parts/ego state work in EMDR practice

...from essentials to advanced

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goals of the day

- Workshop parameters and acknowledgments
- Review theories of dissociation
- Traditions of parts/ego states
- Indicators of dissociated states
- Contacting parts: conference room
- Essential skills: RUG-C
- The Blame Game
- Introjects - the “negative, scary” ones
- Parts and attachment repair
- EMDR (trauma processing) and parts work
limits of workshop and acknowledgments
Dissociative Continuum - and our focus

Spacing Out

Ego States

DID DDNOS

(Watkins, H. & Watkins, J., 1997)
“know thyself!”

socrates
t.s. Eliot

“We shall not cease from exploration, and the end of our exploring will be to arrive where we started and know the place for the first time.”
The Self

- More than the sum of parts arising from More experiences over time
- Becomes known in relationship/contact
- A flow
- Danger: a part becomes the whole
- Origin of the “large Self”: a psychospiritual concept
“Self” - an analogous concept. Whether it is an internal integration/collaboration and/or a transpersonal source, it *always was* (at least in potentia), it has been dismembered and will be remembered with good treatment.
Practicum: source memory

- First establish parasympathetic breathing

- Then the image/sense of anything that makes your client feel good: person, place, pet, activity, spiritual being
pick a negative pattern of behavior or difficult relationship

Note how you experience yourself in these situations.
choose source memory using Floatback or direct memory
ego states or
dissociated “parts”
“Do I contradict myself?
Very well then, I contradict myself.
(I am large; I contain multitudes)"

Walt Whitman
“[A complex]…has the tendency to form a little personality of itself. It has sort of a body, a certain amount of its own physiology….in short, it behaves like a partial personality.”

Carl Jung
History of multiplicity

- Feeding your Demons: Tsultrim Allione
- Carl Jung - archetypes and complexes
- Psychosynthesis - Assagioli (sub-personalities)
- Gestalt Polarity work: Perls, et al (empty chairs)
- Inner child/child within/inner critic
- Ego State Therapy: Watkins and Watkins
- Internal Family Systems: Richard Schwartz
- EMDR and ego state integration: Paulsen, Forgash, Twombley
- Structural Dissociation: Van der Hart, Nijenhuis, & Steele
Feeding demons

(Allione, T., 2008)

Tibetan traditions: Shamanism and Buddhism. 11th Century - Machig Lapdron.

“Approach that which you find repulsive!” Making the unconscious conscious.

Attachment to hopes and fears.

Two steps: bring demon into consciousness by visualizing it and feeding it, surrendering to it whatever it wants.
Psychosynthesis

- Roberto Assagioli - 1888-1974 (Assagioli, R., 1965)
- Studied the person as a personality and a soul
- Human growth = ego development + peak experience (creativity, insight, unitive experiences)
- Subpersonalities: some emulating higher qualities and some resisting integration
- Recognition, acceptance, co-ordination, integration and synthesis
Gestalt


- Tenets: experiential present moment & self-knowledge through relationship to the other

- Focus on present process rather than content

- Polarity work - (Polster, E. & Polster, M., 1973)

- Empty chair technique - addressing aspects of self

- Awareness - the Gestalt meditation

- Purpose: collaboration, integration
Inner child/ child within

- Carl Jung - the Divine Child archetype (Jung, C.G., 1976)
- Eric Berne - Transactional Analysis (Berne, E., 1996)
- John Bradshaw - the wounded inner child (Bradshaw, J., 1990)
- Purpose: to bring the wounded child to conscious contact, out of the shadows
Dissociative Continuum

Spacing Out

Ego States

DID DDNOS

(Watkins, J. & Watkins, H., 1997)
“Ego States” (Federn, P., 1952) have their own history.

The states in the union - normative flow

Shift happens, then...the part can take over the whole (moving to the right of the continuum)

Forgetting who you really BE - lost identity. Lost Self.

Self? Hard to define, but you know when it’s not there. Avoids pain, creates suffering
Internal family systems
(Schwartz, R., 1995)

The Self - curious, compassionate, caring

- Exiles - carry the dissociated pain from trauma and other parts

- Managers - cope with emotions; functioning

- Firefighters - emergency preservation of dissociative barriers

- Emphasis on function and the systemic context - relationships among parts
Managers

Self

Exiles

Firefighters
Structural Dissociation

- (van der Hart, O., Nijenhuis, E., Steele, K., 2006) *The Haunted Self*

- Self: extended synthesis of mental and behavioral actions over time (binding and differentiating over time and situations). Dissociation divides this.

- Primary dissociation: ANP separated from EP (PTSD)

- Secondary dissociation: EPs (defensive action system) split (DDNOS)

- Tertiary dissociation: ANP splits (DID)
Primary dissociation

ANP

EP
SECONDARY DISSOCIATION
TERTIARY DISSOCIATION
EMDR and Dissociation

(Shapiro, F., 2001 - p. 103)
“...alter personalities are conceptualized as neuronetwork configurations that serve as memory compartments.”
EMDR and dissociation

- M. Copely & Carol Forgash (2008)
- Sandra Paulsen (1995; 2009; 2014)
- Joanne Twombly (1995)
- Jim Knipe (2015)
- Andrew Seubert (2009)
- Marilyn Luber (2010)
Trauma and Dissociation

- New definition of “trauma”
- The “wall”, pain cannot be digested
- A “part” is born - state of consciousness, which can become frozen, creating a part-ial lens.
- Purpose: protection against pain and survival
- Painful material in isolated neural networks
what lies beneath

In the face of trauma, protective avoidance is the need and dissociative strategies are the mechanisms of achieving that protection

- Ego states as dissociative strategies

- A part (apart from the flow of consciousness) or state of consciousness - especially when there is an obvious and entrenched mind/body/emotion split.

- The ego state both contains and protects against the dissociated pain. Example: “7” - hides shame with ED
Ego States

Adult CSS

What now?
Common elements

- Repeated quality - stuck, intractable
- Responding without conscious choice - knee jerk
- Internal civil war - “I know one thing, but feel another”
- Developmentally delayed - age differential. Frozen in time.
-Disconnected from pain - tolerating intolerable. Numbing feelings. Emotions buried, but buried alive.
- Shame base: Hiding from it and protecting against it
common elements - 2

- Separatistic quality - acting outside of higher good of the whole
- Trauma-informed aspect: disproportionate reacting in present due to past unhealed wound/deficit
our purpose

To *interact* with the *experienced* part, rather than thinking and/or talking about it. Parts *become known* to client and each other. Client becomes known to the part(s). *NO JUDGMENT!* Establish common goals.
Presence of parts

Caveat - avoid comPARTmentalizing

- Emotional signals: stuck, looping, avoidance, numbing, “over” reacting

- Cognitive: thinking patterns indicative of a younger state of development. E.G., illogical, black/white, generalized

- Somatic: body disturbances (pain, tension, body temperature changes, numbness...)

- Behaviors: repeated, consistent, bionegative, avoidant, aggressive, passive/aggressive
adult self and parts of self

- Adult consciousness and parts need to experience separation and connectedness.

- Confluence (enmeshment) of adult consciousness and ego states leads to part taking over the whole.

- Ignoring parts (too much separation) can lead to deadness and/or rebellion.
Introducing parts work

- Take lead from client’s behaviors, statements, feelings - “I notice.....”
- Highlight the noticeable splits, blocks, etc.
- Emphasize how we often speak of “parts”
- Normalize dissociation in general (continuum)
- Ask: would you be interested in exploring....?
ego state basics: RUG-C

- To recognize and dialogue with “parts”

- To discover the purpose, desires and common pain of each part - becoming known. Understanding leads to compassion. Age of genesis? Orientation?

- To express gratitude and create common goals: new job descriptions. Avoid making ES the enemy. Therapeutic relationship needs to become more important.

- To create collaboration among parts that will move client towards desired goals, including trauma resolution.
recognize/invite

- You can’t change what you don’t know
- What you ignore, avoid, fight or cave into will eventually control you.
- Shadow material becomes primitive
- How? Spontaneous contact with parts.”I’d like to...
- How? G.A. Fraser’s “Dissociative Table” (Fraser, G., 1991)
- Conference room
video

[conference room]
cases - presence of parts

“I would like to speak with the part that…..”
“How old do you feel when…?”

- Jeanette
- Lynette
- Connie
- Maryellen
- Cathy
jeanette

A bright woman, mid-forties, eating disorder history from the age of 7.
“I want you to know something about me... If I ever feel happy, that will make me fat!”
Lynette

“I couldn’t stay married to Jim. He was absent and abusive. But my father always said to tough it out and be of the same mind as Jesus. I had to leave, but I just don’t feel pure white anymore. It’s like I’ve done something terribly wrong in leaving the marriage.”
“I think I’m coming apart. I just can’t fix the important people in my life. Not my son’s panic attacks, not my father’s death. I always used to be able to do this, even as a kid when I told my grandfather to stop being mean to my grandma.”
“I don’t know why I’m so upset. Amelia is leaving again for Europe, and I was severely depressed the last time she left. It lasted almost a year. And yesterday we moved my horse, Tawney, to a new home. It’s a better place, but I’m just so sad...and guilty.”

As a child, cl’s mother never stood up for her when her father beat her. As a child, she always wondered, “Mom, where did you go?”
“My father used to beat me terribly. Then I always wind up with guys who treat me like I’m a piece of dirt. Mark is different because of his Asperger’s, but somehow he’s like the others. Like he checks out, as if I don’t matter. Then I get that old tight feeling in my chest...and I just want to cry instead of maybe getting pissed off!”
conference room
Group practice using floatback memory

[CAUTIONS AND SELF-CARE]
to name or not to name

- Do parts need names?
- Least intrusive or leading: name by age - “7”, “13”, etc
- Name by other characteristics: sad, angry....
- If a name is offered...
- Follow what is given.
understanding: why parts?

- Everybody’s got a story! Easier to tolerate “partially”

- Parts have intentional existences - purpose

- Strategy is to tolerate the intolerable by avoiding, numbing, aggressing, withdrawing. In severe dissociation, to titrate the pain.

- Negative/aggressive parts generally have protection and survival as their purpose.
understanding
VIDEO
Talking to or through

Important to emphasize the relationship between client and part by speaking through the cl. However.....

There are times when directly contacting the part (assuming the part knows not only who the client is, but also who you, the therapist, are) expedites the process.

And there are times when the client is not willing or able to speak to the part or vice-versa. E.G., if the client hates, is afraid or is ashamed of the part... or the part feels the client’s hate. Then therapist as relationship coach is called for.
“R” Recognize and invite the part into the conference/meeting space

“U” Understanding. In asking the part various questions, have the client relate to you the part’s answers. For example, inquire as to what the purpose of the part is. The client asks this of the part either silently or aloud and relays the response aloud to you.

“G” Express sincere gratitude for what it has done to survive and/or protect. Note the positive qualities that were required to do its “job”. Point out that strategies that worked in the past are now working against client goals.

“G” Ask if the part is tired of what it has been doing. Scared? Or lonely? Or hopeless? Point out that the disturbance, pain, fear, sadness are still there. Ask if the part is interested in a new approach, job description or goal, one that would not be so wearisome, etc. One that would heal, rather than hide.

“C” Explore ways of utilizing positive qualities/resources that will serve that part’s stated goals. Focus is now on collaboration. Suggest healing the effects of painful experiences.
tips: goals and collaboration

- Educate re: painful life events and how they impact
- Using language appropriate to developmental level of part
- Explore what hasn’t worked and whether there is willingness to change game plan and job descriptions.
- What might we work on first? What do you need? (keep phase model in mind - prep, processing, etc.).
- Introduce the possibility of processing painful events
goals and collaboration video
Cases: new “job description”

- Samantha
- Theresa
- Madeleine
- George
- Patrick
Cl., 46, married, presents with extreme disconnect from her FOO, yet wants to be included. She has learned not to trust, never to be emotionally vulnerable, to stay in hiding. Loneliness is strong, but fear of being hurt again is stronger.

Want?

Gets in the way (ego state)?
Part & Purpose (What would happen if you stopped doing...?)
New Job Description (Would you be interested in....?)
Theresa presents with recurring and debilitating depression. Her goal is to feel better about herself. She is 41, married, 2 children. 7 times in day tx program for eating disorder, always caused by her depression. Can’t set boundaries with narcissistic mother, nor at work for fear of negative reactions which trigger “failure” response. Instead she lapses into depressive and chronic anger, pushing others away. Growing up, cl. was never depressed around her grandmother (nurturing).

Want?
Gets in the way (ego state)?
Part & Purpose (What would happen...?)
New Job Description (Would you be interested in...?)
Cl. is 69, unhappy marriage, three grown children. Wants to be able to stay with an eating program due to obese condition, but is not able to. Weight loss would help her feel better emotionally and physically, but the eating plan feels like deprivation. Cl. grew up in a large family with just enough food to go around. Father was strict, mother was depressed and absorbed. As a child, she would buy peanut butter cups, hide them in her room and enjoy them alone.

Want?

Gets in the way (ego state)?

Part & Purpose (What would happen if...?)

New Job Description (Would you be interested in...?)
Cl. is 51y.o., presents with sexual performance anxiety. He wants very much to please his wife, but this neediness creates a lack of spontaneity. His wife feels dismissed, unfulfilled, which increases his anxiety. He feels rejected and never good enough. He grew up with a father who felt inadequate and a mother who was emotionally and energetically spent, given the fact that George was her fifth son. Mother was never present.

Want?
Gets in the way?
Part & Purpose (What would happen if...?)
New Job Description (Would you be interested in...?)
Cl. presents with desire to find out why he had an affair, after being married for 21 years. He wants to keep this from happening again. At the time of the affair, his wife had been in a severe depression for 9 months and was absent in the marriage. His mother died 12 years earlier, throwing him into his own depression, during which time his wife had an affair. Patrick’s father died when he was 3, leaving his mother to raise 5 kids. Mother was rarely available, his older sister doing most of his caretaking. As a teenager, lonely at home, he basically came and went as he pleased and found his own “troops” or family outside the home. A very young part of him is angry that he almost lost the marriage because of the affair. An adolescent part was the main impetus towards having the affair.

Want? Doesn’t want?
Gets in the way (ego state)?
Part & Purpose (What would happen if...?)
New Job Description (Would you be interested in...?)
hindrances and helpers

- If there is any obstruction to treatment, use the dissociative table: RUG-C. Purpose of obstruction? To hide or to heal? Relate to the “resistive” part.

- Explore willingness to change “job description”.

- Continue to create agreements and new goals.

- Goal is collaboration among parts and with client (R. Schwartz’ “Self”)

- Explore possibility of helper parts, parts that embody particular qualities (nurturing, protective, spiritual - Schmidt, S.J., 2009). Or MSR - memory specific resource (resources developed for a specific memory). Older and wiser parts.
Explore Hindrances and Reluctance

- Use the Dissociative Table (Fraser, 1991) or conference room & RUG-C

- What are the fears if you stopped doing what you’ve been doing? What else would you experience or feel?

- What’s not working?

- What do you really want?

- Can we find common goals?

- Can we agree on a plan?
VIDEO
RUG-C to EMDR
advanced SCENARIOS
Scenario: the Blame Game

- Tendency to blame - avoids response-ability and choice. Increases suffering.

- Adult blames the younger part

- Parts blame parts

- Parts blame the adult

- Major issues: avoidance, anxiety, shame, mistrust - “I can’t handle it”
J/ I’m so disgusted with myself! I’m so ashamed, ‘cause I’m so fat now.
A/ So what brings this on?
J/ I gained weight. I’m fat, and I’m disgusting. And I don’t have any other choices. Either I get fat or I starve.
A/ Sounds like a rock and a hard place.
J/ Exactly. I’m just so tired of feeling so crumby about myself.

[Tears, release follow]
A/ Would you be willing to try something? (she nods) I’d like you to really pay attention to how disgusted and ashamed you feel….
A/ What else are you noticing?
J/ I’m sad, so sad. No one knows how hard this is or how awful I feel.
A/ When you feel this sad, and disgusting and ashamed, how old do you feel?
J/ Anywhere between 10 and 13.
A/ Is there anything you would like me to know about you?
J/ Just that no one knows how hard this is for me.
A/ Do you have anyone to talk to?
J/ (shakes her head) /More tears…then affect subsides/
A/ Would you be willing to try something else? (nods) I’d like you to sit somewhere else... Now from this place, I’d like you to look over to 10/13, and is there anything you’d like to say to her, now that you’ve heard how sad and disgusted she feels?

J/ I just hate her. She’s fat, and I just had to take over.

A/ And not eat?

J/ Yeah. She’s made my life miserable. Now I have to starve or I become like her /anger apparent/.

A/ And how old are you?

J/ Oh, older teen. And now I only have two choices: be fat or give in to the eating disorder.

A/ If there were another possibility, would you be interested in hearing about it?

J/ Yeah.

A/ Okay, now I’d like you to move back to the chair for 10/13 and slip back into that 10/13 year old place. There yet?

J/ Yes.

A/ So how was it to hear what the older teen had to say?

J/ I think I deserve it.
A/ Well, I’d like you to hear something…. [developmental stage for body]
J/ I wish I could believe that.
A/ So now return to the older teen (changes seats). How was it for you to hear how it is
   For 10/13?
J/ I still hate her. She’s making my life miserable. But, but then (more tears), as an adult,
I just know that if I gain weight, I become her (pointing to the 10/13 chair).
A/ Okay, would you sit in a different place for the adult? (she moves again) Say more
   about what it’s like for you.
J/ I…I [the adult] don’t like her either.

Confluence of parts and the adult
Strategies

- Becoming known to each other - polarity work. Understanding leads to compassion. Internal couple’s work.

- Observing the healing in parts that have been the scapegoat (akin to EMDR processing with partner present)

- Finding ways of supporting each other via the strengths of various parts

- The circle of success - healed parts support parts about to do processing
Becoming Known - steps

- Get to know the emotional/attachment needs of each part by having client become both.

- When one part speaks and feels complete (“Is there anything more?” - (Imago Work, Harville Hendrix), summarize it for the other part(s) so there is understanding.

- Repeat the process for the second part

- Continue until mutual understanding and compassion occur.
scenario 2:

negative INTROJECTS

- Gestalt Tradition (Polster, E. & Polster, 1973, pp. 72-73): “The ‘shoulds’ begin early and often have little congruence with what the child senses his needs to be. Eventually a soul is worn down. The child’s confidence is depleted by external authorities, eroding his own clear identity and opening him to adult conquistadors who take over the territory. The surrender is abject at first and forgotten later. So the foreign body rules....”
INTROJECTS

- Ego State/EMDR Tradition (Paulsen, S., 2009, pp. 38-40): “In pathological introjection, the child unquestioningly takes into herself the behaviors, beliefs and frame of reference of a parent or other frequent perpetrator. The introjection blurs the distinctions between the perpetrator and the child…”
Why Introjects?

- Internalization (mimicking) of powerful, impactful person in one’s life, particularly growing up.
- Purpose typically is to protect
- Tactics: hide, scare, shame, guilt
- Again, avoids pain, creates suffering.
Strategies

- RUG-C
  - Find and connect with the introject
  - Identity clarification (S. Paulsen)
  - What would happen if you stopped?” (S. Paulsen)
  - Other creative questions: what do you need, want? purpose?
  - Emphasize common goal - healing
  - What agreements can we make?
Case examples

- Theresa - “failure” (1st and 2nd person)
- Cheryl - “Something wrong with me”
- Patrick - “I won’t be lonely again”
- Samantha - “I’ll be a bully”; “I won’t be disrespected”
T. grew up with a mother who belittled her. T. is convinced that she and her life have been worthless. Regardless of any success or accomplishment, she hears inside, “You’re worthless!” At work, she is typically reluctant to assert herself out of a fear that others will turn on her, leaving her with a sense of failure. “You see, you are a failure!”

Upon inquiry (I’d like to speak to the part....), an internal image (or sounds like, feels like....) of her mother appears, who reinforces the negative message with statements like, “You’ll never amount to anything!”
C. grew up with parents who were always fighting. Father was often drunk at home and sexually abused C. @5; mother had very low sense of self and was always competitive with C. who always prided herself on how she dressed and looked. C. became very promiscuous as a teen, drank constantly, was gang raped and had an abortion @17. A voice in her head unrelentingly proclaims, “She had it coming to her. She’s a fuckup and she should be in pain, after the way she behaved! Always looking so good, better than everyone else! That’s what got her into trouble.” The more she hears that voice, the more she acts out.
Patrick

P., 36, grew up with no father and an absent mother. His stepfather was a daily pot smoker and had a violent temper with which he intimidated and controlled his mother on a regular basis. After the divorce, mother was often out of the house, working and looking for another relationship. As an adolescent, P. made up for his lonely life in the home by doing alcohol and cocaine with older kids, beginning at age 16. The addictions gave him a sense of belonging and “wholeness” without which he often displayed anger, particularly towards his mother, female authority figures and even female peers. He wants to figure out why he relates so poorly to women.
Patrick learned to drink and drug as a teenager as a way of belonging, given absence of any adult presence at home. When both parents were at home, he witnessed his stepfather intimidate and isolate his mother from friends, et al. P. is presently dating a woman who is 8 years his senior. When she doesn’t return his text messages or if he sees her talking to other men, he goes to his apartment with a 12 pack and isolates. Recently, after drinking and using cocaine, he proceeded to her home, screamed at her and choked her almost into unconsciousness. He has no memory of the event.
Protector Parts vs. Introjects

- Some protector parts originate internally, driven by (usually) an outdated function. A protector can also be a positive introject (Paulsen, S., 2014, personal communication).

- Negative introjects originate externally and mimic powerful adults growing up who abused, criticized, punished, etc.

- Introjects often suffer a case of mistaken identity. They believe they ARE the external people they imitate (Paulsen, S., ca. 2012, personal communication).
S. was raised in a family in which the father’s family constantly put her down as “worthless, dirt, etc” for being “just like your crazy mother. “ Mother’s mother treated her similarly, was sadistically cruel and explosively angry towards S. for “making” S.’s mother unhappy. Something inside S. kept her from ever speaking up. Recently, at the end of a concert she was attending, S. opened her cell phone to call her husband to pick her up. An usher came by and grabbed the phone from her, as they were not allowed during the concert. A flash of anger took over her and she swung at the usher. This surprised S., as she related the story in session, but something felt like, “No way you’re treating me like that!!” had flashed through her brain. This was also surprising since, on the inside, S. believed she was valueless and didn’t deserve to speak up.
Scenario 3: Parts and Attachment
A very useful summary of attachment theory and research can be found in Part 1 of *Attachment in Psychotherapy* (Wallin, D., 2007) in which he explains the contributions and cross-fertilization among John Bowlby (1988), Mary Ainsworth and Mary Main.

April Steele (2007) and Shirley Jean Schmidt (2009) have offered those of us in EMDR land effective approaches to working with adults with attachment injuries.

*Attachment-Focused EMDR* (Parnell, L. 2013)

Many years of clinical and personal experience...
possible indications of attachment injury

- Low self-esteem
- Needy, clingy, pseudo-independent behaviors
- Lack of self-control
- Relational difficulties (avoidant, enmeshed)
- Antisocial attitudes and behaviors
- Difficulty with trust, affection, intimacy
- Pessimism
- Lack of empathy, compassion, remorse
- Chronic apathy, depression, anxiety
Attachment History

- Necessary piece of evaluation phase
- Can’t heal what you don’t know
- JB’s story
Jb’s attachment history

- One older sister born in Germany
- JB born in USA, mother depressed during and after pregnancy, and didn’t want to give birth in USA. Got milk?
- Fear of upsetting mother further: “burden”
- Fear of triggering father’s unpredictable outbursts and his anxious controlling
- No one to talk to. No one who got her.
Parts and Attachment

- The problem: absence of early attachment leads to Self deficits and impedes processing.
- Sometimes the attachment repair (AR) is the treatment, particularly involving implicit memory.
Strategies: Attachment repair with adults

Re-parenting - supplying the missing pieces. As adult self, reparenting a younger ego state when attachment injury leads to absence of adaptive skills and self-acceptance needed for processing. Existential-Gestalt polarity work & “presentification”

Imaginal Nurturing - April Steele (2007)

MSR - memory (ego state) specific resource - A. Seubert (2009)

Spiritual self, nurturer, protector (S.J. Schmidt, 2009)

Life Span Integration (P. Pace, 2012) - moving forward in time (space/time orientation)

Paulsen and O’Shea (2015): “When there are no words...” (that’s another workshop!)

Overall goal: “Self” development required to manage trauma work
Reparenting strategies:
“R” times 6

- Attachment history required. Can’t repair what you don’t recognize and understand.

- Relate to younger aspects of Self via conference room, body or emotional clues, memories, photos to determine what is missing, needed.

- Bring adult capacities and other resources back in time to younger part. This bridging between present and past is done via rescue and repair.

- Return to the present time with the younger part.

- Renew the relationship on a daily basis.
Ego State/attachment
Video
Caveat: grounding the adult

Problem: part becomes the whole.

- The part is “pervasive”, adult consciousness is lost.
- The adult is in the back seat and a kid is driving the bus!
- Strategies for grounding: time/place orientation, body orientation, adult life roles, adult capacities, intentional dissociation (relating to part on TV screen), titrate
- Need for “contact boundaries” (Polster, E. & Polster, M., 1973)
ego states and EMDR

- EMDR protocol remains intact. Use entire protocol. Not dealing with DDNOS or DID.

- Collaboration or mutual complementarity describe the relationship between parts work and EMDR.

- Parts work supports access to that which EMDR processes. Supports the bridge between dysfunctionally stored material and the conscious, processing part of brain.
Ego state interweaves

- Check with ego states before processing.
- Check in with parts during and after phases 3-6 if any looping or stuckness occurs.
- Remember that if an ego state lets you know that processing is getting to be too much, this is now a CHOICE, not an automatic defense.
- **Important:** Always return to the original target as it occurred when using any kind of interweave or resource.
Transition from attachment work to EMDR - video
Relating to the part

- April Steele (Steele, 2007): “Talk to the child!”
- Any part has developed relational patterns of mistrust, hiding, etc. for years.
- Bringing this part into the light of consciousness requires daily contact and dialoguing.
- Have client note changes in the part over time.
From Dr. Seuss

Today you are you,
This is truer than true.
There is no one alive
who is you-er than you.

All of You!
Peace - and many thanks