

# Utilizing the Transformation Model of Internal Family Systems in the Treatment of Risky Behaviors: Substance Use Disorder, Self-Injury, and Eating Disorders

Individual, Marriage & Family  
Counseling

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# Let's Drop In



# Internal Family Systems



# Assumptions



Self



Multiplicity-PARTS



Inner world is a system of interacting Parts



All Parts have positive intentions but can become burdened with extreme beliefs, emotions and behaviors

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# Self



# Self



Core of consciousness; seat of consciousness



Inborn quality of calm, compassion, clarity, confidence etc..



Always present though blocked by parts at times

# Managers

Proactive  
Daily functioning  
Prepare  
Learn  
Prevent exiles from being triggered and overwhelming



- Vigilant in trying to prevent pain from exiles being released
- Often young, stressed out Parts froze and stuck in time (Critic, Judge etc...)

# Firefighter

**S**

Reactive  
Balance manager energy  
Shift to relaxation  
Pleasure & soothing  
Distract



- Exile vulnerable parts once pain is released
- Extinguish emotional pain via extreme methods/behaviors (dissociation, alcohol, etc...)

# Exiles

Embody vulnerability  
Trusting  
Sensitive  
Carefree



- Parts that hold experiences of being abused, neglected, dismissed etc.. and have been exiled so as to not overwhelm the internal system with pain
- Often young and frozen in time

Balanced  
Unburdened  
System

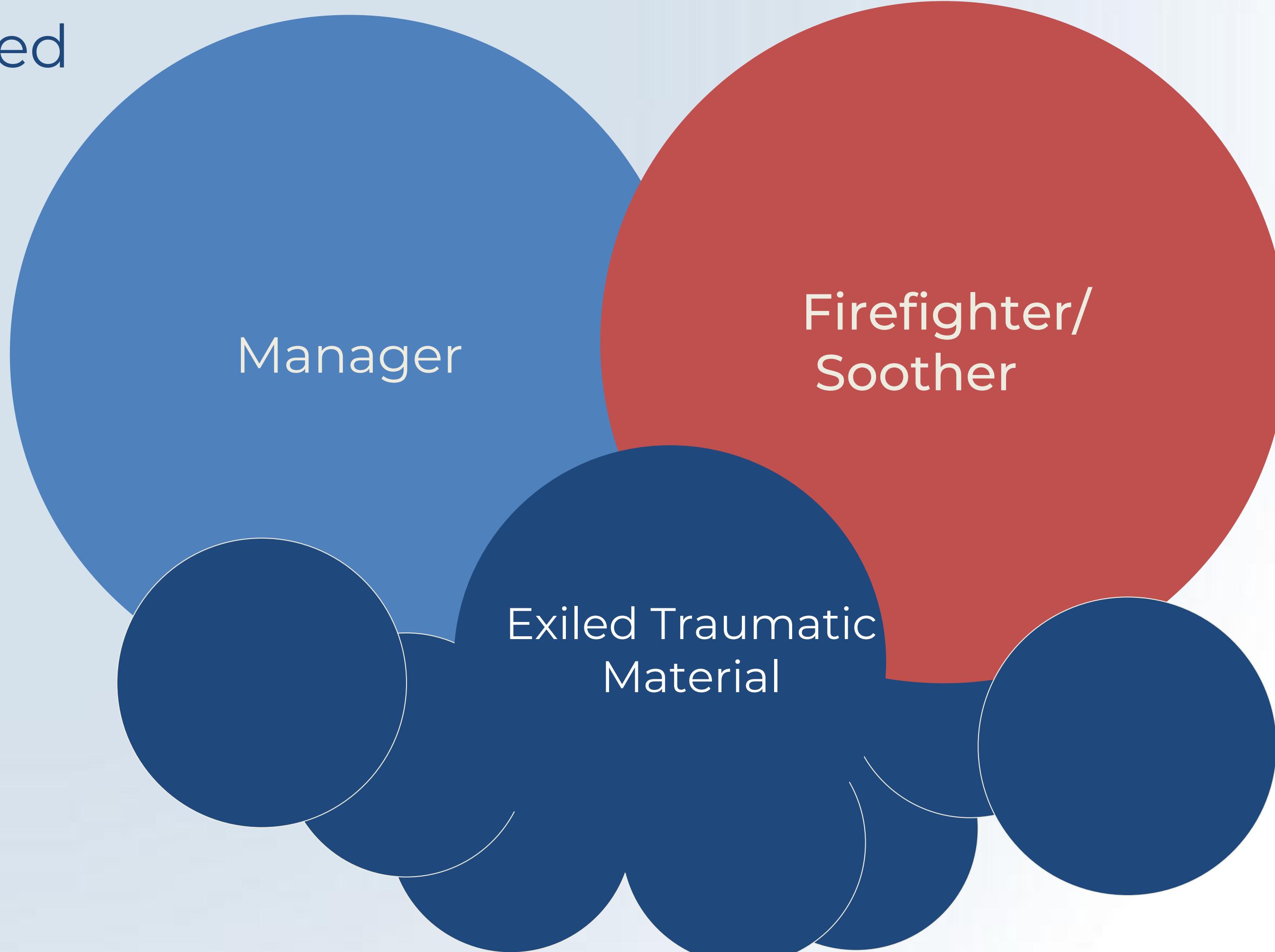


Burdened  
System

Manager

Firefighter/  
Soother

Exiled Traumatic  
Material



# Common Managers

**Critic**-Continual improvement, can become very aggressive and abusive

**Judge** – Externalize blame; use all types of ‘othering’ to help us feel acceptable, safe and included

**Perfectionist** – Cannot make mistakes, often afraid of disconnection

**Logical/Rational** – understand what to do; no feelings

**Intellectualizer** – prefer to think about the problem rather than feel

**Striver**- competitive, works hard, demanding of self

**People Pleasers/Caretakers** - job is to keep us in connection with others by focusing on others before ourselves

**Fixer**-Take personal responsibility for another’s problems

**Hypervigilant/Anxious/overthinking**-prevent negative surprises make sure we don’t get hurt or fail

# Firefighters/Soothers/Distractors

**Dissociating**-Suppress the negative feelings of exiles by checking us out, becoming cloudy, sleepy or numb.

**Mood altering substances**

**Sex**-using sex to distract, soothe inner emptiness

**Working**

**Social Media Scrolling**

**Purging**

**Binging**

**Compulsive exercising**

**Gambling**

**Pornography**

# Exiles

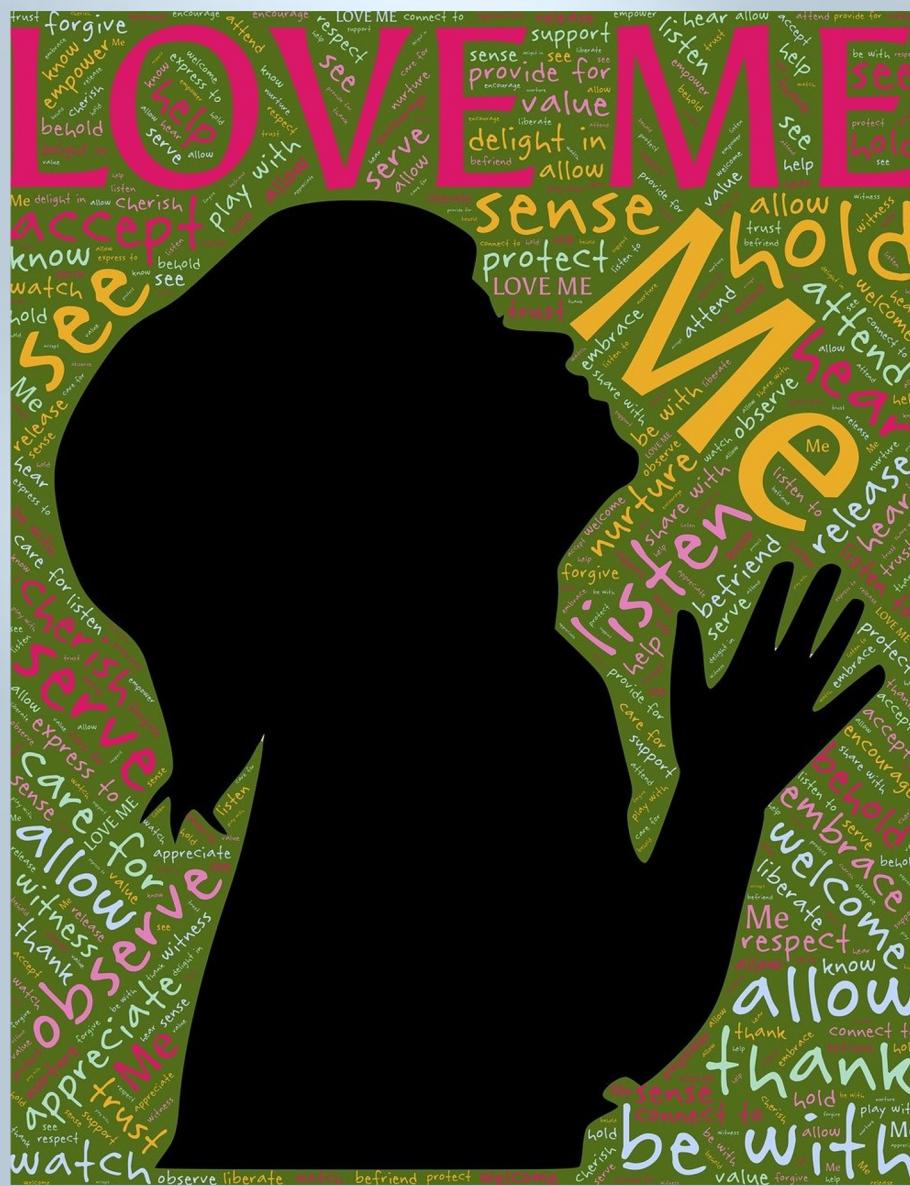
“I’m not safe”



“I can’t trust anyone”

“I’m worthless”

# “I’m trapped”

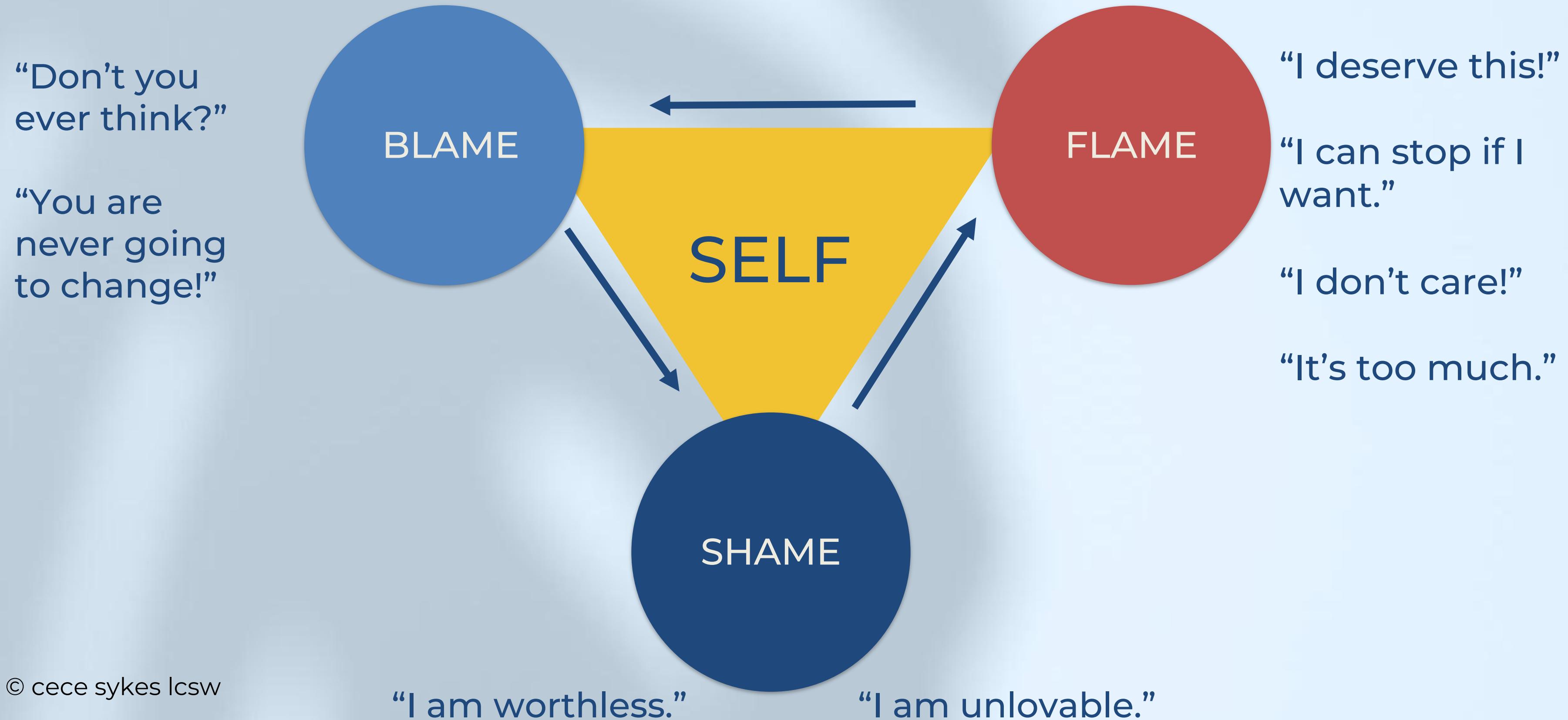


# “I’m alone”

## “I am powerless”

# “I’m unloveable”

# The Polarization Battlefield



Addictive Process:  
A chronic polarity between two sets of extreme parts: critical, controlling(M) and avoidant, soothing(FF/D); both try to protect exposure of buried (E) emotional pain.

(Cece Sykes '06/'16)



# Extreme Firefighters/Soothers/Distractors



Alcohol & Drugs

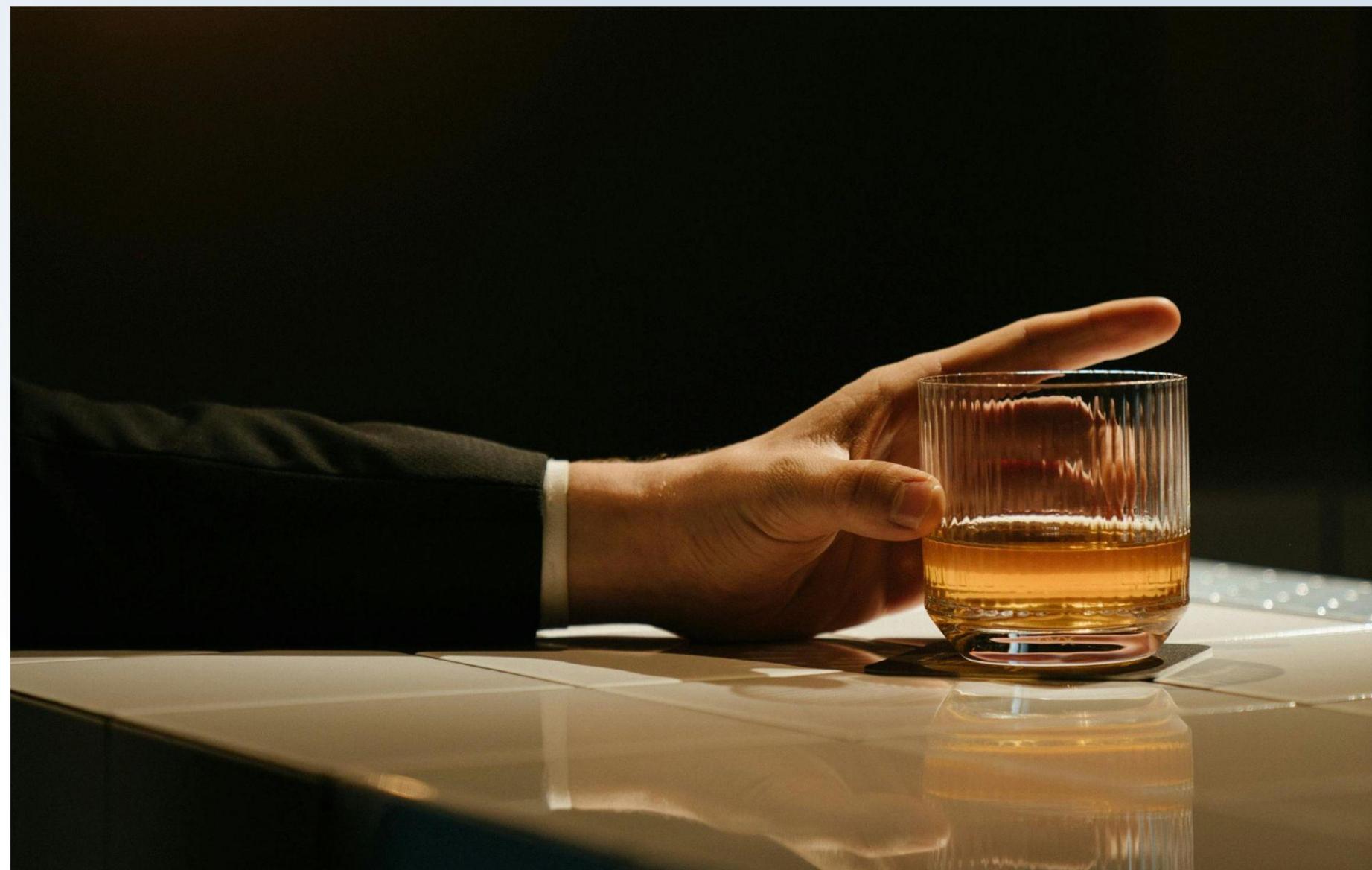


Disordered Eating and Eating Disorder



Suicidal

# Substance Using Firefighters

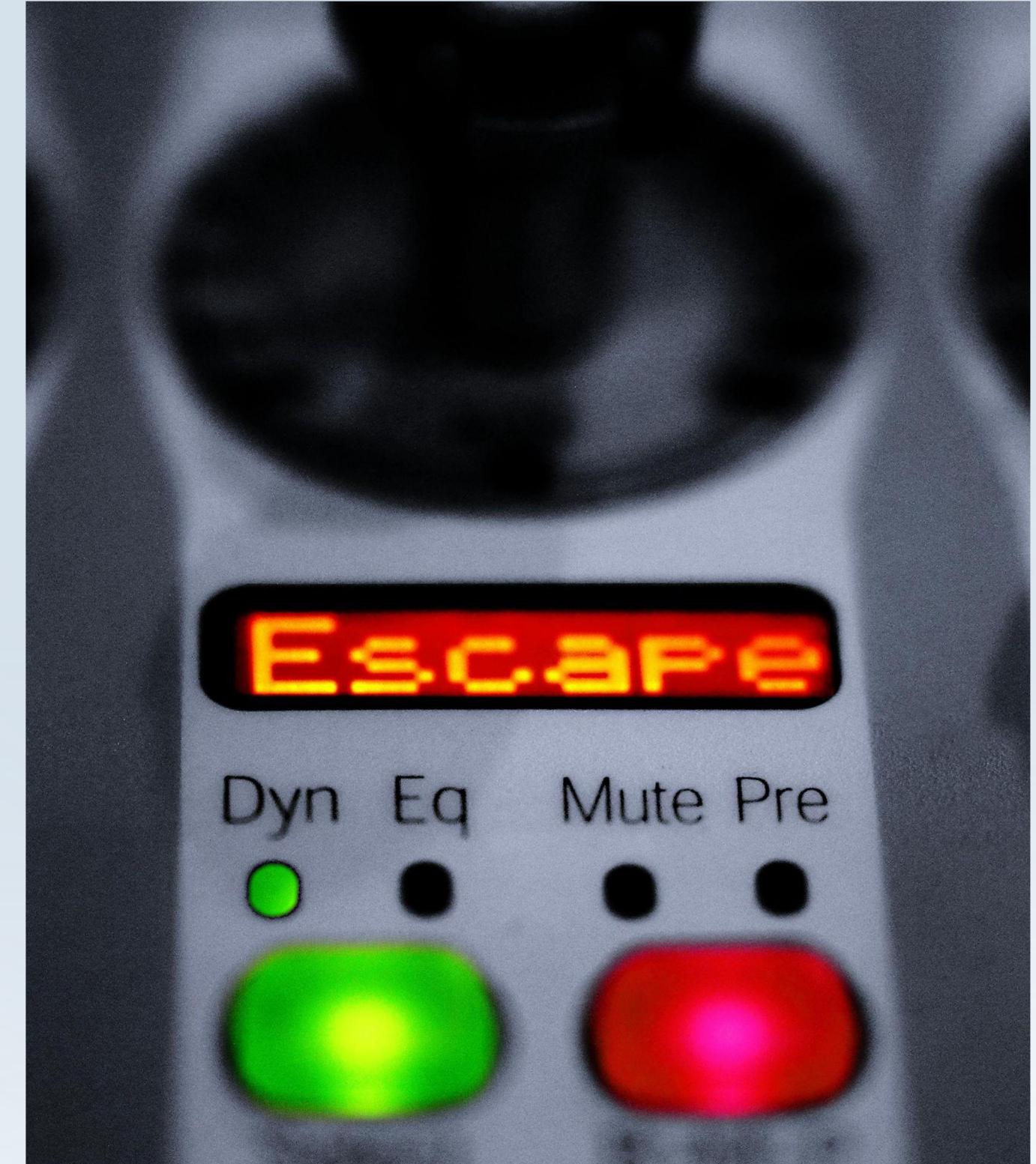


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# Disordered eating/eating disorder Firefighters



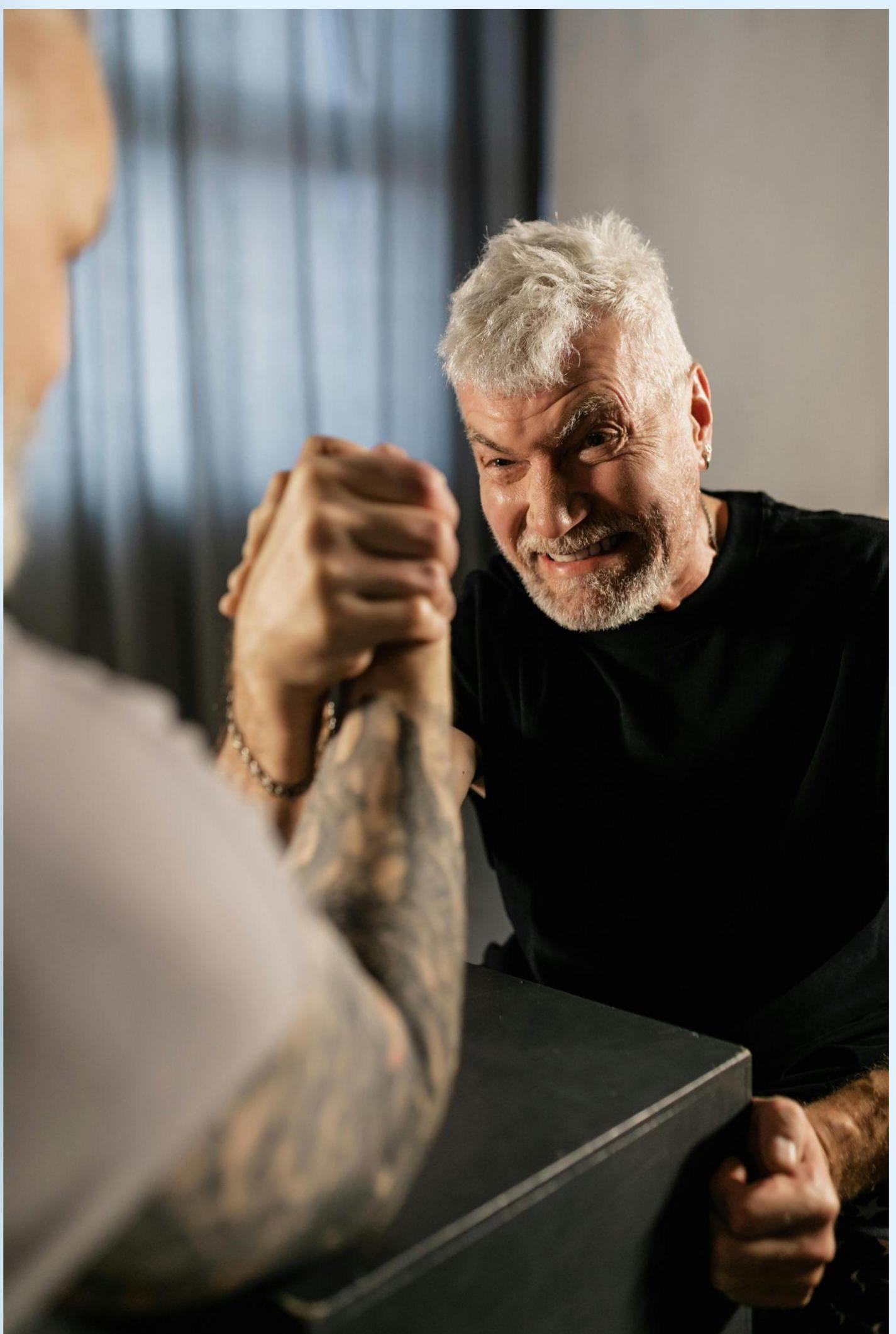
# Suicidal Firefighters



# Therapist Parts



What can this look like in treatment?





Decrease the power struggle with problematic behavior



Treating a SYSTEM not a symptom



Can have multiple types of compulsive soothing mechanisms/behaviors in the same group



Begin addressing trauma/pain while simultaneously addressing the behavior



Meet people where they are

*Addiction shouldn't be called "addiction". It should be called "ritualized compulsive comfort-seeking."* Dr. Daniel Sumrok; Center for Addiction Sciences at the University of TN College of Medicine; vets PTS (no D!)

*" Treat people with respect instead of blaming or shaming them. Listen intently to what they have to say. Integrate the healing traditions of the culture in which they live. Use prescription drugs, if necessary; Integrate adverse childhood experiences science: ACEs."*



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