

Benefits of Blending EMDR & IFS

A client's explanation of combining EMDR therapy with Internal Family Systems IFS therapy.

By Dr Annabel McGoldrick

In *Mind Over Murder*, the gripping unconventional thriller by Jake Lynch and Annabel McGoldrick (Next Chapter, 2025), the heroine, Janna Rose practises a form of therapy that combines two powerful approaches: EMDR and IFS. So, what are they; what benefits do they offer, and why combine them?

Eye Movement Desensitization and Reprocessing (EMDR) is a psychotherapy technique that helps people to process and heal from traumatic memories and other distressing life experiences. EMDR therapy is based on the idea that traumatic memories can become 'stuck' in the brain, leading to emotional and psychological difficulties¹.

EMDR combines side-to-side eye movements (of bilateral tapping, or sounds) with talk therapy in a structured format. The goal is to change how the memory is stored in the brain. EMDR can help people feel empowered by experiences that once debased them. Clients can transform the meaning of painful events on an emotional level. EMDR is considered an evidence-based treatment. Clinical trials have shown that EMDR is effective and can help people heal faster than other methods. EMDR therapy sessions can be conducted on consecutive days. Processing a specific memory is usually completed within one to three sessions. EMDR therapy uses an eight-phase approach, including history-taking, preparing the client, assessing the target memory, and evaluating treatment results.

Internal Family Systems (IFS) therapy is a type of talk therapy that helps people understand and heal themselves by identifying and working with their different parts. The goal is to restore balance and harmony by healing wounded parts and changing the dynamics between the parts.

IFS therapy helps people identify the different parts of their mind, or 'internal family'. These parts include wounded parts, parts that protect the person, and the core Self. IFS therapy helps people understand how the parts interact with each other and with the core Self and find ways to change the way the system works. IFS therapy helps people change the dynamics that create discord between the parts and the core Self. IFS therapy also helps people heal wounded parts and restore mental balance and harmony. Psychologist Richard Schwartz, who created IFS therapy, observed patterns in how people described their inner lives and began to conceive of the mind as a family².

There is evidence to show that each therapy on its own can be highly effective in helping clients to achieve their goals. I'll explore this further below when I discuss their similarities, but first let me reflect on some of the problems of each therapy when applied singly.

Sticking points of each therapy

Firstly, EMDR can be experienced by clients as a cold, mechanical treatment that pathologizes their issues even to the extent that some people are judged to be unsuitable for EMDR. Yes, EMDR can be a very powerful therapy that goes very quickly to the trauma networks in the brain. I have worked with many people who found this experience very frightening so never returned to complete their treatment.

IFS on the other hand is a more relational approach that, instead of pathologizing clients, talks about different parts of the psyche who are trying to help and protect the person. The starting point for IFS is

¹ Google AI definition of EMDR therapy

² Google AI definition of IFS therapy

to see multiplicity as normal. We each have different parts who do different jobs to help us: as a parent, a teacher, a violin player, a gardener. Only when these parts are very wounded do they take on extreme behaviours. In the beginning such extreme behaviours, such as dissociation from childhood trauma, are a helpful way to survive. I saw one client who was told she wasn't suitable for EMDR because she dissociates automatically, in her 30's. the EMDR therapist started throwing a ball at her, a technique to help her come into the present. But this made things worse: she froze because she felt judged and under attack. So, using IFS with her was a way of making her inner world feel safer. We're exploring how these parts interact, appreciating how they're trying to help even though the childhood trauma is long over. IFS brings a softness, a curiosity and compassion to welcoming parts so they can first feel safe in the present.

The second issue is that EMDR that can be unrelational: in that the therapist is doing something, a powerful treatment, *to* the client to heal them. Personally, I believe this is partly to do with the way EMDR is taught – over a few brief weekends. Many therapists I supervise straight out of this brief training are scared to use this amazing power tool called EMDR because they've been warned about all the ways EMDR can harm a client. And it can, in inexperienced hands. Personally, I'd just like to extend the training to give new therapists more confidence. If you consider that an introductory IFS training (Level 1) is 100 hours versus an EMDR Basic training of 24 hours you might get my point. One of the main focuses of an IFS training is therapists paying attention to their own parts. This is only mentioned in advanced books and training for EMDR therapists. This is one of the reasons why the EMDR Insight IFS informed EMDR (IFSiEMDR) is 48 hours for therapists who're already trained in basic EMDR. This is because we spend a lot of time helping therapist discover, love and heal with own wounded parts.

Thirdly, EMDR can easily get stuck. The processing can become blocked or appear to be looping – literally going round in circles. Yes, the basic training offers some tools to unblock but what if once again this is just protector parts doing their job, protecting the client from big emotions? Rather than push them out of the way (as some clients experience in EMDR), how about switching to an IFS approach of welcoming them, getting curious about why they're there, what their concerns are? Trainees tell me it just feels so much kinder, more respectful and safer working this way. As one IFSiEMDR participant told me: "when I did EMDR it felt like I was entering a darkened room, I didn't know who was there, with IFS it's like switching the lights on, so I know who is there". Whether that's angry people, scared little terrified people, all are welcome. This means IFSiEMDR is never stuck, looping, or blocked processing because "what's in the way, *is* the way". The therapist using this combined approach can work *with* the client to enable their healing.

There are also some criticisms of IFS. Some say that IFS oversimplifies the human mind by breaking it down into parts. The focus in IFS on internal conflict may not always capture the full picture of mental health conditions. IFS can become too talky and take a long time.

These are all reasons why the potential of each approach can best be realised by combining them in a way that's right for each client.

There is almost invariably a problem with any pure therapy applied rigidly because human beings are all different, we don't fit into neat boxes and categories. So even using IFSiEMDR I often draw on other therapies to create an individual therapy for an individual client. Firstly, I consider IFSiEMDR to be more of a continuum between the two therapies, where some sessions are more 'IFS-y'; whilst others are more 'EMDR-y' depending on what that client needs that day.

Secondly in finding this blend of these two techniques I see therapy as a partnership, a team effort. Not me the expert doing something to the client, but us together on an adventure inside their brain, with their parts. Many will have enjoyed the Pixar movies *Inside Out 1 & 2*, where we witness the parts (joy, anger, fear, sadness & disgust) inside Riley as a child, then Riley as a teenager who meets new parts like

anxiety, embarrassment and ennui. I have to say, my parts love that sense of play and adventure in getting to know a client's parts, turning on the lights to see who's there.

Let me just extend a few lines drawing out how similar each of these therapies are.

Similarities with each therapy

Firstly, both are described as memory reconsolidation therapies. That mean they both conceive of the brain as having the capacity to heal, a little bit like if you cut your finger it will heal the cut. But if the cut is deep you might need stitches. That's how I see myself as an IFSiEMDR therapist, like the nurse at A&E who sewed up my little finger when I nearly snipped the end off with my shiny new very sharp Japanese secateurs, whilst pruning the roses.

Yes, trauma is an emotional response to extremely distressing experiences, which overwhelm our ability to cope. In ancient Greece, the term trauma was used to describe a physical injury, but today it's more commonly used to refer to emotional wounds. So an IFSiEMDR therapist is like the nurse stitching the wound, or the doctor who once had to pin another one of my fingers (yes I have a lot of accidents!) when I got stood on by a horse and snapped the bone in two. That means some wounds are so big, the body can't heal them alone, without outside help.

So my job as an IFSiEMDR therapist is to activate the body's own healing mechanism. A helpful concept here is 'neuroplasticity'. In psychology, neuroplasticity is the brain's ability to change and adapt its structure and function in response to experiences and stimuli. This process can involve structural changes to the brain, when neurons form new connections. There are also functional changes when the brain's functions move from one part of the brain to another. This is similar to reorganization, when the brain's neural connections can rewire themselves to adapt to new situations³. In neural network terms, if the traditional CBT (Cognitive Behavioural Therapy) builds new roads alongside the old roads (neural networks), EMDR then digs up the old road to put in a new motorway. IFS ensures the exits and roundabouts point in helpful directions.

How do these therapies work, in the same neural network terms? Memory reconsolidation according to Bruce Ecker ([ref](#)) has the following four steps so the memory is firstly **Accessed** – not just by talking but emotionally reactivating the memory as if it was happening now. This is the second step: **reactivation** of the neural networks associated with the trauma, which many clients keep tightly closed. Thirdly, the therapist helps the client find a **mismatch**. This means finding information or an experience in the present that doesn't match what happens at the trauma time. That may mean telling the child the perpetrator is dead now, or showing the child their happy safe adult life, confirming that trauma is over. Also, what can be lovely for child parts frozen and stuck in traumas is when the wise adult self says to the little child being abused in the memory: "if I could be the parent you didn't have, what do you need me to do?". This bring presence of warmth, love, compassion that wasn't there at the time. This naturally leads onto the fourth step of **erasure**, allowing the uncomfortable emotions and beliefs to be metabolised, dissolved with bilateral stimulation (eye-movement or bilateral sounds or tapping) in EMDR and/or an unburdening ceremony in IFS. Where the distress is released to the air, water, fire, or earth in any kind of ceremony that feels right for the client and their parts. A therapist with both mechanisms at their disposal can combine them to enable their full effect, in a way suitable for each client.

While both IFS and EMDR believe in the healing energy of the client, each one gives this a different name. In EMDR, this is called the Adaptive Information Processing model or AIP, whereas in IFS this healing energy is called Self energy. The AIP model is a theory that explains how the brain stores memories differently for normal and traumatic events. It suggests that trauma is stored in the brain's neural network, and that maladaptive memories can make it difficult to process information rationally.

³ Google AI definition of neuroplasticity

So, healing comes from linking up these two divided networks, bringing in adaptive information to bear on a mismatch and then erasing maladaptive information. It's a great theory when it works but it so often doesn't automatically with BLS.

IFS has a more optimistic, relational and less pathologizing concept of healing that comes from the Self, the core essence of the person, the soul perhaps that is never damaged by trauma. The Self has the qualities of the eight C's: compassion, curiosity, connectedness, clarity, courage, calm, creativity and confidence. Plus, the five P's of: patience, presence, perseverance, perspective and playfulness. And IFSiEMDR therapists are encouraged to also find the 3 A's: attunement, acceptance and appreciation. To me this is so much clearer a map for the very energy we're wanting to activate in both the therapist and the client to facilitate healing.

It's worth mentioning that both IFS and EMDR therapies draw on hypnotic techniques and language to access the client's unconscious. IFSiEMDR therapists make sure this is done safely with permission: permission that isn't always sought in pure EMDR, which is why it can feel unsafe for some people.

Essence of IFSiEMDR: Energy, Discovery, Harmonious integration

The way EMDR Insight teaches IFSiEMDR is to bring the essence of IFS to each of the eight phases of EMDR. This can be summarised as Energy, Discovery, Harmonious integration.

EMDR's eight phases, we mentioned earlier can be experienced as mechanical when a client is pushed through each step in a linear way: *history taking; preparation; assessment; desensitization; installation; body scan; closure and reassessment*.

I've met clients who were traumatised by the first step, history taking, because it was done in such detail. One I'm thinking of had a panic attack that went on for weeks. But a therapist who is using IFSiEMDR would, with the energy of kindness, curiosity and compassion, discover which parts, which protectors were activated by the history taking. The energy of IFSiEMDR is much gentler than standard EMDR. Firstly, it asks permission to go inside and doesn't assume that's OK for the client's parts. An IFSiEMDR therapist might spend a lot longer in EMDR preparation discovering which parts are there, helping the client get to know them.

Just at this early stage it's common to parts to say how happy they are to be heard. Rather than standard EMDR just pushing past them to get to the earliest trauma. One of the goals of IFS is an inner harmony between the parts, thereby changing that inner dynamic of the system. Also, IFS aims to bring Self leadership inside (remember those qualities of Self, discussed above 8 C's, 5Ps, 3As). For many clients, the Self becomes an inner parent and attachment figure. Both IFS and EMDR want to heal exiles, those neural closed envelopes of pain that keep people trapped in old stuck patterns. And both therapies have a global goal of world peace. EMDR says when the global trauma bank is healed we can find inner and outer peace, and IFS says when people are Self led inside they can change their relationship with the outside world. I've met a number of people whose inner healing has changed their marriage.

I hope you understand more now why we at EMDR Insight see EMDR and IFS as such good partners in a therapy marriage. They are little bit like two halves of the same brain, the right hemisphere and the left, performing such different, yet complementary roles. EMDR, like the left hemisphere of the brain, is more about naming, summarising, concerned with the detail, in a detached way. IFS is more like the right hemisphere of the brain, that sees the big picture of the whole system. It is more emotional, expressive and concerned about bringing harmony, to the whole system.