

# Goals of IFS Therapy

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Welcome back, everybody. I'm Toni. You have just heard from Pam about the basic assumptions of the IFS model and I'm now going to pick it up and talk to you about the goals of IFS therapy.

The first goal that we talk to students about when we're teaching is a goal that is probably common to most psychotherapies which is to help people achieve harmony and balance in their system. I think that speaks for itself and make some sense. The second goal of this therapy which is a little bit different is to help people to begin to differentiate between parts and self. Pam was talking to you about the nature of parts and also the nature of self and that the self is the healing entity and the paradigm from which healing occurs in this model.

We use the term unblend or unblending to describe this process of helping people begin to get a little bit of distance or separation from parts of them or aspects of their personality in order to have greater relationship with them. In other words, rather than I am all of one feeling that I happen to be having, I can begin to access what we call self, which you'll be hearing about over and over again as we teach this model, and get to know these parts or these aspects of yourself through the energy of the self. We will be discussing unblending again, month after month, during this training as it is such an essential part of the model.

The third goal that I want to talk about is the process of unburdening. This is part of the healing process in IFS and what we're helping people do is to unburden the negative beliefs that parts carry and free them from the extreme roles that they have taken on sometimes from early childhood. Another goal is to acquire the ability to lead from self and I think that Pam did talk about this, that the idea is not that we're getting rid of parts and we want a self. The idea is that the parts in the system who are inherent to the system and will never leave the system have an internal leader. We refer to this as self or self energy.

This week I had a couple of really lovely sessions with people that I have been working with for a long time and this idea of being able to differentiate and have a relationship with parts, a couple of them articulated so well so I want to just give you a little example of one person. What he reported to me, and I'm not going to go through the whole session with you, is that he woke in the night, he woke up in the middle of the night and he felt a constriction and a pain in his chest. He didn't really talk about what he might have done previous to our work together but it probably wasn't what occurred, what he was able to do in the night.

What he did was instead of either just taking a Tums or rolling over and going back to sleep or thinking he was having a heart attack, what he decided to do is to just see if he could stay present to the sensation for a little while. He just breathed in, he just breathed and he paid attention and he just noticed and he noticed and he noticed, and he noticed that he was beginning to feel a sad heaviness there in his chest. He just stayed with it hoping that he would actually begin to get more information from this heaviness in his chest. Then he started to feel some agitation and some frustrations. He was both feeling a sensation in his body and he was noticing a feeling.

Again, instead of trying to do something with it or do away with it, he just decided to stay with it and stay with it, which is what he had been learning in therapy. Then after a while he wasn't getting any

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more information about it so he thought, "Well, all right, maybe this is all I'm going to know for now." Suddenly he started having a memory. A memory started coming up of an incident that he had had with a friend. Again, instead of dismissing it, he chose to just stay with it and get curious.

I think the important part of this story is that what he has been learning to do in therapy is to start to instead of dismissing a sensation or feeling and experience, he's learning how to stay with it and allow information to come up and believe the information that is coming up instead of being taken over with it. You can imagine that if you wake up in the night with pain in your chest that a part of you might take over, given that you're having a pain in your chest. I just wanted to give that illustration of what it's like to start to have a relationship with your parts or with your internal system.

What I like to say when I'm teaching is what if we could help people love and accept all of who they are, which means not getting rid of any parts of yourself but learning to love and accept all of yourself, all of them, not just the ones that happen to be the good ones or the right ones. When we begin to lead from self, when we begin to have a relationship with ourselves, we also learn to love ourselves and that's a powerful, powerful goal of this model.

Finally, and Pam talked about this also, as we begin to change our relationships with ourselves internally, this begins to translate into the outer world. You can imagine if this man is having such a loving, compassionate relationship with himself internally when he has a pain in his chest, how that might translate to his partner. I think the last thing, which is not on this slide, that I want to say that is very powerful about this model and something that I remember in my Level 1 training when I got the concept is that what we're wanting to do is to help people understand that they can decrease the reactivity of their internal system and have a lot more choice in how they want to respond either to themselves or to others.

These are the goals of therapy and now, next, Pam is going to be talking to you more in depth about the nature of parts. Thanks so much.