

IFS & POLYVAGAL THEORY

Healing Through Compassionate Connection™

Alexia Rothman, PhD

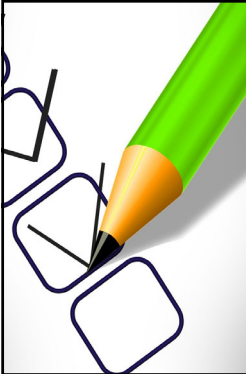
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Disclaimer

Materials that are included in this course may include interventions and modalities that are beyond the authorized practice of mental health professionals. As a licensed professional, you are responsible for reviewing the scope of practice, including activities that are defined in law as beyond the boundaries of practice in accordance with and in compliance with your profession’s standards.

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OBJECTIVES

1

How can understanding PVT help us implement IFS more safely and effectively?

2

Basic principles of IFS and PVT

3

Impact of therapist’s internal state on clinical work; Using this awareness to facilitate client regulation and healing.

4

IFS strategies to shift clients’ nervous systems towards regulation and healing

5

Helping clients foster attuned, trusting relationships with parts that live in and/or utilize adaptive survival states

6

Video Examples

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Internal
Family
Systems
Therapy

- Developed over 40 years ago
- **Non-pathologizing** model of the organization and operation of the psyche
- Empirically validated psychotherapy
- Can facilitate healing and transformative change



Richard C. Schwartz, Ph.D.
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Parts

- **Subpersonalities**
- Can understand them as tiny people inside you.

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Types of Parts

EXILES

- Parts that carry unresolved pain.
- Vulnerable
- Wounded

PROTECTORS

- Parts that manage our interactions with the world and defend against underlying pain.
- Managers: **PROACTIVE**
- Firefighters: **REACTIVE**

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Assumptions of the IFS Model

Multiplicity is the natural state of the mind

- Trauma does not create parts but can force them to take on extreme roles, burdens

Everyone has an undamaged Self

- Constraint-release model

No bad parts

- Can be wounded, burdened, in extreme roles, trapped in trauma time
- Can be unburdened, released from extreme roles

No part operates in isolation

- This is an internal system


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IFS & Polyvagal Theory

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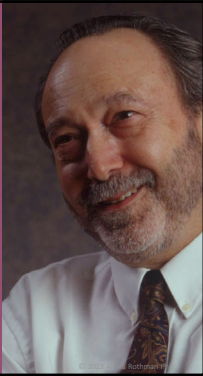
Polyvagal Theory

Stephen W. Porges, Ph.D.

- Developed in the 1990s
- Adapted for use in therapy by Deb Dana, LCSW


“Polyvagal Theory is the science of feeling safe enough to fall in love with life and take the risks of living.”

-Deb Dana



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What Really Brings Clients to Therapy?



SYMPTOMS	INTERPERSONAL RELATIONSHIPS	ADDICTION	OTHER
Depression	Conflict in personal/professional relationships	Drugs	Stress
Anxiety		Alcohol	Self-Esteem
Irritability/Anger	Difficulty forming/keeping healthy relationships	Relationship with food	Procrastination/Avoidance
Sleep Disturbance			Personal Hygiene
Attention/Concentration	Social Anxiety	Addictive Processes: gambling, internet, pornography, overexercising, overwork, overspending	Self-Care
Intrusive Thoughts	Boundaries		Change in life circumstances
Obsessions/Compulsions	Isolation/Loneliness		Grief/Loss
Nightmares/Flashbacks	Aggression		Career-Related Issues
Hallucinations/Delusions			

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Why consider the nervous system?

Dysregulation of the nervous system and associated suffering brings clients for treatment.

Can't think our way out of trauma/survival responses

PVT: How the ANS operates and can be reshaped.

IFS: Relational, experiential therapy for healing and transformation.

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Trauma

Dr. Stephen Porges

Significant individual differences in outcomes to traumatic experiences.

“...it is not trauma as an event that is the primary determinant of outcome.”

“...it is the re-tuning of the neural regulation of the autonomic nervous system to support threat reactions that is the primary determinant of outcome.”

It's not *what* happened.
It's how the nervous system was *impacted* by what happened.

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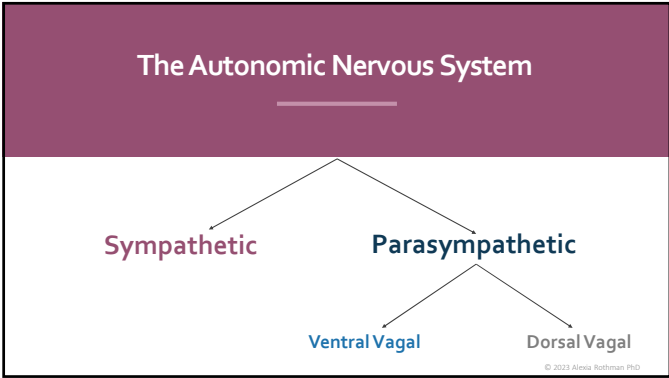
Polyvagal Theory

- Not a psychotherapy; can underlie any therapeutic modality
- Structure and operation of ANS
- Non-shaming, non-pathologizing
- Helps us design & implement safe, effective therapeutic interventions
- Hope and possibility
 - Can **reshape** nervous system towards flexibility and resilience
 - Don't have to remain stuck in survival responses

Internal Family Systems Therapy

- Empirically validated psychotherapeutic modality
- Organization and functioning of the psyche
- Non-shaming, non-pathologizing
- Compassionate, relational way to interact with internal systems
- Hope and possibility
 - Can **heal and unburden** wounded and traumatized parts
 - Bring/Restore Harmony and Balance to Internal system

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Parasympathetic Nervous System

Two Bi-Directional Pathways via the Vagus Nerve

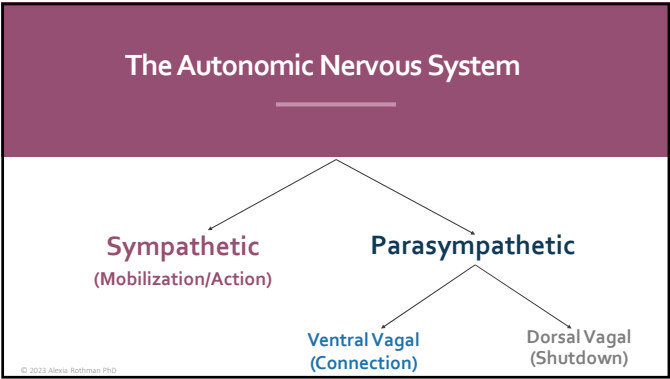
DORSAL VAGAL

- Travels from brainstem down, primarily receiving information from and regulating organs below the diaphragm, including the digestive system

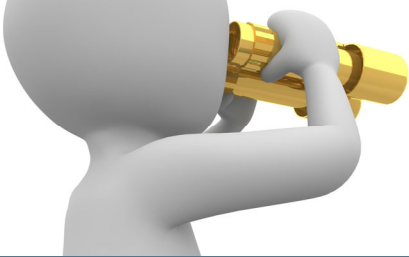
VENTRAL VAGAL

- Travels from brainstem up through nerves in the neck, throat, eyes, and ears, and down through lungs and heart (organs above diaphragm)

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Neuroception

- How the ANS takes in information
- Detection without awareness
- Constantly scanning – inside, outside, between

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HIERARCHY

Three Predictable Pathways of Response

VENTRAL	<ul style="list-style-type: none">• Feel safe and connected• Able to engage with life: self, others, the world, spirit• Can send and receive cues of safety• Perspective, possibility, hope• Associated with physical health and well-being
SYMPATHETIC Survival	<ul style="list-style-type: none">• Sense of impending danger• Hypervigilant/alarmed/uneasy• May misread/not notice signs of safety but more easily notice signs of danger• Disrupted connection from ourselves, others, world, spirit (me vs. you, us vs. them)
DORSAL Survival	<ul style="list-style-type: none">• Do not feel connected at all• Shut down, no energy, don't care• Hopeless• Feel unsafe and surrounded by unsafe people

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Sympathetic Survival State

(Mobilization/Action)

Release of adrenaline & cortisol

Chaotic Energy, Angry, Anxious

Hypervigilant for cues of danger

Can take action to fight or try to escape to safety

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Dorsal Vagal Survival State

(Immobilization)

Oldest pathway

Immobilization, collapse, shut down, numb, not present

Drained, hopeless, give up

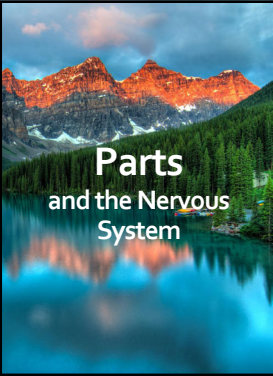
Extreme danger - feel trapped, can't escape, life threat

Takes us out of connection and awareness

More difficult to recover from than sympathetic

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1

Parts are *not* states

2

Parts can live in states

3

Parts can make strategic use of survival states

4

Parts can make strategic use of regulated states

5

Parts can be affected by and react to states

6

Parts “have their own nervous systems”

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Newest pathway

Unique to mammals

Supports being in safe engagement with others

Responds to cues of safety

Feel safe, connected, calm, social

Our Self-energy can facilitate client's returning to this state

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Self / Self-Energy

Emergent Quality of Ventral?

Qualities that emerge/become accessible when parts open space (8 C's) are also emergent qualities of VV activation.

- Curiosity, compassion
- Deb Dana: “We have a home in ventral.”
- IFS: “This is who I really am. This is my Self.”

IFS is a **constraint-release** model

- Self present/undamaged in everyone but may be obscured by energy and burdens of parts
- Help clients access Self through unblending and healing/unburdening
- PVT (Deb): “Ventral is where our nervous system longs to be. Our job is to uncover the pathways that take us back there.”

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Self-Energy	Ventral Vagal Activation
<ul style="list-style-type: none">• 8 C's: Curiosity, Compassion, Connectedness, Clarity, Courage, Calm, Creativity, Confidence• 5 P's: Presence, Patience, Persistence, Perspective, Playfulness• Openness/spaciousness in chest• Open-heartedness• Energy running down arms into hands• Sense of connection to all around you• Clear mind• Sense of ease in the body• Sense of being completely present	<ul style="list-style-type: none">• Curiosity, Compassion• Grounded in realism but aware of possibility and options• Can reach out for & offer support• Feel safe• Able to communicate effectively• Able to adapt more easily to changes (go with the flow)• Open for connection to Self, others, the world, and spirit

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	Polyvagal Theory	IFS Translation
Consistent, Reliable, Safe Co-Regulation	<ul style="list-style-type: none">• Effective co-regulation leads to effective self-regulation• Ample opportunities to exercise circuits of connection• Well-tuned vagal brake• Able to safely engage with others in a rewarding and regulating way• Able to engage with the world• Connection to spirit	<ul style="list-style-type: none">• Consistent co-regulation with Self-led others helps prevent parts from taking on burdens and being exiled• Protectors do not have to step into extreme roles, as the presence of Self (ours and that of co-regulating other) is available to the system.• Can connect with our parts, others, the world and spirit.

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	Polyvagal Theory	IFS Translation
Absent or Unpredictable Co-Regulation	<ul style="list-style-type: none">• More difficult to self-regulate• Missed opportunities to exercise circuits of connection• Poorly tuned vagal brake• Self-regulate for survival• Disrupted connection to self, others, the world, and spirit	<ul style="list-style-type: none">• Wounded parts more likely to take on burdens and be exiled• Protectors more likely to take on extreme roles.• Very difficult for protectors to trust Self, so they run our lives.• Disconnection from Self/parts, others, the world, and spirit.

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Presence of the Therapist	<p>“I’ve found that the most important variable in how quickly clients can access their Selves is the degree to which I’m Self-led. When I can be deeply present to my clients from the core of my being...clients respond as if the resonance of my Self were a tuning fork that awakens their own.”</p> <p>- Dick Schwartz</p>
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Presence of the Therapist	<p>“I have...learned that my relationship with clients is terribly important to our success... because my ability to be in Self helps their protective parts relax so their Selves can flow in.”</p> <p>-Dick Schwartz</p>
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Co-Regulation

Self begets Self

- Ask our parts for the space to allow us to access at least a “critical mass” of Self-energy
- Our regulated presence (our Self-energy) facilitates others accessing their own

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Co-Regulation in IFS Therapy

Consistent, co-regulating presence of therapist’s Self

Lending our Self-energy to client’s system to facilitate access to their own

Direct Access when needed

Exercising the Circuits of Connection


In the moment, helps make deep work safer and possible

Critical mass of Self allows us to be compassionately and effectively present WITH our parts

Long-term, helps shift client’s nervous system towards flexibility and resilience

Increases access to Self and ability to return to being Self-led when parts are activated


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IFS & PVT Integration Session

- 1 Cisgender, heterosexual, white male, mid-50’s, educated professional
- 2 Complete isolation during pandemic, no therapy for 2 years
- 3 Chronically stuck in either dorsal or sympathetic survival states
- 4 Between jobs, no money, nightly alcohol use high
- 5 Requested emergency session – overwhelm, hopelessness, passive suicidal ideation

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Video Segment 1

Direct Access


- Overwhelmed part
- Co-regulation with therapist

Initiating In-Sight

- Noticing Hulk
- Protector associated with Sympathetic survival state of “fight”

Direct Access

- Concerned part comparing Hulk to Arnie



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Internal Co-Regulation



Self-to-Part connection with protector or exile

Regulated Self can be with dysregulated part

Co-regulation with Self helps shift part from survival state

Exercises circuits of connection

Effective self-regulation skill

Opens opportunity for healing

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Benefits of Internal Co-Regulation

- 1 Don't have to rely on external people
- 2 Available all the time
- 3 Don't have to achieve complete regulation
- 4 Reinforces Self as natural leader of system and resource
- 5 Non-exiling form of self-regulation

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Video Segment 2
Internal Co-Regulation

Feel Toward

- Young parts terrified

Fleshing Out

- Doesn't care about anything, won't back down

Internal Co-Regulation

- Accessing compassion toward boys
- Connecting with boy – touch, compassionate energy
- Seeing part through eyes of Self
- Being there for part in way he needs - instinctive




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Critical Mass of Self

Anchor in Ventral

May have to start with therapist's Self
Can go to Sympathetic or Dorsal while anchored in Ventral
New experience: parts in extreme roles/states connected to Self
Makes even the deepest work safe and possible
Makes the work effective, rather than damaging or retraumatizing



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HOW ARE YOU FEELING
TOWARD THE [PART]?

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Video Segment 3



Getting Permission

- Checking with concerned parts
- Parts are whole beings
- Physiological shift beginning

Fleshing Out Part

- Understanding Hulk also has a preferred/regulated state (doctor)
- Seeing part through eyes of Self (and part calming)
- Adolescent protector

Internal Co-Regulation with Protector

- Sitting on park swing
- Physiological shift continues – releasing tension in body
- Exile positively impacted

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Video Segment 4

Self-to-Part Relationship with Protector

- Learning Hulk's fears and needs
- Protector needs Self to assume natural leadership role
- Protectors don't want to have to be extreme

Mapping Relevant Clusters of Parts

- Web of relationships target part is embedded in
- Make note of parts in cluster for future work
 - May be needed for part to truly release from role
- Gym Guy, Doctor Part, CFO, Aggressive part

Encourage Reconnection to Target Part

- "By tending to some other parts, you're really tending to me."




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Gym Guy

Doctor

CFO




Aggressive Part

Wall Street Guy

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WORK PROCEEDS MORE SMOOTHLY AND WITH LESS RESISTANCE IF YOU



IFS – Access at Least a Critical Mass of Self

- Prioritize Self-to-Part relationship
- Information/content less important than connection
- Make sure connection established in both directions
- Work unfolds more smoothly and with less resistance
- Circle back to this step whenever needed

PVT – Anchor in Ventral Before Visiting Survival States


- Stories emerge from states
- Enter process at state rather than fight against it
- Micromoments of regulation help survival relax
- Stories, feelings, behaviors begin to shift organically

Slower can be Faster

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Video Segment 5



Fleshing out Protector

- Hulk is a protector – WSG somehow related
- Seen through eyes of Hulk, WSG a “madman”
- Getting permission from Hulk to go to WSG


Internal Co-Regulation with Protector in Dorsal

- Wall Street Guy – frustrated, disillusioned, hopeless, expensive suit tattered, stained, moth-eaten, cobwebs
- Unblend parts reacting to him; check HFT
- Has been a powerhouse protector; now in dorsal despair
- Scares other parts to see him like this – blend and need differentiation from Self

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Video Segment 6



Internal Co-Regulation with Protector in Dorsal

- Much harder to come up out of dorsal than down out of sympathetic
- Parts tempted to fix/change/convince need to soften back
 - Self can effectively hold space, validate, extend compassion
- Attached to old dreams/aspirations, anger/drive


6th F: Fear of Protector

- If he lets go of the old dreams, other parts might settle and client will be unsafe. Also doesn't know how else to be.
- Role: Keeps system financially safe and socially respectable.

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Video Segment 6




Progress

- WSG was talking through Hulk - now has established Self-to-Part connection & willing to continue
- Circle back to other parts: Hulk calm and relaxed, exile doing well
- Physical symptoms completely gone
- Can move through world more safely (in a regulated state, not a place of threat/protection)

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The Vagal Brake

1

Ventral vagal circuit to the pacemaker of the heart – medulla (in brainstem) to sinoatrial node of heart

2

Speeds up and slows down heartrate

3

Allows access to more sympathetic energy

4

Not a survival response – still regulated by ventral, feel safe

5

Can respond rather than react – do what is needed in the moment


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The Vagal Brake

Becoming Active Operators of our Nervous Systems


Vagal brake may not work as efficiently if consistent co-regulation opportunities were not available in childhood.




Keeps us between sympathetic and ventral (regulated sympathetic)



Vagal Brake releases somewhat to allow in some sympathetic energy to meet the demands of the moment/task.



Vagal Brake engages, heart rate slows



Vagal Brake Disengages (Releases Completely)
HPA axis engaged – cortisol & adrenaline
Enter Sympathetic Survival State

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IFS

PERSONAL TRAINING FOR THE NERVOUS SYSTEM


Repeated Opportunities for Neural Exercise



- Increase access to Self-Energy through:
 - Unblending (Anchor in Ventral)
 - Befriending (Glimmer to Glow)
 - Healing of Exiles (Retrieving wounded from existing in survival states)
 - Helping protectors shift into preferred roles (Releasing protective parts from being in or using survival energy)
- Tone the Vagal Brake/Improving its Efficiency
 - Helps us access mobilizing energy when needed
 - Help us decrease sympathetic activation when not needed
- Makes it easier to find our way home (Self/Ventral)
- **Appropriate amount** of challenge for the nervous system

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IFS & PVT Integration Session

1

Using pure IFS techniques in a Polyvagal-Informed way

2

Befriending parts that strategically activate sympathetic and dorsal survival states for protection

3

Seamless integration method (no explicit psychoeducation about the nervous system)

4

Client has NO previous knowledge of Polyvagal Theory

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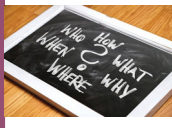
Internal Psychoeducation

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Three Essential Elements

Needed by nervous system in interactions


Deb Dana



CHOICE



CONTEXT





CONNECTION

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"Befriending is learning to *tune in and turn toward* autonomic state and story with curiosity and self-compassion." – Deb Dana


Befriending
Glimmer to Glow


- Extending curiosity/compassion to target part
- How is part responding?
- Establishing bi-directional connection
- Inviting part to share
- How is client reacting to part's sharing?
 - If more Self-energy → extend to part
 - Appreciation, gratitude, compassion
 - Honoring part for its intention and service (protector)
- Allowing part to take in presence of Self and not being alone anymore

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How Can PVT Help us Implement IFS More Safely and Effectively?

- 1 More safely → More effectively
- 2 Deeper understanding of why and how our Self-led presence facilitates healing
- 3 Deeper understanding of why we respect protectors
- 4 Pacing, Timing, Choice of Interventions
- 5 Appropriate level of challenge for nervous system; Repeatedly exercising and toning Vagal Brake

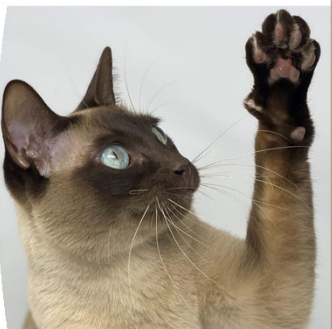
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