

**Clinical Presentation to the Annual Meeting of Western Massachusetts EMDRIA Network**

**The Effective Use of the Conference Room**

**Reasons to do Conference Room:**

**To know what we are dealing with:**

Our clients with Complex PTSD are always are dissociated in some way, and it is very important that we can **understand the complexity of what has been dissociated**, as well as the stronger parts of self, so that we can work with both.

It is also important to help our clients know and understand more about their own complexity and the reasons for it. This week I was working with someone who was annoyed at what she calls her "sick part", which is helpless and weak, and wanted to get rid of her. In doing the Conference Room, she came to understand that this part is not her 50-year-old self, but a child self, and she could then have more compassion for that part of herself and could work toward helping that part feel validated and supported by her other parts.

Along those lines, I'll start with what I have come to understand about working with the stronger, more functioning and resourced parts of self, which can be of great help to the emotional child parts. I do this work on its own, without bilateral stimulation, as a form of resource building, and this work also becomes important when doing EMDR in Conference Room to help emotional parts tolerate the EMDR processing.

**So, the first reason for doing Conference Room:**

**To identify and access parts that contain resources and strengths** so that they can use those to help soothe, reassure, and strengthen other parts of self.

A recent example of when I did a Conference Room session without EMDR was to help a client who was destabilized by a lot of stress in her life, and couldn't get herself grounded or calm or soothe herself. She was frozen by her anxiety, and wasn't able to function. Knowing her strengths at other times in her life, I helped her invite her strong and resourced parts in the Conference Room, who could tell her what she needed to hear, that she can ground and soothe herself, and what she can do now to be able to calm and reassure herself, that she can do one thing at a time, and do good self-care as well. I used the theratappers to install and strengthen these resources, and she felt much better.

I have made up a list of the kinds of resourced parts that I have seen so far in my experience doing Conference Room. Clients usually make up their own names for their parts, but I wanted to give you this list as something to help you keep in mind what kinds of resources people can have that can be invited into conference room. Sometimes my clients don't think of bringing these parts of themselves into the room, and I have found it helpful to suggest that they do.

**The parts that can be resources can include:**

**-The functioning parts:** The parts that take care of life, get things done, and are competent. This can also be thought of as the ANP, the Apparently Normal Part. It can be helpful to a depressed or anxious client who feels unmotivated to do anything, or feels incapable and helpless for example, in the face of having a dirty, disorganized house, to remember the times when that client was able to accomplish important things, taking one thing at a time, prioritizing, taking care of one important task, and giving herself credit for getting that one thing done.

**-The connecting parts:** These parts can be especially helpful for clients who can get into states in which they feel totally alone and bereft, as if no one ever cared about them or ever will. These states of total aloneness usually originated in a childhood of severe neglect, and when triggered, these clients can feel again what they felt then, an almost unbearably painful aloneness. These clients often can be helped to think about some relationships that they do have with some people in their lives now, and can be helped to get in touch with the part of them that can connect with people and can feel some attachment which can ease that pain of aloneness and give them some hope. They can also use that connecting part to connect with their alone child parts, which can help them feel less empty.

**-The thinking, reflective parts:** It can be helpful to have in the Conference Room a part of the self that is able to think about choices they have and likely consequences, to help the parts of self that are so emotionally stirred up that they feel they can't think. For example, someone who is in great distress and is drawn to go into a potentially triggering situation, such as being with someone who has been abusive to them before, can be reminded to call upon a part of themselves, when calm, that is able to weigh consequences of their actions. These parts are like "rational mind" in DBT language, the part that can get a more objective distance on themselves and their lives, and can think, using their heads instead of their hearts.

**-The healthy coping skills parts:** These are parts that can allow themselves to notice and feel their emotions, and have the ability to use words to describe their emotions. These parts have the capacity at times to ground themselves and tolerate painful emotions. These are parts that also can sometimes have moments being able to allow themselves to experience positive affect, and can enjoy some activities or relationships. The client, when other parts are triggered, cannot do these things, and so having a part like this in Conference Room that you can remind them to call upon, can be helpful. This was one of the helpful parts that my client I mentioned before who was paralyzed by her stress and fear was able to call upon.

**-Creative, imaginative parts:** One of my clients remembered that as a child, left alone a lot of the time, she would entertain herself by creating adventures with her Barbie Dolls for hours, putting moss and rocks around them to make houses and gardens. She was able to value this part of herself when she brought it into Conference Room, and this part thought of creative ways to handle current problems.

These last three are the resources that are described in doing **Healing Circle work** , and can be very important:

## **Jane Laskey, LICSW - The Effective Use of the Conference Room - 10/10/2013**

**-The Spiritual parts:** Many clients can get in touch with a higher power or can feel the love of God inside of them, and that can be an important source of strength, of hope, and of feeling that they are worthy.

**-The Nurturing Parts:** With a few of my clients, when I point out for them times that they were nurturing with their own children, I can call on that part to also be nurturing to themselves.

**-The Protective Parts:** Again, often when I help them call to mind times when they protected their children, as an example, went into the school and dealt well with their child being bullied, making sure the school was doing something about it, I can ask them to access that part to protect themselves.

### **The second main reason for working with parts has to do with:**

#### **For us and our clients to develop understanding of, and compassion for, all parts of self**

Our clients have parts that go out in the world and function, which is referred to in the literature as ANPs, or Apparently Normal Parts, and also dissociated parts that are called EPs, or Emotional Parts, that carry the painful memories and feelings. There are also different kinds of Protector Parts as well as Internalized Parent parts. It is important for us to understand and access all these different parts, and to know whom we are dealing with at any given moment, and what might emerge. For example, if a wife is betrayed by her husband, we need to know that it is a child part that is emerging who feels so helpless, alone, self-blaming, and deserving of the betrayal. If a client is starting to feel fuzzy, like everything looks distant, we need to know that that is a protector part coming in to dissociate her from her feelings.

#### **In Conference Room, we identify, access, and work with part selves in these ways:**

- We help clients give their different parts a name, a voice, a story, and a point of view
- We help our clients understand and have compassion for the "good reasons" why they got created, and at what time in their life they got created
- We work with our clients on understanding the function and role of each part - what they did to help the client survive and be able to function
- We promote dialogue and conflict resolution among the warring parts
- We make sure no parts "are gotten rid of"; we help to create new roles for parts to be loyal to the self

#### **In addition to the ANP and Resourced parts, other parts of self can include:**

##### **Emotional Parts - EPs**

There are EP child parts that carry some kind of memory or feeling from the traumas that they experienced. It is **crucial to know these parts and include them in the Conference Room** so we can know what the emotions are. Healing comes when the client is helped to tolerate the feelings, put them into words, and accept the validity of their feelings.

I thought it might be helpful to delineate some of the EPs that can be complicated to deal with.

## Jane Laskey, LICSW - The Effective Use of the Conference Room - 10/10/2013

- EPs can be **weak, scared, and vulnerable child parts**. These terrified and helpless EPs may not know how to describe or understand what it is that they are experiencing, might not have words for it, and might be afraid to talk because they carry that prohibition they learned as children to keep what they experienced or witnessed a secret. As children, to speak up or even acknowledge the painful reality of what was going on in their families might have risked for them a loss of attachment and an unbearable aloneness which they couldn't have tolerated then. It is crucial to eventually be able to help these parts put their emotions into words and tell their stories in a way that is fractionated and manageable so that they don't get flooded or overwhelmed.
- EPs can be **Angry Parts**. Our clients with Complex PTSD are often afraid of their anger, as this has been an affect that is especially threatening to the relationships they depended upon with their caretakers. Usually there has been no help in the family with accepting the validity of their anger or teaching or role-modeling the appropriate expression of anger. In most cases, in these dysfunctional families, the children witnessed no anger or else they witnessed out of control anger, and were prohibited from expressing their own anger at all. The Angry EP parts are often one of the most problematic parts for the system. I have a client who believes that anger is "ugly", and she cannot accept the validity of her own anger. She is always apologizing and blaming herself for everything. The fear is that the anger will be out of control or that it will destroy relationships and the client will be all alone. Her anger is all directed toward herself.
- There can be many other EP parts as well: including **Guilty Parts, Shameful Parts, and Fearful parts**. Clients name their own parts, and we can understand them as EPs when they started young and carry a lot of strong affect.
- **Protective Parts**. Protective Parts are the ones that **numb the feelings and push down the memories** of trauma. They work very hard to try to survive by not feeling the fear, the sorrow, or the rage and pretending everything is fine. They often were created as children, and were doing the best they could at the time to try to cope with growing up in a family that was hurting or neglecting them. They often try to convince themselves that it wasn't so bad and they can just get over it and move on.

Protective parts are **especially important to connect with because they will block the treatment** by blocking access to affect and memory, and stopping the processing.

Protective parts often won't come forth as a part they see and name coming into Conference Room, but we can be alert to noticing that aspect of them and inviting that part in. I will often explain these "good reasons" as a way to connect with these parts, and will empathize with how hard they had to work to keep the feelings and memories pushed down so they can function.

**The "good reasons" why the Protective Parts exist include:**

- **To preserve the illusion of having had loving and adequate parenting**, e.g., by minimizing or denying that what happened to them was that bad, and they should just get over it and move on. They often idealize parents, if they preserve that illusion, they can pretend that they came from a normal loving family so they don't have to

feel that terrible aloneness or rage or terror or sorrow if they face that this was not so. A client with a violent alcoholic father who was at times attentive will tend to focus on the times that they did get something from the father, will idealize him, and disconnect from or deny anger at him. Who wants to face that the one father they had was so disturbed and caused so much damage to them? In current life, this same client may have an alcoholic abusive boyfriend, and her child part is triggered and has that same need to disconnect from her anger at him, when he says nothing about the abuse or apologizes, she is relieved and reports that she loves him. It is too painful to live without the boyfriend or to realize she didn't have the father she thought she had.

- **To protect the ANP so that they can function.** If they allowed the ANP to feel the very painful feelings and remember the terrible memories, they are in danger of getting so scared or angry that they can't concentrate or so sad that they can't get out of bed
- **To protect themselves from being overwhelmed or flooded by painful affect:** Parts that are addicted to something such as drugs or alcohol or shopping or gambling or sex are protective parts. They use the addiction to numb themselves, thus protecting themselves from feeling the affect.

We need to work with the protective parts because they will be triggered to come forward to stop or prevent the remembering and processing of trauma.

### **Internalized parental abusers or neglectors**

I often use what I heard from Sandra Paulsen about everyone internalizing their parents: that if we didn't internalize our parents, no one would ever pick up their dirty socks from the floor. In dysfunctional families, the children internalize parents who abused or neglected them. They then have these internalized parental parts which feel that they are unlovable, to blame for everything, and deserving of punishment. These are the parts that can be very harsh and critical of themselves, don't do good self-care, and that keep themselves from succeeding.

These internalized parental parts as well as the Protector parts are called "**Honchos**" by Sandra Paulsen, and the first order of business in Conference Room is often to **build an alliance** with these parts, or they will block progress in the treatment. I often talk to them about how they were just a child at the time they go created, and they were doing the best they could. for understandable reasons. We can explain these to the Internalized Parent Parts.

### **The "good reasons" why the Internalized parents exist include:**

- **To carry the "toxic energy" from the parents and not contaminating all parts of the self with it:** If this one part is "mean" to themselves, there can be other parts that can be nice to themselves and others.
- **To maintain a connection to the parents** by agreeing with them about them being to blame for what is wrong, or being undeserving, unworthy, or unimportant. If they have that connection and are not angry at their parents. they won't feel so alone.
- **To continue the survival technique they started in their childhood of "keeping themselves in line", to be what their parents need or want them to be.** For example,

## Jane Laskey, LICSW - The Effective Use of the Conference Room - 10/10/2013

if their parents can't tolerate them expressing any anger, they might yell at themselves if they start to feel anger, and that protects them from more harsh treatment from their parents.

I have one client whom I will call Janet, whose mother blamed her for causing her to go back to smoking cigarettes, because this client dropped out of swimming lessons as a child. She internalized her mother, and hated herself for dropping out, as well as for many other times when her mother turned things around and blamed her. She called this part of herself "Rotten Melon", which she named after that familiar feeling she would get in her gut when she felt she was put in "no-win" situations with her mother, trapped, with no possible way to win her mother's love or approval. If she would have spoken up for herself and said it wasn't her fault that her mother went back to smoking, her mother, an adult skilled in projecting her bad self onto my client, would have been able to turn it around and make my client feel even worse about herself.

Janet's internalized self-blaming Rotten Melon part also helped her **maintain some feeling of connection to her mother**. On an emotional level, it was too hard for her to think of her mother as emotionally abusive. When she would start to feel the huge gap of connection to the mother, she had another part, a **Protector she called Choker**, who would literally make her choke so that she was unable to speak of that emptiness that came with facing those feelings. Not being able to speak of it made it less real, and in that way, she could stay being Rotten Melon, feeling bad about herself, but protected from feeling so alone and empty.

Janet had other internalized parent parts as well. She had one she named after her mother, and this was her Mary-Part. This Part is the one who would treat others like her mother treated her, finding subtle ways to make others feel inferior or uncomfortable, which would give her a feeling of having some power.

After doing a lot of Conference Room sessions with Janet, eventually we went back to the old target scene about her mother blaming her for picking up smoking again, and brought the EMDR processing into Conference Room. I worked with Choker to step aside, with Rotten Melon to find a new role, to be able to notice when she needed to work on something to improve herself, without feeling that this made her a completely bad person, and with her Mary-part, to take off her Mary costume and leave it on a hanger, leaving the power from that part inside of her, pictured as a cone of energy, which she could use to give her a feeling of power without having to make other people feel badly in the process. She also worked on using her Competent, Mindful, and Nurturing resourced parts to give support and comfort to the child parts. Progress was made.

Let me now delineate the **reasons to do EMDR in Conference Room**:

The reasons for doing Conference Room on its own that I went over above apply for doing EMDR in Conference Room, but more specifically, doing EMDR in Conference room can help in keeping the client in a window of tolerance, both being able to access feelings and memories by having the emotional child parts there, and also by not getting hyper-aroused and flooded.

1. **Can provide a concrete way of having all parts begin the EMDR on board with doing the processing.** I got the idea from Sandra Paulsen to have lights in the

## Jane Laskey, LICSW - The Effective Use of the Conference Room - 10/10/2013

Conference Room for each part to press when we are deciding to start doing EMDR in Conference Room. If they press green, it's a go, if they press yellow, that's caution, and if they press red, it's no. Then we discuss the concerns of the parts that pressed yellow or red, and we don't do EMDR until all parts press green. Usually this works pretty well, though of course that's not the end of the interference in doing EMDR that will come.

2. **Can help to fractionate the work with objects such as screens and affect dials you can use in Conference Room** - to help clients from getting hyper-aroused and flooded I often have the parts look at the target scene on a screen as a way to put more distance from it. Sandra Paulsen has many ideas of things to put in Conference Room to help fractionate the work.
3. **Can help to preserve the adult functioning part (ANP) by having the option to have that part go into a soundproof room for the processing.**
4. Also to prevent hyperarousal and flooding: **Can help the child Emotional Parts (EPs) to be able to tolerate the increased access to painful childhood memories and feelings.** As the client is more ready to have the child parts present and able to tell their story, we can also have the more adult and resourced parts hold the child, reassure her that it wasn't her fault, and validate how painful it was, for example, to witness her father beating up her mother or her brother sexually abusing her.
5. **Can help to deal with looping** when doing EMDR by noting that the **Protective and Internalized parent Parts** are working hard to do their job when they keep the client from successfully doing Adaptive Information Processing, getting to be able to see the target scene any differently, in a more adaptive way.

I have a client I'll call Susan I've been working with for 4 years, whose case illustrates dealing with looping. When I first started working with her 4 years ago, we were doing EMDR on her father ignoring her. Her negative cognition was "I'm not important", and it would seem at the end of a session that she was getting it that his neglect wasn't because she wasn't cute or smart enough, and it was because of how he was as a father. She seemed closer to completely believing her Positive Cognition, that she is lovable as a person, but then the next session, she'd be back to trying to figure out what she could do to get his attention, again thinking that without that, she can't possibly be important. We stopped the EMDR to deal with the looping by understanding her parts in Conference Room. I then brought up our EMDR target into Conference Room, with all her parts present. We could understand and address the protective parts that did not want to take away the hope that someday she'd get what she needed from her father, and we could also use her Strong and Resourced parts to nurture, reassure, and comfort the Little Girl.

6. **Can help to deal with blocked processing.** Especially the **Protective parts** block the processing by **distracting or numbing**. We work with that in an EMDR session in Conference Room by talking to those parts. We identify which part is blocking, what that part's concerns are, and we support how hard they worked, how that helped them survive, but how that also resulted in not being able to heal. We ask them if they would

## Jane Laskey, LICSW - The Effective Use of the Conference Room - 10/10/2013

be willing to step aside for a few minutes to allow the work to be done for the purpose of healing. I find myself often saying to the Protective Parts that healing can happen when previous avoided affect can be allowed to be felt. I will give you an case example of dealing with a Protective Part when doing EMDR in Conference Room in my case example below.

One note about how I've been using **bilateral stimulation** when doing Conference Room and when doing EMDR in Conference Room. I usually do have the clients hold the theratappers most of the time when doing Conference Room. There are times I don't use the theratappers doing Conference Room, when I am working with a more disturbed or fragile client and I need to be careful about not stirring up too much too soon. When I start doing EMDR in the Conference Room, I usually put on the theratappers when I have them put the target scene up on the screen for EMDR processing in Conference Room, and often ask them to take down the scene, I turn off the theratappers, and check in, asking them what they are getting. Sometimes different parts are getting different things, and we look at all of it.

### Case Example

I started working with this man, whom I will call Bill only about a year ago, at the time in my practice when I was getting more used to integrating EMDR and Conference Room. I think that Bill's case illustrates **having a Protector that needs to be worked with** during the EMDR processing to stop the blocking, and also how **more resourced parts help him stay within the window of tolerance** during an EMDR session, and give him needed comfort and reassurance.

Bill is in his late 40s, is married with two teenage children, and he and his wife both work professional jobs. Bill was referred to me by his psychiatrist, for treatment of childhood traumas and resulting feelings that he is disconnected from people and from life, unable to be close to anyone or to truly enjoy anything, feeling that he is fake and that others can see underneath his facade that there is something wrong with him. He kept himself very busy to keep from thinking and feeling. He'd had a number of previous attempts at therapy, including some EMDR, but nothing had helped alleviate these core issues.

A little about his history: He was the youngest of 5, and he frequently witnessed throughout his childhood his alcoholic father beating up his passive mother or violently fighting with his older siblings who would try to protect their mother. Bill was also sexually abused by an older neighborhood boy for a period of 2 or 3 years, from ages 5-8. He carried a tremendous amount of guilt and shame about the sexual abuse, seeing himself as bad, dirty and guilty. In his adult life, when aroused sexually, he would feel afraid and he would numb that feeling because the "Dirty Child Part" of him that carried the guilt and shame about the sexual abuse would be triggered. Bill also would shut himself down when he was beginning to enjoy anything or feel a connection with anyone. That was to keep his scared and confused vulnerable little boy part from being triggered to feel as he did as a child, for example, when his father would go into rages at times Bill was trying to have fun, like when he was jumping on the bed and interrupting his father trying to sleep off a hangover.

## Jane Laskey, LICSW - The Effective Use of the Conference Room - 10/10/2013

When we first started meeting, Bill was repeatedly explaining this experience of feeling fake, and not able to be happy. I began by setting up a Conference Room with him early in the treatment, because of his **history of complex PTSD** and because I could see how he numbed himself, was **focused on self-blame** about not being "normal" and being fake.

Bill brought in a wonderful black and white framed photo of himself from about age 5, which I put out on my desk for every session, and often make reference to, in order to clarify how his Vulnerable Little Boy feels. In this photo, he is dressed in an old-fashioned snowsuit, is holding onto the handle of a little red wagon and has a bat in his hand, but is looking anxiously at the door, ignoring his toys, seeming to worry about what is going on inside the house, not paying attention to his toys or his wish to play and have fun. Referring to this photo has been a way for him to develop understanding and compassion for the vulnerable Little Boy, who looks too worried about what is going on inside the house to enjoy his toys. I also use that photo to express my caring and compassion for that little boy, and I think he that does feel that holding of his Vulnerable Little Boy part, which is what that part needs.

We began doing **EMDR in Conference Room on the sexual abuse**, but the violence in the family, which I learned occurred frequently, kept coming up and needed to be processed first. We put aside the sexual abuse target, and will return to that after the violence is processed. The target scene we are working on now is witnessing at age 5 his father dragging his mother across the floor by her hair and punching her.

One of Bill's most dominant parts is called "**the Sabotager**". The Sabotager is a **Protector part** that doesn't want to feel anything. He is also partly **an internalized neglecting parent part**, who feels he's not good enough, that life should not be enjoyable, and that he doesn't deserve anything good. We do a lot of work in Conference Room with the Sabotager, as this part works hard to keep him from feeling anything or enjoying anything. When processing the witnessing of the violence, I often know the Sabotager has come in when my client says that it wasn't so bad, or when Bill is distracted to think about something else, like what he was planning on doing that afternoon.

I talk to his Sabotager about how he is trying to protect Bill from the feelings that would come from processing the family violence, and ask if he'd be willing to step aside for a moment to allow the healing work to happen. The Sabotager agrees to do that, and we go back to EMDR processing.

One time we agreed that the Sabotager's **new role could be to keep Bill in the window of tolerance**. We went back to processing, and then the Vulnerable Little Boy part noticed feelings he was having in his body as he looked at the target picture in the Conference Room: knots in his stomach and tingling numbness in his feet. The Sabotager came in again, saying that he can never feel anything and is completely numb. I identified the Sabotager again, asked him to step aside, and brought his attention back to what his Vulnerable Little Boy was **feeling somatically**: the knots in his stomach and the tingling in his feet. That time, I used a **somatic interweave** with Bill, asking what his tingling feet wanted to do. He said that they wanted to run out of the room, and I had him do that in slow motion to move the processing along, which did help him feel and process more.

## Jane Laskey, LICSW - The Effective Use of the Conference Room - 10/10/2013

So far during the EMDR processing in Conference Room, the **dominant part that reacts emotionally to the target** has been the **Vulnerable Little Boy**, who feels very scared and very sad. I have at times asked whether the **Angry Part** is there, and what the Angry Part is feeling and thinking when he looks at the target scene on the screen. One time, Bill answered that the Angry part is afraid of abandonment, and thinks that he was the glue between his parents and couldn't let the Angry part feel mad at them. He also witnessed his siblings beaten for standing up to their father, and was needing to not feel his anger so that he wouldn't also be at risk for the violence to be directed at him. Bill said one time: "**I'd rather accept my parents as they are than lose them.**" That is a Protective Part coming in to keep the Angry part from feeling the anger and risking losing the connection to his parents. We need to keep working with his Angry and Protective parts on this difficult issue around his anger.

At times when the Vulnerable Little Boy has felt when watching the target scene that he doesn't matter, he remembered that he felt that way all the time as a child. I have asked his **Caring Part** if he can help the Vulnerable Little Boy with that thought he has that he doesn't matter, and that part has **reassured** the Vulnerable Little Boy, that he was just a little boy and that he needed love and attention as all little boys do. One time the Caring Part held the Little Boy, and that helped too.

One time in the Conference Room we used the analogy of the **Sabotager keeping him protected by being stuck on top of an iceberg**, with life happening under the ice, which I thought was a great **description of dissociation**. He said that looking at targets on the screen and doing EMDR was using a **periscope** to look under the ice.

Though we are still far from integration and healing from this horrific childhood, I do see evidence of changes happening in his outside life as a result of the work we have done so far. We have talked a lot about how he can work on being **mindful and present**, and he tells me about moments during his week when he was able to work on mindfulness, and was able to feel something, physically or emotionally, such as enjoying moments when he is taking a shower or swimming, or laughing and having fun with one of his teenage sons exploring a deserted camp.

His **Sabotager often begins our sessions**, even now, saying that he isn't curable and that he will never be able to be present, "real", happy, or connected to people. At those times, I remind him about those moments in our session when he has been in touch with physical and emotional feelings, and moments in his current life when he has told me about having some fun or feeling some connection. I think he is trying to get me to join the Sabotager in being hopeless and seeing himself as stuck, and I hold for now the hope and patience, that this takes time, and that we are on this journey together.

This work is ongoing, and I do feel hopeful that doing the EMDR in Conference room will help him process and heal from his childhood trauma and be able to become more and more present, "real", and connected.