

Chapter 14

The Utility of Parts Work

If you are new to EMDR therapy, it must seem that “parts work” has suddenly dropped into EMDR Therapy as its latest fad, and clinicians are divided into assorted “denominations” about how to best do it with all the judgments and camp dogma that can come with it. This chapter explores parts work as a concept that has always been essential to EMDR therapy and is essential to doing EMDR therapy well. I’m not exploring here how to “do” parts work, rather I’m explaining why we’re always doing parts work in EMDR therapy.

One of the many things that EMDR’s AIP model does is that it describes what a difficult memory is. A traumatic memory contains the raw sensory information perceived by the nervous system at the time of the experience. It also contains a snapshot of you at the time the trauma happened: the perspectives through which you viewed yourself and the world. Also encoded in the memory are your affective states at the time of the trauma. It is also possible at the time of the trauma that the schema component of the memory (the take-home messages of fat, ugly, stupid, lazy, not safe, or my fault, etc.) get initially encoded. And if the schema components aren’t inserted at the time of the trauma, then they will be as this experience gets brought into working memory and then returned back into the parts of the brain that store trauma over and over in the years or decades since. If a memory encapsulates all aspects of an event as it was experienced by the nervous system at that time, then we need to understand that this experience happened at a particular developmental era and was experienced by the parts system that existed at the time of the trauma. Encoded in many memories are worldviews, affects, internal conflicts, survival strategies, and parts. The parts in that memory have since evolved into the client’s right-now parts. We are often working with two systems of parts: the parts at the time of the trauma and your right-now parts. We are working with the information accessible at the time of the trauma and the information that is accessible to you right now. The degree to which the parts systems are similar to each other or different depends largely on the nature of the experiences that you have had since the trauma. We are wounded through experiences and we heal

experientially. We gain new information experientially. In EMDR therapy, healing is the connection between these two information systems. Healing can be complicated by internal conflicts between the right-now parts system, the trauma-era parts, or any conflicts between the parts systems.

At the core of the Adaptive Information Processing model is the idea that difficult experiences must connect to right-now existing adaptive information if healing occurs. I often use the metaphor of a boat and a fish, with the boat being the adaptive information and the fish being the memory information you are trying to land. In EMDR therapy, you can't land a fish bigger than your boat. In the most general sense, healthy people typically have healthy systems. They have boats the size of cruise ships. A lot of their healing requires that we stay out of their way and let them see the connection between various periods of wounding. Healthy people have enormous amounts of adaptive information and typically have large windows of tolerance. They can typically land every fish that they hook onto. People with pervasively traumatized nervous systems may not have had much of an opportunity to develop information different from the time of the trauma, and this is where parts work can be complicated. What do you do when the parts of you at the time of the trauma when you were six years old are convinced that the trauma is your fault, and the most grown-up right-now parts also believe that the trauma at six years old was your fault? In EMDR therapy, you can connect old stuck information into right-now adaptive information (if you have enough of it), but you can't connect a lie into a lie. It doesn't work in EMDR therapy. Most of the problems in EMDR therapy and all blocking beliefs aren't problems because the kid parts in the memory believe them. Rather, they are blocks because your right-now grown-up parts still believe those old lessons about yourself.

Parts work provides opportunities for your parts to have experiences that are different from the expectation in the bad memory. For some people, these are some of their first experiments in self-compassion. They are some of the first experiences of parts of you extending compassion to other parts of you. In many forms of parts work, one part of you (typically a more resourced part) brings a hug, information, or compassion to other parts of you. There are so many ways to do this. You can do this inside EMDR reprocessing. You can do this as a form of resourcing.

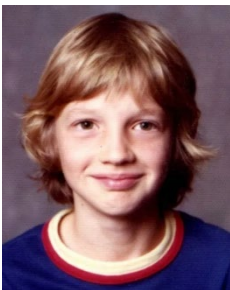
I want to share a small piece of parts work that my grown-up parts wrote to my middle-school parts. This is a recent piece, having done a lot of my own work, but it models the hug, the self-compassion, the information that kid parts don't have, and the recognition of strength and

resilience in surviving at all ages. This piece is inspired by my childhood school pictures, which had long been a source of self-hatred:

For the longest time, you'll see the gap in your teeth big enough to slide the kind of quarter that used to buy something. You'll see the crazy mop that is your hair and you'll humiliate and shame yourself for these things. You'll wish you looked like James, Kevin, or Jerry... all smooth, cut, and slick. With a blue ballpoint pen, you'll etch yourself entirely out of your middle school yearbook.

But, I want you to know that you are going to grow up. You are going to buy new cars and marvelous old houses. You are going to make friends who will see you. You're going to have a child of your own. You're going to learn some things that will help sort out what is yours from what was done to you. You will experience different versions of love.

I look at these pictures and I remember how hard it was to be you and I appreciate the difficulty of that huge smile that projects that you are okay. I admire the creativity of your survival. I want to go back and I want to give you a hug. I want to check in on you, because I know that you are not okay. I want to go back to you in seventh grade and tell you that 1982 is going to feel like it will kill you. And I'll tell you that I know for certain that it will not. It is going to take a long time and a lot of healing, but you're going to be healthy enough to look at those pictures and love yourself deeply, think that you have always been creative and handsome and that they are all absolutely lovely. They document what was hard. They also document what has always been remarkable. And look, we have still have them.



There were times, not too terribly long ago, when these pictures would have been evidence of defectiveness. Some of the most grown-up parts of me were still carrying the old survival strategies of self-blame and self-flagellation. In order to heal, I needed to have experiences that were different from the expectation in the bad memory. My very first experience in therapy was when I was 24 years old, I needed to have the experience of finding the right adult words to simply describe what I had been through. My first therapist didn't know how to fix it. But she knew how to attune and how to listen.

I had the experience of being with my trauma and also being okay. I had other experiences in love and nurture that were helpful, parts-wise. I had the experience of raising a child and seeing first-hand the needs that a child is born into, and I got the actual experience of providing concrete nurture to something. Later, I had really good therapy. I got to witness people experience really good therapy. As a therapist, I saw people bringing comfort, empathy, and information across parts and across developmental eras. Some of my early clients modeled the work of self-compassion that I had yet to do in myself. After that, I had more good therapy where wounds carried by parts of me were metabolized into the parts of me that already knew that I was already okay.

There are a thousand ways to do parts work well. But EMDR therapy is almost always about connecting information held by parts in particular developmental eras to other parts that are hopefully resourced enough to metabolize that wounding. When the right-now parts aren't healthy enough to metabolize the wounding, or when the younger parts are too stuck, frozen, or existentially lonely, we may need to promote experiences in which parts can connect with other parts in ways that are different from the expectations in the bad memories. Through these experiences, we can create the possibility of what didn't happen. When clients are confused about human needs and whose job it is to meet them, we may need to help them have experiences of getting a need met in imaginal space before it can happen in the system spontaneously. Parts work is about connecting different developmental eras and different parts of the brain, and all of it is done experientially. We are wounded through experiences, and we heal by having different experiences. Parts work can create little pathways, then little roads, then bigger roads, then highways, and then interstates wide enough for self-compassion, self-comprehension, and ultimately self-healing.

There are many approaches to parts work. Many EMDR therapists find utility in the following resources: Internal Family Systems (Schwartz, R. C., & Sweezy, M. 2020), Developmental Needs Meeting Strategy (Schmidt, 2009), Robin Shapiro's Easy Ego State Interventions (Shapiro, 2016), Amy Wagner's The Soul of Dissociation training (JoyfulBrainInstitute.com), Jamie Marich's *Dissociation Made Simple* (2023), and Resource Therapy (ResourceTherapyInternational.com).