

# The Therapeutic Relationship

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Toni Herbine-Blank: Welcome to month nine, everybody. I'm going to be talking to you in this segment about the therapeutic relationship in IFS. Last month, you heard Pam talking about direct access and insight, and she wove a lot of the principles of the therapeutic relationship into that talk, so you're going to be hearing some repeats and, also, I'm going to be slowing it down and talking to you more in-depth about how we see this very critical part of the process in IFS. When I started my training back in 2000, I was coming from the psychodynamic perspective and very keyed into the therapeutic relationship in my work with clients.

I would ask Dick, who was a trainer in my training back then, about that, about the idea of the field that we were creating and in helping people access self-energy and then their parts. He would minimize it and say, "You know, I really don't want you to be thinking too much about that," and the reason that he didn't want us to be thinking so much about that is he wanted to help us change our focus from the therapist being so important to the self and the parts of the clients being where they ... the healing paradigm in this model.

A few others beside myself sort of started beating that drum with Dick because when we would watch him work, we would see this extraordinary thing that he was able to hold so that the clients could do this deep work. Little by little over time, he started paying attention to us and saying, "Okay, okay." So we would say, "Dick, probably when you watch the videos of you working, you're watching what's happening with the client, but we want to encourage you to watch yourself as you're doing these demos so that you can actually see this powerful thing that's happening between you.

Eventually he did and wrote this beautiful chapter in the New Dimensions book which Pam was reading from last time and I'll be reading from a little bit this time, as well, to acknowledge that the therapeutic field in IFS is actually very, very important. In this segment, I'm going to be talking to you about transference and countertransference and the IFS perspective on that. I'm going to be talking to you about the role of the therapist, the tasks of the therapists in IFS and how we build this field of self to self with the clients.

Transference and countertransference. I remember when I was in graduate school, this actually did not get a lot of attention. When we got to the subject of countertransference, what we were told is, if you have it, go get help, so that really wasn't, that wasn't sufficient really from my perspective to help therapists really understand what was going on. A basic definition of transference, the transfer of emotion, fantasy, or wish onto the therapist and then, of course, countertransference is the therapist's reaction to the client's transference.

A lot of the emphasis when therapists are being taught about countertransference is, "How can your countertransference give you information about the client?" I'm going to talk to you about the IFS perspective on this because it is somewhat different. What we would say to that definition is, "It is parts of the client that will direct emotion or need onto the therapist, and the clinician's parts will react internally and,

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of course, sometimes externally. We're adding this idea of differentiating to this definition, which is parts of the client will trigger parts in the therapist and vice versa.

How could our parts not influence each other? Of course, they do, so our parts will react to our client's parts. If we are unaware of this, particularly if we are unaware when our own exiles begin to become activated, our protectors may begin to interfere with the process. When our protectors begin to interfere with the process, this will inevitably trigger the protectors in the client, and then this becomes a part-to-part interaction instead of the self of the therapist to the self of the client, so hopefully that makes sense.

In an IFS, there's another IFS trainer named Mona Barbera who wrote a book on couple therapy, and one of her chapters is called *If It's Intense, It's Yours*. I love that, and I quote her all the time. In IFS, what we're encouraging you as therapists to understand is that when you begin to respond and react to your client, we want you to slow down the process and start paying attention to what it is that's happening inside you. I talked about the u-turn in month five of this series, and that's another invitation. It's the invitation for the therapist to begin to do a u-turn and say, "I wonder what's going on inside me?"

When we have a part that begins to react to the client, first we say, "It's about you" because if it wasn't about you, you wouldn't be reacting at all and, secondarily, it may give you information about your client. Most importantly, if that part of you is perpetual, in other words if you have a part of you that keeps surfacing with a client or with a client issue, it's an opportunity for you to do a u-turn and look inside. We call this a trailhead, so this becomes a trailhead for the therapist. A part of you just can't not react to something that's going on in the client's system.

The therapeutic relationship, this is one of my favorite things to teach. I'm always when I'm doing the basic IFS training, I'm always so excited when we get to this juncture in training because I remember Dick Short saying to us in my Level 1 training, "If I had a choice between having you learn this roadmap upside down and backwards, all the protocols, have memorizing those and cultivating the ability to access self-energy when you're working with your client, I would far rather have you be able to do that than to learn the roadmap." This is why this is so important. The therapeutic relationship in IFS is all about helping the therapist learn to access self-energy and stay attuned to and unblended from their own parts.

When we are able to do this, and Pam mentioned this over and over again in her talk on direct access and insight, the self of the therapist fosters the client's ability to access self-energy, and this creates a powerful, powerful alliance between the two and makes the work possible and makes it possible for clients to be in a field where the therapist is able to hold a tremendous amount of information and a tremendous amount of affect and story and allow the client to take that deep dive.

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In my experience, when I started doing IFS, I was amazed at how quickly clients were able to drop. When I was able to stand blended and I was also able because of that to help clients unblend, how quickly people were able to move to their exiles to their vulnerability and do that very, very deep work.

The IFS therapist does a little interpreting, develops the capacity to trust the client's self-energy, and this is a little bit of a paradigm shift for many therapists as they begin to do IFS. We talked about this early on in this program that one of the assumptions of this model is that everybody has a self, no matter how traumatized, no matter how wounded, and that part of the job of the IFS therapist is to learn to trust that, that each client is on their own healing journey. Our job is to make space for them to be able to do that, not to begin to bring our agenda or to direct them in one way or another.

The IFS therapist acts as a guide and a facilitator, so that's just another way of saying what I just said and what Pam said earlier. Our job is to support the client to move in their own journey and to help guide and to facilitate that. We follow the client's lead, and when we begin a session, often it is, "What are you noticing what's most present? What are you curious about today? What's happening?" and to guide the client inside to begin to tap into whatever it is that's going on inside of them and to choose the journey for each individual session.

The IFS therapist practices congruence, and I'm going to be talking more about that but, at the same time that we're tuning in to the client's parts and holding self for them, we're also paying attention to what's going on inside of us at all times. I want to talk a little bit about the tasks of the IFS therapist, and then also I'm going to be talking about what the IFS therapist has to let go of. Some of the tasks of the therapists are the ability to provide safety, connection, and self-leadership, so to be able to hold all of what's being presented. The IFS therapist needs to have clarity to recognize that there are always exiles beneath protectors.

I think that I mentioned before in one of my segments about this idea that protectors don't run alone, so it's so important when you are in the face of one of your client's protectors, no matter how big it is, no matter how ferocious it is, no matter how fierce it is, even if it's going after you, for instance, which protectors sometimes do, that underneath that is something much more vulnerable and that if we can make it safe for that protector, then we're going to be able to find out what's going on underneath.

It takes courage to be an IFS therapist to be able to say to the client, "All parts are welcome." That also means that parts that need to give the client, you need to give us feedback are welcome, and also some of these big protectors that I was just talking about, that those parts can be made welcome, they can be made sense of, and they can be welcomed into the system. That does sometimes take a lot of courage as a therapist to sit in the face of a lot of big energy.

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We need presence. We need patience. We need persistence. I think presence and patience and persistence are three of the big ones here when we're working with clients that have a lot of trauma is that the protectors will keep coming back over and over and over and over again to question what you're doing, to try to shut down the process, and the ability to just stay steady with your client and trust the process. Of course, you have to know that the process works in order to trust the process, but that is something that will grow over time if you keep with it.

Just a couple of more assumptions of the therapeutic relationship in IFS, and I think I just mentioned this previously, but what does it mean to create an environment where you're saying and you're giving the message to your client, "All parts are welcome?" That is something that many people have not had the experience of really, really trusting that all their parts are welcome, creating an environment where all parts can really feel welcome.

If you think about it, if you've ever been in a situation where you've been in therapy, you know that we come in. You know, our clients come in to us, and they sit down, and the expectation is that they are going to just begin revealing things to someone who they don't know so that is a challenge. What we want to do is give this information that all parts are welcome. We want to extend that energetically.

We want to be able to listen to the parts of all stories. We want to listen to, as we've been talking about these last two months, all the different parts that come in, given the situation, and welcome them and feel warmly to them and extend warmth to them so that, as you're doing direct access in the beginning of therapy, these parts that might be suspicious or might be frightened or might be skeptical of the therapist can really feel that they are being received.

Another assumption in this model is, and you can see this picture here illustrates what happens to IFS therapists in the beginning. Healing is not dependent on the interpretation, the insight, or the wisdom of the therapist. That is a let-go for many therapists. It's a paradigm shift, and it's not that our interpretations, insight, and wisdom can't be helpful from time to time, but that is not where the healing paradigm lies in this model. The healing, as we've said over and over again, comes between the self of the client and the part of the client.

Another assumption is that we can speak for our own parts, and this can be healing in therapy. When we're thinking about counter-transference, our job is not to download our parts onto our clients with the hope of receiving help from them, but there are times in therapy when being able to speak for something that's coming up inside you can, one, give your client the message and the repeated message, "I am with you. We are alike. I have parts. You have parts. We all have parts." It's also a way to be honest and self-disclosed with clients, and that can build trust.

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My rule of thumb when I'm going to speak for my part is always, "Is this in the service of deepening the therapy?", so I'll ask the part of me that wants to speak or be spoken for, "What is the intention and what is the purpose for being spoken for?"

The last thing I want to say here is that the relational field that we begin to create, the self-to-self connection between the therapist and the client, is characterized by safety, acceptance, trust, and compassion. This is what helps clients to be able to do this deep dive that we're asking them to do and start to tap into their own wisdom. It also creates the space or the environment that, from the message that we're giving is that, although you have many parts that may be causing distress in your internal world or your external world, we do trust that there is inner wisdom, and we are going to help you find that and access it and begin to bring that to the parts of yourself that are struggling or suffering.

In the next segment, I'm going to be talking to you more about your own parts, different parts of the therapist, and what you might need to let go of and work with in order to strengthen the therapeutic relationship. I'll see you then.