IFS enables us to bring Exiles out of the past and into the present, where they can release their burdens and take back their essential qualities. (Often, they're not far from our awareness—the "basement door" isn't very thick.)

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Protective Parts

- Protective parts *assume* roles that are more extreme than their true natures, in response to the circumstances that necessitate the exiling of parts. While their methods may have a harmful impact, their *intentions* are always positive.
- There are two types of protective parts: Managers and Firefighters.

Protective Parts

- Managers operate pre-emptively, looking ahead to the *future* and doing whatever they can to keep exiled parts at bay.
- **Firefighters** operate **reactively**, jumping in to lock escapee exiles back down. They are only concerned with the *present*, without regard for consequences.

Protective parts are often the age we were when they took on their roles.

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Managers



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Managers: Pre-emptive, Proactive, Future-oriented

- **Managers** are concerned with staying on top of things, keeping that basement door shut tight.
- They are focused on planning, controlling, and achieving, keeping things going. They can be good organizers or stern taskmasters, encouraging or critical or people-pleasing. The more intense the affect of the exiles, the more extreme the tactics of the Managers.
- Their extreme roles don't match their true natures.

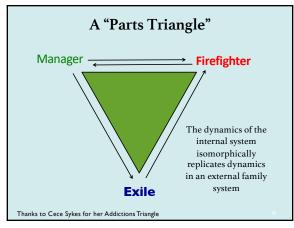


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Firefighters: Reactive, Present-oriented

- Firefighters spring into action when life happens, and an Exile is triggered.
- They use impulsive, compulsive and/or addictive behaviors, from nail-biting to heroin use to dissociation, to distract, comfort, numb or check out.
- This puts the Exile "back in the basement." Once that's accomplished, the system is restored to its dysfunctional homeostatic balance.
- Their extreme roles don't match their true natures.

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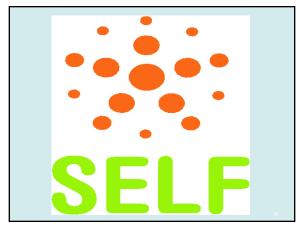
Polarization

Managers and Firefighters often don't get along. Managers can be critical of Firefighters' behaviors:

EXAMPLE: A Manager that tells a person who struggles with overeating that she is disgusting and gross. The Manager's intention is to stop the overeating, so the person will be more loveable and acceptable (via weight loss), but the overeater part (a Firefigher) believes that if she does, the person will be flooded by pain (contained in Exiles who hold experiences of rejection).

When two protective parts hold conflicting points of view, they are polarized. This polarization contributes to maintaining the homeostatic balance of the system.

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Self

- The **Self** is the timeless, essential core of one's being. Its qualities are known as the "8 C's"
 - I. Calmness
 - 2. Curiosity
 - 3. Compassion
 - 4. Confidence
 - 5. Courage
 - 6. Clarity
 - 7. Connectedness
 - 8. Creativity

Self

 "In IFS, when we speak of Self, we are referring to a centered state of embodied selfawareness and self-acceptance, combined with a deep sense of how we connect to others."

Sykes, C. C., (2016) "An IFS lens on addiction: compassion for extreme parts," in Sweezy, M. and Zizkind, E.L., *Innovations and elaborations in Internal Family Systems*, New York, NY, Routledge.

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Self

- We're wired so that optimally, Self is the leader of our internal systems, and our parts operate in harmony with Self and one another. (Self is "driving the bus.")
- Everyone has a Self, but it can become covered up by parts and lost awareness of/connection
- We know we're "in Self" or have "Self energy" present when we feel mostly one or more of the "C's," e.g., compassion or curiosity, toward any given part.

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Self

- · Self has no agenda.
- Self-to-part relationship is key to healing.
- Self-like parts are Managers with positive qualities, but they can't heal ("empathic rather than compassionate").
- Like all Managers, Self-like parts want to protect us from Exiles' pain, so they're likely to want to comfort an Exile to get it to calm down, rather than be with the Exile with compassionate witnessing.

The Experience of Parts

Awareness of parts occurs on a continuum. When we feel consumed by the affect of a given part, or see the world from its perspective, we say we are "blended" with that part.

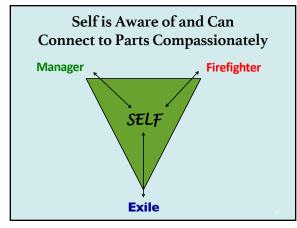
EXAMPLE: We know that our ex-partner was no good for us, but we are heartbroken, can't stop crying, and would go running back if they texted. We're aware of the "logical" part but blended with the heartbroken part.

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The Experience of Parts

- Further along at this end of the continuum, when
 we are overwhelmed by urges to behave a certain
 way, or by painful emotions, we are merged with or
 flooded by that part, and have little to no
 awareness of Self energy or other parts. Self and
 other parts are dissociated.
- Toward the other end, we are Self-led, aware of and feeling the emotions and attitudes of parts with acceptance and compassion. (Pure Self is transcendence/Samadhi.)

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IFS Therapy

- The goal of IFS therapy to bring the internal system into balance, with parts in the roles that are consistent with their true natures, and Self as the leader.
- This is achieved by creating relationship between Self and parts, and "unburdening" Exiles (and sometimes burdened protectors).
- We begin with protective parts, usually, but not always, Managers.
 - Firefighters can be unstable or upsetting to a client's system, and so Managers often jump in when the focus is on a Firefighter.
 - Trying to access Exiles too soon will destabilize the system.

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IFS Therapy: Working With Protectors

- "Insight" IFS work, in which the therapist guides the client in getting to know a part, starts with what's called the "6 F's:"
- The process begins by having the client direct their attention inward and *Find* the part in or around their body. Parts usually manifest as a physical sensation, like tightness in the chest or butterflies in the stomach.
- Then the client is directed to **Focus** on this part, then **Flesh it out**: see what else the client notices about it (shape, color, image, emotions, age range, etc.).

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IFS Therapy: Working With Protectors

- Therapist asks the client, "How do you *Feel* toward this part?" This tells us whether/to what degree the client is "in Self."
- Anything other than neutral or one of the 8 "C's" indicates that the client is blended with another part, which holds the feeling, e.g., fear or anger, toward (or an opinion of) the target part.
- The next "F" is beFriend, which can't happen if the client is blended with a part that feels negatively toward the target part, and will only go so far if client is blended with a Self-like part.

IFS Therapy: Working With Protectors

- When a client is blended with another part, they are
 directed to focus on that part, and to validate its
 point of view while explaining that at this time, the
 client wants to get to know the target part. The
 therapist directs the client to ask the part that they're
 blended with if it's willing to move out of the way.
- Befriending parts is important. Protective parts must be treated with respect and kindness, no matter how aversive their strategies.
- During befriending, we employ the last "F," asking about the *Fears* of the part. Protectors always have fears of what would happen if they didn't do their jobs.

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IFS Therapy: Working With Protectors

- When a given part is seen, heard, acknowledged, and validated by Self, it often feels to that part like water in the desert.
- But trust has to be built: sometimes several parts must be befriended before the system is ready to allow connection to a target part.
- Sometimes it becomes clear in the course of the work that the focus should shift to another part.
- Validating the awareness of positive intent helps give parts the sense of safety they need in order to reveal their protective functions.

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IFS Therapy: Working With Protectors

- Sometimes, parts won't unblend. There can be several reasons for this, e.g., they're afraid of what will happen if they do, they're not aware of Self, the client doesn't have enough Self-energy available.
- When this is the case, the therapist can switch from Insight work to Direct Access, in which the Self of the therapist talks directly to a blended part.
- Direct Access used to be employed only when Insight work wasn't working; more recently, it's become a go-to for working with highly critical managers (commonly known as "the Inner Critic").

IFS Therapy: Working With Protectors

- Usually, managers are burdened by and tired of their jobs, and would prefer not to have to do what they're doing, but they have taken on an extreme role out of necessity.
- During Insight work, when the target part feels safe, it usually wants to tell the client (the client's Self) about itself. It's invited to do so.
- Eventually, the therapist directs the client to ask the part how it came to take on its current role originally; what the circumstances were that made it necessary for the part to assume its role.
- The part can use words or pictures, whatever its "language," whatever works best for the client's parts.

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IFS Therapy: Working With Exiles

- Often, this leads to a memory of one or more painful events, usually in childhood or adolescence.
- The younger version of themselves in the memory is an Exile.
- The client usually feels the emotions that they felt at the time of the event, along with bodily sensations generated by the nervous system, because they are blended to some degree with the exiled part.

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Working With Exiles: Befriending and Witnessing

- The therapist guides the client in connecting to and befriending the Exile.
- When connection has been established, the client's Self is guided by the therapist to go into to past, into the situation where the Exile is stuck.
- The client has dual awareness, with one foot in the present and one in the past.
- The Exile is given an opportunity to tell its story ("Witnessing").

Working With Exiles: Retrieval and Unburdening

- When the Exile is ready, the client (in Self) can bring it out of the past and into the present. This is referred to as "Retrieval."
- The client's Self, guided by the therapist, assists the Exile in a ceremonial releasing of its burdens. This is known simply as "**Unburdening**."
- Once the burdens are gone, the clients helps the younger part in inviting back into its body any essential qualities that had been displaced by the burdens. This process reunites the client with qualities that were originally theirs, moving them toward wholeness.

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IFS Therapy: Integration and Completion

- The client is asked to check in with any protective parts that moved aside earlier on in the process, to see it they have any questions, comments or concerns, and to express appreciation to them.
- The therapist can encourage the client to spend time with the retrieved part, via journaling or visualization, between sessions. This can help orient the younger part to the present, and to make sure that it is, in fact still in the present (unnoticed burdens can cause a part to slip back the past).

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IFS Therapy: Integration and Completion

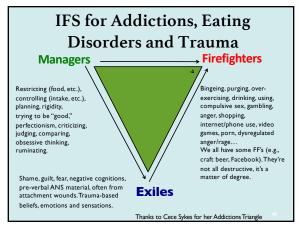
- The unburdening of and reintegration into the present system of Exiles enables protective parts to become spontaneously unburdened. This occurs when a critical mass of given exiled parts has been unburdened and has reabsorbed their essential qualities.
- Unburdened protective parts revert to their original natures, and balance is restored to the system. The client is free of destructive behaviors and is no longer tortured by the painful emotional states or negative beliefs about themselves and their bodies that had burdened their parts.

Self Leadership

- Ideally, Self becomes the leader of the client's internal system, and parts live in harmony with one another
- Ideally, the therapist is doing their own internal work, and is striving to be Self-led.
- "Self begets Self, and parts beget parts:" in relationships, a person blended with a part will tend to activate a part in the other person, while a person with a lot of Self energy present will tend to elicit more Self-energy in the other person.

A Self-led therapist will be better able to connect a client to their Self, and to unblend from their parts.

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IFS for Addictions

- Addictions begin as Firefighter behaviors: substance use or process (e.g., gambling, sex).
- Attempts to moderate or control these behaviors are carried out by Mangers who are polarized with these FF's.
- Over time, as a person develops dependence on and tolerance of the effects, Managers lose their power.

IFS for Addictions

- As the disorder progresses, Exiles holding shame, guilt, fear, etc. are activated, triggering more "using" FF's.
- Managers resort to hiding/ minimizing/ defensiveness.
- The system can become overrun with FF's, so Mangers who want to change are externalized: held in the family/friends.

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IFS for Addictions

- IFS therapy: if the client is in treatment willingly, start with Managers who sought therapy/want help.
 If not, start w/Mangers who don't want help/don't want to stop.
- If the client is stopping the use and is clean/sober, Managers must "work the program," e.g., 12 Steps, DBT skills, etc.
- The more external support (residential or intensive IOP, support groups) a person has in early recovery, the fewer external Exile triggers there are.

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IFS for Addictions

- Managers must work hard, skill up so client can tolerate exiles' affect, otherwise client will return to using.
- As this happens, Exiles must be found and unburdened, otherwise they'll be triggered (especially once out of a treatment setting) to a point that Managers can no longer contain them and the using FF's will step back in (this is what causes relapse).

IFS for Addictions

- Befriending dangerous FF's is necessary, but only possible when Managers are oriented to and in agreement with it.
- The more extreme the FF behavior (e.g., hard drugs, child pornography, other crime) the greater the number of and/or more intense and extreme the affect of the Exiles.
- Self energy toward all parts is key, in both client and therapist!

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IFS for Eating Disorders

- Some ED behaviors are proactive/preemptive and thus managerial: restricting, dieting, "clean eating," scheduled exercise.
- Some are reactive and thus FF-driven: bingeing, "emotional eating/compulsive overeating," purging (vomiting or laxatives), other "compensatory behaviors" (exercise, undereating).

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IFS for Eating Disorders

- ED Managers cite societally-endorsed, egosyntonic attitudes about managing weight, self-discipline, size-ism. Orthorexia and rigid exercise are common to anorexia and bulimia.
- The polarity between constricting Mangers and releasing FF's is always present, regardless of the disorder. Restriction is a big part of BED.
- Awareness of therapist biases is important.

IFS for Eating Disorders

- When Managers' efforts to "be good" fail, a person's binger or overeater FF is triggered either because the underlying exiles can't be suppressed or because of the physiological effects of inadequate nutrition or both.
- Negative body image is often a managerial response (fear of fat = alone and unloved) to Exiles who hold shame/pain of having been rejected: "Pin the Tail on the Donkey."

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IFS for Eating Disorders

- A binger FF is "putting out the fire" of an Exile(s) that the restricting/dieting/clean eating Manager could no longer contain. The person initially feels better.
- When the binge is over, exiles re-surface, often containing shame and guilt.
- In BN or AN B/P subtype, a purger FF steps in, throws up the binged food, pushing down the Exiles and creating calm and quiet inside. Empty = pure, safe.
- In BED, a Manager promises to do better starting tomorrow.

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IFS for Eating Disorders

- An undernourished brain makes thinking obsessive and irrational. When treating anorexia nervosa, adequate refeeding is necessary in order to do effective IFS work. The brain must have enough nutrients coming in to do the work of therapy.
- A challenge with AN is the lack of awareness of the negative impact of managerial ED behaviors and attitudes.

IFS for Eating Disorders

- When clients can understand the negative impact of ED Managers' behaviors, they can befriend those parts and access the related Exiles.
- When clients can appreciate the positive intent of ego-dystonic FF behaviors, they can befriend those parts and access the related Exiles.
- As usual, a treatment team including an R.D. and M.D. is recommended.

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IFS for Trauma

What is trauma?

"Trauma is not the story of something that happened back then. It's the current imprint of that pain, horror, and fear living inside people."

"Trauma is a disease of not being present."

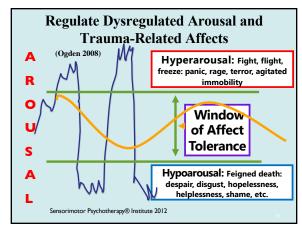
Van der Kolk, B. A. (2014). The body keeps the score: Brain, mind, and body in the healing of trauma. Viking.

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IFS for Trauma

Polyvagal theory of the autonomic nervous system (ANS), created by Stephen Porges, PhD.

- Three Branches of the ANS:
- I. Parasympathetic Ventral Vagal branch: "Social Engagement System."
- 2. Sympathetic: "Fight or Flight," and Freeze.
- 3. Parasympathetic Dorsal Vagal branch: primitive– Collapse, Submit, Dissociate.



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IFS for Trauma

- In reaction to a neuroceptively (not cognitively) perceived life threat, our animal defenses mobilize: our SNS fight/flight is activated so we can take action to defend ourselves.
- Trauma occurs when there's not time to react or, if a perpetrator is more powerful than we are, or we're dependent on them for survival (e.g., child-parent).
- Then the ANS shifts from SNS to PSNS/DV and submit/collapse/dissociate.

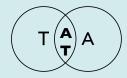
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IFS for Trauma

- Trauma is the experience of our mammalian defenses, e.g., SNS, activated and being unable to carry out the action the instigated action.
- The amygdala fires, emotions intensify, the prefrontal cortex goes offline, Broca's area (language) shuts down. We're overwhelmed and can't integrate the experience.
- Exiles contain the un-integrated material.

IFS for Trauma

Is it trauma, an attachment wound, or attachment trauma?



Attachment trauma: when the perpetrator is a parent or caregiver. Often the case with disorganized attachment.

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IFS for Trauma

- Managers have come up with strategies for keeping traumatized Exiles suppressed, in service of day-today functioning.
- Meet Mangers with Self and help calm their fears before addressing those Exiles.
- · Exiles contain the un-integrated material.
- IFS works well for attachment/ developmental trauma because of the conceptual framework of the internal system.
- IFS treats generational and "inherited" trauma by addressing "legacy burdens."

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IFS for Trauma

- When meeting and witnessing a traumatized Exile, the body will often begin to move with the activation of thwarted defensive actions.
- Therapist's and client's Self presence enables the client to remain "in their window."
- Therapist's understanding of ANS and fight/flight
 movements is helpful. As always when working with
 Exiles, therapist checks in with client to see if their
 experience is tolerable. If not, the Exile is asked to
 "turn down" the intensity.

Interweaving IFS with Other Modalities

EMDR:

- "Memory channels" are sets of Exiles.
- EMDR can work when the protective system is so airtight that there's not enough access to Self, and the therapist's Self isn't enough.
- EMDR "cuts through" protectors.
- Can be used when IFS work is stuck, and then IFS can be resumed after a targeted event is resolved (Exile is healed).

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Interweaving IFS with Other Modalities

Somatic Experiencing and Sensorimotor Psychotherapy:

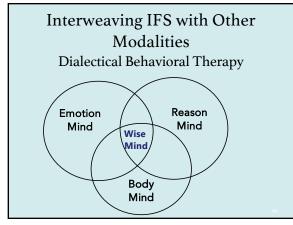
- When tracking ANS activation, think of trauma-related feelings and movement impulses as the language of an Exile and urges/behaviors to avoid or push away the affect and sensation as protective parts.
- Resourcing, grounding, and/or orienting techniques can set the stage for IFS work.

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Interweaving IFS with Other Modalities

Sensorimotor Psychotherapy:

- Character strategies
- The Child and the Adaptive Wounded
- "Adult-child reunion"
- When parts are accessed, therapist can shift to IFS to work with them.



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Interweaving IFS with Other Modalities

- Dialectical Behavioral Therapy (DBT):
 - Maladaptive coping strategies (e.g., self-harm, compulsions, substance misuse, suicidal ideation/behaviors) are conducted by Firefighters.
 - Dysregulated emotions/"Emotion Mind" that the M.C.S's are attempting to suppress/avoid/control are held in Exiles.
 - Reason Mind is (typically) held in Managers.
 - Body Mind is a combination of all types of parts.
 - Wise Mind is similar to Self, but different...

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Interweaving IFS with Other Modalities

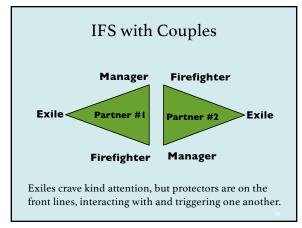
- DBT:
 - Wise Mind comprises aspects of Emotion Mind,
 Reason Mind and Body Mind, but also an intuitive knowing, while Self is what's there when parts unblend
 - Self practices mindfulness, with nonjudgmental awareness. (If a person doesn't have access to enough Self energy, a self-like part can do this.)
 - Managers learn and apply the skills.

Interweaving IFS with Other Modalities

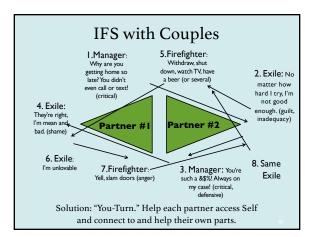
DBT: Chain Analyses:

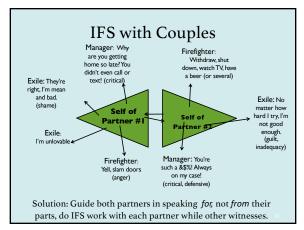
- Target Behaviors = Firefighter attempts to distract from/push away/get rid of Exiles' painful affect.
- Vulnerabilities = Exiles and situations in which Exiles are potentially triggered, that Managers can't deal with effectively.
- Actions = behaviors of protectors trying to avoid/distract from E's affect.
- Body Sensation = ANS reactions: fight/flight/freeze/collapse.
- Cognitions = thoughts any type of part is having.

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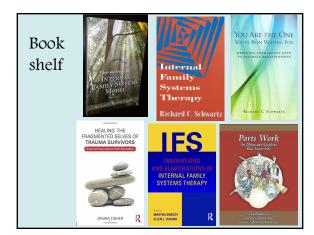


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Therapist Parts

Firefighters: **Exiles:** Managers: Anxiety/inadequacy Judgmental Angry ("She'll realize I don't Caretaker Checking out know what I'm Irritated Urges to _ doing") "Figure it Out" (eat chocolate, Fear/shame/SNS Achiever shop, check FB...) activation (in reaction to angry or dysregulated client) Examples from your own experience?

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