IFS: A Non-Pathologizing Approach to Mental Illness
A Personal Journey

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Abstract

A client, once diagnosed as bipolar and psychotic, the author tells her story of the IFS model's impact on transforming her quality of life. Once a successful high school teacher, and now an independent trainer/ consultant, she has always pursued her interest in the study of psychology. Her natural passion to understand the choreography between ones inner world and outer reality, she is able to describe her own experience in IFS terms. Opening with a brief summary of the model as it relates to single and multiple systems, she uses herself as a case study to emphasize the most crucial aspect of why IFS can heal some severe mental health challenges. The model accurately and compassionately reframes pathological symptoms and labels of mental illness as "extreme parts," fully capable of healing and transformation.

Introduction

Based on the therapeutic model of Internal Family Systems (IFS), developed by Richard C. Schwartz, Ph.D., all individuals have at their core what is defined as the "Self:" The presence within, who can witness the comings and goings of thoughts and emotions with healthy detachment. The intrinsic qualities of Self include compassion, clarity, curiosity, confidence, courage, and a sense of calm, and can transform emotional wounds and negative thoughts from the inside out.

Emotional wounds and negative beliefs are fragmented "parts" of the Self, which break away from their core at the time of wounding. They are the internalized beliefs and behaviors of ones original external family, or surrogate family circumstance, and thus, the name "Internal Family Systems." Broken parts can, individually and collectively, block a person's ability to find and stay connected to his or her center or Self – thus rendering the internal system helplessly at the mercy of its fragmentation, and driven in thought and behavior by pain and misunderstanding. The goal of IFS work is to heal and realign the wounded parts with the Self, and thereby, come into an ever-increasing state of "Self Leadership."

Parts fall into two categories: 1) wounded victims who need protection, called Exiles, and 2) the Protectors of those exiles. There are two categories of Protectors: 1) Managers, who keep the exiles' pain suppressed by using overriding and compensating behaviors that "manage" and maintain control in the system, and 2) Firefighters, who distract the system's attention away from exiles' pain by using behaviors that are most often characterized as addictions. Both managers and firefighters assume their roles in what seem, at the time, in the individual's best interests towards survival, but continue at their jobs long after the system may need their protection.

Were parts measured for functionality, they might be calibrated on a continuum from healthy/harmonious and synchronized with Self, to severe emotional dysfunction, evidenced by extreme behavior, harmful to oneself and/or others. The average, emotionally healthy individual seeking personal equilibrium will discover a single internal system comprised of a Self, and a multiplicity of parts that reflect varying types and degrees of actual and/or perceived trauma. (FIG. 1)

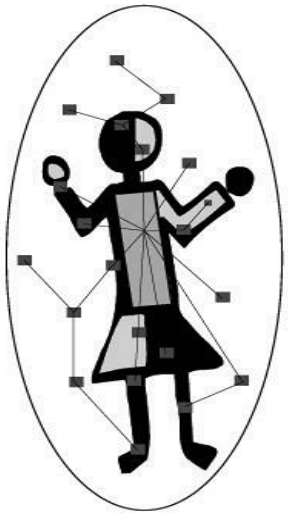

FIG. 1

[1] ***The author conducts an educational consulting practice, which serves individuals and organizations. She incorporates the IFS model into her workshops and one-on-one meetings. She has presented her history and learning to groups of mental health professionals, and meets with families and individuals who receive support from her experience.***

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When trauma is experienced with severe intensity, the resulting parts may not only fragment from the main internal system, but may split further off into one or more separate, additional systems of protection; i.e., a multiplicity of systems **(FIG. 2).** The mental health field identifies the symptoms of these individuals in categories such as bi-polar, psychotic, or schizophrenic – based on observable speech and behavior patterns that diverge from what society generally agrees to as "normal." Seen from the viewpoint of the IFS model, these multiple systems are comprised of the same exiles, managers and firefighters found in an average emotionally healthy single individual/system. Therefore, these parts are much less pathological than simply, "extreme," with the true potential for healing and a return to Self. The individuals with extreme systems may or may not require 1) institutionalization for protection from their own activated extreme parts, or 2) medication to sustain sufficient Self energy for a continuity of healing. Medication and/or institutionalization can provide support, but need not necessarily be part of a lifetime treatment plan that holds no vision for transformation. What ***is*** required is the presence of a professional who is grounded in his/her own Self-energy and, therefore, emptied of a judgment of doom for the labeled client. In its place comes a patient compassion that holds the space for the client's wholeness. Although a longer healing process may ensue, given the multiplicity of systems and parts, recovery can be accomplished, over time, for many individuals who might not otherwise be aware of, nor offered the hope and possibility of transforming their life experience.

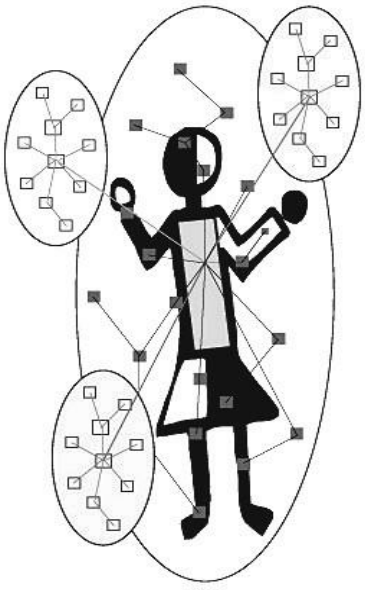

FIG. 2

Individuals with multiple systems may or may not be aware of their additional and separate worlds, or may cycle in and out of such awareness. Some exhibit the behaviors of their so-called "psychotic worlds" while others assume behavior that "looks normal" by using managers or managerial systems that can mimic the qualities of Self. Such "Self-like" parts/systems, 1) protect wounded parts from painful exposure and 2) create the appearance of external normalcy, so the individual can function in the outer world, even as s/he navigates the cacophony of locked up, denied, and suppressed thoughts, feelings, messages or voices within.

An individual can heal multiple systems when s/he gains enough Self-perspective to admit the need for help. At that point, one wounded part at a time, i.e., one emotion or thought at a time, s/he can work to return to Self Leadership. The IFS process not only can help accomplish the healing itself, but can also bring the individual to the first step of gaining a minimal sense of Self, necessary to begin healing.

A Personal Journey

What follows is a brief review of my own process, offered as a case study: **(FIG. 3)**

The trauma of childhood sexual abuse, including an unreported rape at the age of four, eventually resulted in an extreme split from my primary internal system. Imbued with the unconscious belief that I was "very bad," the resulting wounded "exile" fragmented itself to a new and separate world (System 1), building a fortress of protective managers and firefighters to keep the pain and extreme shame hidden for years. Compounded by emotional and verbal abuse, a family emphasis on the love of food and the need to be thin, plus a gridlock of additional, confusing, mixed messages in the early environment, the real world became an increasingly dangerous place to live.

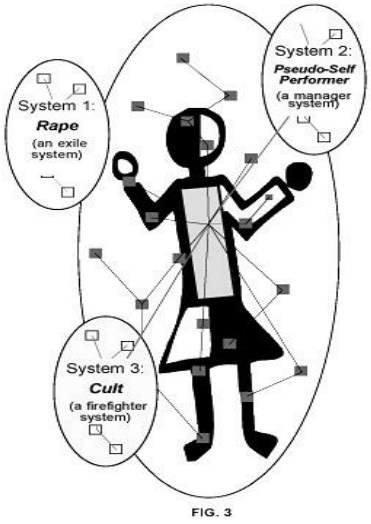

FIG. 3

Taught to show others a perfect family image, which could never reveal the truth of what happened behind closed doors, a second world of skillful managers developed to cover-up and compensate for my "disappearance." Speaking and behaving in the exact right ways to please all possible caretakers, no one could detect the performance in constant progress. I was the consummate actor, able to turn away from my own real thoughts, needs, concerns and confusions, in order to portray the perfect image of a Self and family. The actor played the Self so well, receiving the much needed approval and breath giving assurance that I deserved to be alive, that all were fooled – parents, brother, teachers, friends, and most of all, myself. This Self-like system (System 2) knew how to make me look good and say the right thing at the right time, while working to manage the suffering internal effects of the sexual, verbal and emotional abuse.

As an adult, repeating the family pattern of staying busy, work became the perfect refuge to perform and pursue approval. I obsessed on whatever I did, losing all reasonable boundaries around time, money, sleep, diet (anorexia and binging), and exercise (used as an addiction rather than as a way towards health). Though "successful," as in knowledgeable, articulate, impactful, and respected by my peers, my career was a hiding place, an addiction in itself. Despite immense productivity and accolades, I experienced countless cycles of financial success and failure, of energetic highs and crashes, no real joy except through mania, and literally no satisfaction of long-term self-sufficiency.

Vulnerable and fully susceptible to outside influences that supported my inward retreat and outward charade, I became immersed in a cult-like organization, where the core commitment to inner contentment was lost in the young group's misguided behaviors. The externalized, misinterpreted principles perfectly affirmed my already distorted beliefs in System 1: *"I don't belong in this world and there is a way out. I can finally transcend it, or die."* And so, System 3 was born to enact a new ethereal purpose, guaranteeing a systemic distraction from addressing the original trauma of System 1. In this third world of firefighters, I was freed from the chains of earthly bondage, without need for material concerns, giving away all money earned, and learning that my only relationship needed to be with God. Family was only a vehicle to provide me with the temple of a body, meant only for the purpose of serving the Lord. Authentic relationships could never succeed, and a growing isolation that included celibacy, the blind practice of rituals, and a retreat from most worldly activities except tunnel-vision work, supported my unhealthy dedication to a higher power. It was only a matter of time before the systemic denial of my physicality and emotionality would erupt in a psychotic expression of unrestrained firefighters, and a mutiny of repressed managers and crushed exiles.

System 3 ran amok in its pursuit of impossible, transcendent perfection. Eventually captured and straight-jacketed by healthcare workers hired by my parents (which admittedly saved me from one of my many hallucinatory misadventures), I was committed to an inpatient psychiatric ward, medicated and administered a program of electric shock therapy (ECT). Stuck in an inner sea of molasses, I was unaware of my name and history (accomplishing the goal of no-identity or ego), reduced to a concentration camp skeleton of anorexia (victorious over the enemy called food), and jogging in place around the clock (proving my strength and stamina to the demons inside who said I should die). A psychiatrist visited me in the ward for 1/2 hour once a week. After a few ECT treatments, I was able to join the rest of the patients in Tuesday swimming field trips, and Thursday bowling. Otherwise, we met on a daily basis, ages 18 – 80's, where everyone's parts jabbered simultaneously, without any feeling of direction or hope.

When I overheard the doctor order more ECTs "for good measure," I determined to escape from an institutional lunacy that I perceived as far worse than the lunacy in my own head. In retrospect, I believe my Self and my Spirit partnered to save my life, because as hard as the next many years would be, I felt sure that I would have otherwise been forever lost in an external system of misguided care, however sincere. During one of my permitted leaves to spend time with my parents, I secretly arranged to never return to that building, receiving help from friends who were unsuspecting of their roles in my escape. Rejecting all medication, I cleverly went to a warm southern state, briefly lived in the streets, and befriended angel after angel who took me into their homes and hearts, until over the next 20 years, my managerial system had created a new and more acceptable charade of functional, survival behaviors.

Eventually back living and working on my own, I had successfully climbed out of the physical dungeon of the hospital and, literally, into the sun. I believe that ECT sufficiently defused the mis-wired, disconnected parts from their extreme stances. Although clearly not relieved of their burdens, the parts did recede underground to a less violent dungeon that secretly managed the voices and hallucinations from Systems 2 and 3. In the last decade, I healthfully chose to go back on medication, having matured enough to recognize and admit that if a drug could help me experience more Self and less inner vigilance, I would be foolish not to benefit. After some trial and error, Risperdal lowered

the volume of inner noise and increased my sense of place in the world.

Those years prepared me for a life-changing event in January, 2002. The movie, *"A Beautiful Mind,"* so accurately held up the mirror of my agonized inner reality, that I had no choice but to acknowledge my need to emerge. The reflection of John Nash's struggle and the illustrated truth of his secret systems crystallized my determination to finally expose my own – but it was my choice this time. I experienced an uncontrollable meltdown in the theater, grateful for so few patrons at a weekday matinee, and for my mom and best friend there to support each side of my shaking body. Terrified beyond description, yet simultaneously thrilled beyond any joy I had known, I knew the gig was up and that everything would change forever. In an instant, I understood that all previous and plentiful therapy had been intellectual education for the managers, and though I would come to appreciate them for having kept me alive, I could see that with all my hard work, I had yet to know genuine healing. Healing meant integration of the separate systems back into the "real world' and into my Self. I could never be satisfied simply keeping the voices at bay, as did John Nash, in my opinion. Instead, it meant full recovery, which I trusted was possible from a previous eight-month experience with the IFS model.

Nothing was ever as terrorizing as that first moment of recognition, not even when, one by one, I faced the scary managers and firefighters who had masqueraded as voices, urging me to take my life, or as hallucinations that represented abusers, real and internalized. The IFS process moved me *into and through* my suffering, an experience ultimately far less painful than resisting the release of burdens. Talk therapy's analysis and intellectual understanding alone, though certainly helpful at times, often ended up supporting the tricky ploy of parts who, though yearning for authentic change, were habituated to avoid it. So many broken parts had worked inordinately hard throughout my life to protect the numerous traumatized little girls, who in the safety of Dr. Schwartz's Self energy and my own, emerged for the first time in 50 years.

Paradoxically, I am now grateful for the very behaviors and beliefs that I had once judged, hated, and hidden from others and myself. In pure innocence, their misguided efforts were only meant to protect me, and in the case of the managerial, self-like system, had kept me alive and functional. Left to the exiles alone, suicide would have been successful. Finding compassion and appreciation for my own parts, modeled by a professional who was much more a teacher and mentor than someone otherwise called a therapist, had produced a momentum of healing that continued between sessions and has become a way of being. I remember my very first appointment with Dr. Schwartz. I leaned forward in my chair, glaring at him intensely, and said, "If you can't tell me that what you're about to do or teach, won't internalize in me to the degree that I won't have to depend on coming to you for the rest of my life, then let's not even get started." Without moving a muscle, other than softly closing his eyes as he nodded once, he disarmed that first exposed part in me, and I am here to share this story.

Within one year, I had disassembled and realigned countless fragmented parts in Systems 1, 2 and 3 **(FIG. 4).** This required persistence and is ongoing, but as of this writing, I am living in *this* world. I am addressing the issues of someone who lives here on earth and in a body. They are the issues most developmentally delayed (intimacy, finances, nutrition) by the demands of the other systems. The painful addiction to work is being transformed into a more pleasurable and productive means of building self-sufficiency. That process is much slower than parts of me would like, but I am steady and methodical, so as not to fall back into old, harmful behaviors that may look good on the outside, but are not the real thing. I called a meeting of my remaining immediate family, our truth telling facilitated by Dr. Schwartz. We gratefully chose to try and unite, rather than separate forever. I have received both emotional and financial support from the very individuals who were once real and perceived abusers.

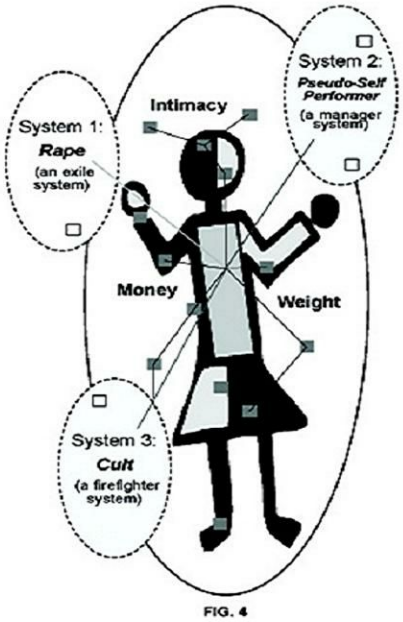

FIG. 4

I am in awe of the psyche, and of the spirit and genius of all who are willing to face their demons and do the real inner work to transform them back into the love that is our birthright. I am in gratitude to the healers who are committed to their own growth *first*, because only then can they sit in the patience and compassion needed to

witness the rest of us heal ourselves. I am humbled by my own spirit, who kept choosing to see and to live, when only struggle, pain, and confusion seemed the substance of life.

I ask the mental health community – professionals, families and friends alike – to recognize that your ability to heal others or simply care about them, especially those with multiple systems, is only as great as your willingness to explore your own inner systems. Please don't lock us away, drug us out of focus, judge our behavior, or write us off. Do what you must for our safety, including locks and medication, but please don't begin to imagine it as a cure. Our cure, and it exists, will come from our own courage to heal, and because you are also brave enough to find your authenticity and provide the confident energy we need to have around us. You will weather our storms, our weirdness, our pain, our setbacks, and our growth, because you are weathering yours. You will appreciate our worth, our vision, our brilliance, and our passion because you are on intimate terms with your own. You may see yourself in us, because we are you, often simply an extreme of the very same experiences and fears within you. We may also reflect who you are in our will to survive and thrive, and know joy and love. And so, we have much to teach one another.

After two years off from professional work, the author reopened her educational consulting practice, which serves individuals and organizations aligned with her mission to "synchronize who you are with what you do." She is an instructor at the University of Chicago, teaching a program she developed called "Aligning Life and Livelihood," and incorporates the IFS model into her classes, workshops, and private client sessions, having completed the IFS Basic Training, and become a Program Assistant. She has presented her history and learning to groups of mental health professionals, and meets with families and individuals who receive support from her experience. Individual therapists bring her into sessions to help infuse hope in those clients who are where she has already journeyed. She enjoys her work with a far greater balance of leisure and social activities, and appropriately retreats to her full-time and much loved country home, an hour outside of Chicago. She has been off of all medication since June of 2003.