

Manager and Firefighter Polarizations **An Internal Family Systems (IFS) View of an Addictive Cycle***

*“Whoever fights monsters should see to it that in the process
he does not become a monster.”*

- Friedrich Nietzsche

Through the lens of the Internal Family Systems model, I describe addiction not as a particular addictive part, but as a process resulting from a systemic, repetitive inner power struggle or polarity occurring between two extremely oppositional aspects or parts of a person’s personality. The primary intention of each “side” of the polarity is to protect the person from the potential threat of emotional overload. This power struggle is fueled by the person’s overwhelming fear of their perceived weakness, vulnerabilities and emotional pain becoming fully exposed. This article details these dynamics and offers options for intervention and healing using the model of Internal Family Systems as a blueprint for Intervention.

The inner system of someone suffering from addictive, compulsive or chronically risk-taking behavior is often composed of many parts or personality characteristics that are quite similar to those exhibited in a ‘non-addicted’ person. However, what creates the addictive process is that the parts carry out their protective roles in a far more intense, extreme or compulsive manner.

In the Internal Family Systems (IFS) model of psychotherapy, every person’s personality is conceived as composed of three major categories: firefighters, managers and exiles, each with a particular role or function.

Managers are highly valued, socially sanctioned parts in the inner system whose primary role is to uphold operations and maintain a high level of functioning, primarily through attempts to control both the inner and external environment. Managers are proactive, future-oriented and strategic. They typically are intent upon preventing any and all activation of exiled feelings of vulnerability through responsible, competent and thoughtful accomplishment of everyday tasks and obligations, i.e., they “always try to do the right thing.”

Common manager behaviors include: logical or rational thinking, analyzing, caretaking, self-sacrificing, perfectionism, worrying, over-responsibility, people-pleasing, approval-seeking, conflict avoidance, caution, planning, pessimism, over-working, intellectualizing, ambitious striving, self-criticism, advice-giving, reassuring, sympathizing and judging or moralizing.

*currently I use the term *addictive process*

Firefighters is the term employed in the IFS model to describe the parts of a person's inner system that are characterized by behavior that is reactive, impulsive, risk-taking, or dissociative and generally focused on living "in the moment." Firefighter parts encourage behaviors designed to "put out emotional fires," that is, to give immediate distraction, comfort, relief or sense of disassociation from the type of vulnerable, fragile feelings that many people will at times find intolerable to acknowledge or to bear, as when someone is "burning with shame." The firefighters role in the system is to prevent the possibility of the fragile, emotionally activating, repressed emotions known as the exiles from completely flooding the inner system and rendering the person dysfunctional.

The scope of firefighter activity ranges from mildly distracting behaviors such as mindless lounging in front of the television, to much more debilitating activities like abusive rage or chronic self-destructive compulsions such as cutting or excessive alcohol abuse. Common and generally socially acceptable firefighter behavior includes: television, web-surfing, computer games, shopping, overeating, caffeine, cigarettes, a few drinks, sleeping, sex, dieting, prescription drugs, exercising, flirting, impulsivity, telephoning, lying, anger, sarcasm, gambling, car-racing, daydreaming and procrastination.

Less socially acceptable, less widespread, and extreme firefighters can include: bingeing and purging, anorexia, suicidal ideation and suicide attempts, stealing, shop-lifting, panic-attacks, running away, sexual acting out or sexual compulsivity. Also it includes overuse of alcohol, prescription drugs and illegal drugs, rage, emotional abuse, domestic and street violence, physical and sexual abuse of children, sexual assault, and murder.

Exiles, the parts of the personality that the managers and firefighters are protecting, are fragile, vulnerable parts of the psyche that have been chronically ignored and relegated to the emotional back burners of a person's everyday reality. Exiles generally carry the painful memories and stubbornly held beliefs generated from early, difficult or tragic life events or from less-than-nurturing or abusive past experiences that a person never had the opportunity to explore safely or integrate coherently into their sense of identity. They are exiled, or removed from a person's full, conscious awareness due to their perceived threat to a person's overall functioning.

The events that create these parts may range in seriousness from early situations of loneliness or unimportance related to family changes after a divorce, to chronic, abusive victimization of a child by a parent or other family member. The parts that hold these particular memories often have formed beliefs about their character that feel core to the person's sense of identity as in: "No one really loves me; I am a worthless; I will never be good enough; or I am bad, I am ashamed of who I am."

No matter how rational one's adult perspective is about these memories and experiences, if left unexplored and unhealed, these sensitive parts continue to form a threat to the equilibrium of

the system because of the profound feelings of weakness and fragility lying within this buried reservoir of fear, loneliness, self-loathing and despair.

The proactive manager parts and reactive firefighter parts of a person's inner system often carry a life-long fear that fully acknowledging these exiled, vulnerable emotions will create an overload in the system that renders the person completely dysfunctional. This polarity forms the protective "front line" of defense in the battle to maintain inner homeostasis. Clients often express the fear that fully acknowledging these exiled parts could truly threaten their survival, i.e., the perception is "it would kill me" if they had to deal with that situation from their past.

This intense fear of overwhelm can result in a compulsive, polarized battle for control between these two major types of protectors that steadfastly prevent acknowledgement and healing of the exiled experiences and eventually form a chronic cycling of parts that is addictive in nature.

A basic assumption of classic systems theory is that all systems wish to create and maintain homeostasis, requiring that for every action there is an opposite reaction of equal force. This is also considered a basic assumption of the IFS model regarding the inner system, or the psyche. Therefore, when a firefighter behavior becomes chronic and extreme, then typically manager parts become equally forceful in their attempt to recreate inner balance. This creates a chronic polarization.

A polarization occurs when two teams of parts that seemingly operate at cross-purposes develop an on-going, escalating power struggle while attempting to control a behavior, outcome, or decision. This escalated inner conflict is typically between parts that are protecting the system with vastly different approaches. Since virtually all manager activities are considered socially acceptable and oftentimes even socially desirable behaviors, even the external environment of the family, work and the culture, supports and encourages these behaviors, as in, "if I work hard, I will get ahead, or "if I am nice to people, they will like me."

This is in contrast to many of the firefighter activities, whose primarily impulsive, risk-taking, unsanctioned status tends to generate an oppositional reaction and inner and external attempts to hide or limit the behavior and to judge it as wrong or bad. This extreme polarization results in persistent inner conflict and dissonance, as each side battles to determine which one will protect the person's functioning and maintain inner stability.

This power struggle can ultimately escalate into a compulsive and self-damaging cycle of addictive processes: a state of unremitting internal stress that includes compulsive, repetitive firefighter behaviors acting with characteristic chaotic and impulsive risk-taking combined with managers that are extremely judgmental, fueling intense, inner self-criticism or self-loathing. This reactive thinking on both sides of the conflict results in potentially damaging, out of control activity and impulsive decision-making that has highly negative implications for the person's functioning. It also prevents the opportunity for any real change in behavior or relief from the

frequent emotional upheaval and compulsions, since the emotionally loaded, exiled experiences are not able to be safely examined.

Generally, in an addictive cycle, the same protective parts interact over and over again, often without ever acknowledging the power of the sensitive, fragile emotions that are underlying and fueling these oppositional interactions: those parts are exiled.

Some examples of various protective firefighter parts that are presented frequently in clinical situations include chronic substance use, eating disorders, chronic sexually acting out, frequent cutting behaviors or chronic use of internet pornography. In this model we might say the client has a part that encourages them to get intoxicated, cut their skin, have affairs, binge-eat or view pornographic websites. We might describe this person as someone who has become firefighter-led, in that the parts of them that engage in the behavior are prevailing frequently as a dominant decision-maker in their system.

Generally, the person will report that they have a long history of attempts to control or limit this target behavior, but have never been successful in eliminating it altogether. They will report trying many times, but not being able to persist in their resolve to change. Another frequent clinical scenario is when an intimate partner or family member has requested a change in the client's behavior, or the client is at risk of losing a relationship due to the consequences of the acting out. Common examples are parents who bring in a daughter with an eating disorder, or a partner relating stress over drinking or unfaithfulness that is affecting a marriage or partnership.

Paul presents to his therapist as a charming, quick-witted, highly educated professional holding a well-respected position in his corporation. He was referred for individual therapy after his wife's discovery of his on-going relationship with another woman. Paul readily acknowledged the affair as well as disclosing having other affairs throughout his twenty-year marriage and also describes drinking alcohol very regularly. While denying that womanizing or drinking alcohol was as serious a problem as his wife felt it to be, he stated that occasionally the fact that he had clandestine partners and binge-drank did in fact unsettle him and that he would like to at least understand why he was not always 'in control.'

Firefighter parts are single-minded, impulsive, and narcissistic. During the acting out of the target behavior the person appears to be oblivious to others' needs, focused solely on their desire to act out, and ignoring any potential consequences or danger to themselves. When led by firefighters they also come across as insensitive or oblivious to any pain or damage caused by this behavior. This is essentially an accurate portrait: this is how firefighter parts operate. When the part is dominating the person's decision-making the client is determined to drink (or overeat, cut their skin, use drugs or gamble.) When these parts are in control of the system, it is "act now and think later-if ever."

Firefighter parts often form in a cluster, essentially creating a team of acting out behaviors. Angry, defensive outbursts, use of other controlled substances, overspending and sleeping often are chronic accompaniments to the target behavior. This all contributes to the overall protective goal of diverting or disassociating the person from any awareness of feeling overwhelmed by emotional pain.

Clients typically report how engaging in this behavior is effective, at least in the short-term. Clients will state: while cutting their skin they feel “more in control,” or someone heavily drinking states they feel “relaxed and happy” or the client’s new relationship or sexual encounter has “made me feel good again.” Or the client merely states they are able to just totally focus on the behavior itself and “forget about everything else for awhile.” If asked why they started acting out, or what their motivation is, they generally feel somewhat mystified, or vaguely reply that “they had a bad day and “just felt like it,” or even that “they just had to do it.”

While Paul reported that his marriage had frequently been conflictual and his job demanding, he felt none of it fully explained his reasons for the sexually acting out behavior that clearly he, in some ways, wished to change. He stated he periodically tried to analyze why he saw other women, but never felt he could truly understand it himself. He stated that he realized the alcohol use was occasionally problematic, but didn’t connect it to his emotional state, just to “taking the edge off.”

Initially therapy focused on helping Paul to go “inside,” that is, to meditatively focus on merely noticing his various emotions or states of mind, getting him more accustomed to focusing on his inner processes. He first found inner judges and harsh critics that were not just contemptuous of his infidelities, but of many of his decisions and motivations. He had not realized how chronic that inner diatribe was all his life. After building a relationship with those managers, he was able to focus on the target behavior, which he described as the part that wanted him to have a sexual liaison. When he was invited to ask what the intention of this part is, he got the message that part of him wanted him to feel good and to have fun. He continued to interview this part, finding out that it had been doing this for years, that it wanted to him to “get what he deserves” and that it was afraid if he stopped acting out that he would feel lonely and abandoned (exiles). He also had glimpses of very painful early childhood events from other exiles that knew about his early emotional injuries. Paul began to see that all of his parts are involved in this situation, not just one ‘bad part,’ and all need to be related to and helped.

This model allows the therapist and client to accurately track the polarizations that occur so chronically and differentiate the parts so they can have access to self. Generally, before this tracking occurs, the exiles holding shame, self-loathing or feelings of failure that can trigger the need for firefighting remain quietly exiled during a person’s daily functioning and firmly exiled from the person’s awareness during the ‘using’ period. What the client is more aware of is that some hours later, when the acting out has exhausted itself, a very different activity begins and an equal and opposite force inner begins as the manager’s backlash escalates the internal polarization.

In their desperate effort to create the homeostasis needed after this extreme acting out, managers begin their own vigorous campaign to combat and control the firefighters. These parts initiate an inner diatribe of forceful disregard and shaming, saying they “hate” this out-of-control behavior. The blaming critics, analyzers and other judgmental managers make an inner comeback that is equally compelling, their message usually harshly critical, moralistic and punitive or contemptuous. They are fighting the acting out fires with emotionally abusive fire.

When asked how he felt toward this womanizing part, Paul often responded that he hated it, as it had always caused him trouble in his relationships, particularly in his marriage. Now Paul was guided to appreciate that was not himself, but a critic and he was invited to notice the chronic conflict he carried around with him, as these two parts, one acting out and one deeply judgmental, with their polar opposite point of view, both attempt to control his choices. Focusing on the judgmental part that hated the sexual acting out, Paul questioned its intentions. It responded, “What is wrong with you, you always go back to this! Why did you screw up like this again? If you would just go home after work like you are supposed to do, this never would have happened.”

Further questioning of the part led Paul to understand that this harsh, critical part just wanted Paul to be a good man. It was afraid if it didn’t stop berating the firefighters, the acting out would get much worse.

Eventually the cyclical pattern of the two teams, one made up of high-functioning, moralistic, judgmental manager parts, versus the team of firefighter parts engaged in risk-taking sexual behavior, chronic cover-ups, drinking and avoidance of accountability begins to emerge more clearly.

When extreme, the language and attitude of managers in a firefighter-led client often qualifies as emotionally abusive, just as the target behavior the firefighters is engaged in is behavior that is generally self-destructive or abusive to others. Eventually these critical manager parts combine with other managers, such as a person’s perfectionist part, and task-master or approval-seeking parts and the client feels the desire and resolve “to get back on track.” A flurry of redeeming activities sets in as the person gets to work early, cleans the house, finishes schoolwork or engages in other worthwhile tasks and projects.

Thus, the manager messages appear to work. It looks like the firefighters are responding and have stepped back, the person engages in more productive activities and also may begin to feel more in control of their behavior and decision-making.

However, although the person seems to be high-functioning again, this is temporary. When the client and therapist track the inner process, it turns out that the inner contempt and rejection of the manager backlash is as ineffective in maintaining a high-functioning system as the firefighter’s abusive, out of control behaviors. The intention of firefighters is to defend the fragile,

vulnerable exiles in the system against the possibility of destabilization and overwhelm, they must defend the 'using' and reject or placate the internal manager attack.

In order to further protect the fragile parts, the acting out parts take a very defensive, oppositional inner position regarding the judgment and blame the managers are attempting to lay at their feet during the bout of backlash.

Firefighter parts refute what the managers are suggesting and generally excuse their behavior and defend their impulsive choices, declaring they "deserved" to have this time off, they "couldn't help themselves" or by throwing the blame back upon extreme positions manager parts have taken as in "I can't be perfect all the time, or "when is it my turn?" or just "You push me so hard and sometimes I just have to let go!"

Internally, the basic response to the manager backlash is that the firefighters consider themselves undeserving of the manager's harsh attempts to judge them and may further escalate the internal conflict by proclaiming their intention to rebel and "do what they want." The firefighters reject outright any attempt to control or limit future acting out behavior. A polarization is now re-created between these two camps as they escalate the debate over their diametrically opposed manner of protecting the person from feeling vulnerable.

Unfortunately, it is the exiles, who are already shell-shocked, vulnerable and fragile, who actually respond to the manager's angry diatribe, absorbing every word. After listening to his critic, Paul would experience a sense of shame and feelings of agreement with this view of his behavior. In response to the manager's blaming accusations he would feel a deep self-loathing, "I am a total failure. What is wrong with me? This is hopeless. I'm never going to get better. I give up."

New harsh, negative internal beliefs are added to the building reservoir of shame or worthlessness. Gradually the person begins to feel worse than they did before the whole acting out events were initiated.

At this point the exiles have flooded the system, giving the person an overwhelming sense of worthlessness, shame and self-revulsion. When this happens the person's core sense of themselves encompasses the deeply held beliefs of these unhealed exiles. The client believes in these moments they are "a loser," or a "hopeless drunk," or "they really are crazy" and "have really done it this time" and "ruined their lives." This despair is often accompanied by feelings of isolation and hopelessness about the possibility of change and redemption.

This does inhibit the person's functioning, and the protective parts feel forced to return to their roles, resuming the cycle of and destructive, addictive behavior and harsh, self-critical Backlash.

As Paul continued in sessions working with the two teams of managers and firefighters that were escalated, he began to have a sense of the following cycle of interactions which got triggered when the acting out behavior started.

It seemed to begin with a part that was totally obsessed with seeing his girlfriend; another part engaged sexually with her with guilt-free abandon; another part lied profusely and well to his wife to cover-up his activity; later, a part felt guilty about the affair and the lying; yet another part quickly employed rage and indignation to respond to his wife's criticism that he was unavailable. The next day Paul had a part that escaped to work and felt supremely confident in his occupation; yet another part severely blamed himself for being a 'bad' person; a part promised himself he would end the affair; a manager part worked long hours to finish a work project; a vulnerable part briefly felt lonely and unappreciated when he came home and his wife was still angry; his target part sought relief from by fantasizing when he could arrange a visit with his girlfriend...

An addiction can be described as existing when such a chronic polarization and rapid cycling occurs between manager and firefighter positions that there is little or no attention ever paid to exiles and these sensitive parts are constantly re-activated by various types of extreme behavior and then promptly ignored. The person's life is dominated by unrelenting feelings of unmanageable behavior, extreme emotions and a desperate sense of unworthiness that they cannot seem to calm or dissipate.

The person has very few, if any, moments of feeling what this model describes as in Self: feelings of contentment, peace of mind, clarity about one's choices or acceptance of themselves.

In a family or couple with one firefighter-led member, often the partner or another family member embodies the manager role and this same internal polarization also develops in the external family or relationship. Whether it is in the internal or the external system, the polarized exchange often sounds like the following:

What firefighters like to say to managers:

- "I just felt like it."
- "I deserve this."
- "Try and stop me from.... eating, cutting, and drinking."
- "I don't give a ----."
- "I don't care what you think."
- "It is not my fault."

What managers like to say to firefighters:

- "Do you ever stop and think?"

- “You can’t do this anymore!”
- “You are totally out of control.”
- “You should be ashamed of yourself.”
- “You are hopeless.”
- “You will never change.”

What exiles feel:

- “I am ashamed of myself.”
- “I never do anything right.”
- “Nobody cares about me.”
- “Nothing ever changes.”
- “This is hopeless.”
- “I give up.”

Common reactive, impulsive or compulsive firefighter parts that a therapist will encounter when working with a system of polarized parts, include the target behavior and other parts that are in alliance with it and protect its on-going activation. These include:

- **Target Behavior:** part that impulsively wants to, or seeks to...drink, binge eat, have sex, mark their skin, work, exercise, surf the web, over-spend.
- **Scanner:** regularly searches for opportunities to engage in target behavior or lines up the next occasion.
- **Manipulator:** negotiates with manager or other parts to bargain for new opportunities or more time to engage in the behavior.
- **Hero:** assures a fragile exile of its desire to rescue it and by promising to engage in the target behavior soon.
- **Defender:** protects target behavior by blocking information or feedback about the effects of the target behavior from being accepted or acknowledged.
- **Projector:** protects exiles and target behavior by focusing attention away from person onto another person or other behavior.
- **Avoider:** offers distraction and /or sense of obliviousness to person, helping them ignore feedback and criticism.
- **Under-Responsible:** helps person forget promises or commitments they have made, especially ones that couldn’t get accomplished during the acting out.

Common examples of manager or pro-active parts that wish to preserve or re-establish homeostasis and the status quo or to control the image or impact of this person on other people are:

- **Critic:** constantly finds fault with behavior of other parts in the system, particularly with the target behavior.
- **Blamer/Shamer:** shows contempt for the target behavior, belittling its intentions.
- **Logical/Analyzer:** observes behavior from an intellectual, unemotional point of view.
- **Minimizer:** rationalizes or minimizes emotions expressed by the exiles, reducing their

importance.

- **Perfectionist:** attempts to achieve perfection in a wide variety of small and large tasks, and in social interactions and relationships.
- **Caretaker/Self Sacrificer:** consistently focuses attention on meeting the needs of others, i.e., people in the external family or colleagues, as opposed to the needs of one's own.
- **Enabler/Over Responsible:** often takes over or completes both the working and relational tasks of others, tasks that they in fact could accomplish themselves.
- **Achiever/Perfectionist:** consistently urges the person to do better and is seldom satisfied with the current results of any efforts.

In therapy, when a person first begins their work, they are usually unaware of these inner polarizations and almost certainly not clear how instinctively their system operates to protect them from feeling pain. Guiding them to identify their parts and using a variety of interventions to help them begin to “be with” and appreciate both sides of the inner conflict is essential. In therapy, Paul begins the process of unblending from his parts and learns to ask his parts to “step back.” He begins to create self-to-part relationships that increase his awareness of each part as merely an aspect of who he is and not the totality of his being. He learns more about their intentions for him and about what their fears are of changing their messages and activities.

Paul gradually begins to appreciate that both the “good” parts and the “bad” parts are all well-intentioned and deeply engaged in the process of protecting him. The protective managers and firefighters describe protecting him from memories and vaguely familiar feelings of despair and self-loathing that he realized he has experienced since childhood. They all carry a fear that those vulnerable feelings could overtake him and cause him to fall apart. Some fear that to re-visit any of this could “kill” him.

Paul eventually works with a part of himself that remembers a time in grade school, when he became aware of his father's long-time affair with a work colleague. Paul had always kept this secret from his mother, yet had not appreciated how the secrecy and triangulation between his parents had affected him emotionally.

Paul relates a part that recalled how later in high school when he lost a girlfriend, he was also using a lot of drugs and alcohol and experienced a long and deep depression. He felt worthless and alone and occasionally had suicidal thoughts and on-going feelings of hopelessness. He states that eventually he got himself “over it” by getting accepted to a good college, where he continued to drink, womanize and get good grades. He had vowed never to let himself get that depressed again, although he has felt at times he has to fight off fears that it could happen again at any time.

In his sessions Paul is guided to spend time with these exiled parts of himself that held memories of his childhood and adolescence, listening to their needs and helping them to unburden the old beliefs about his core sense of himself as worthless and filled with shame.

When first contacting the firefighter parts, at times they respond initially to inquiries about their roles with fears of leading a mundane existence or of always having to compromise their positions. Frequently this is related to long-term polarizations with over-responsible, critical, or self-sacrificing managers. The firefighter parts say they are protecting the client's individuality or their right to "be themselves" by "allowing" them to get angry or to act out irresponsibly.

Another frequent initial presentation is the client saying they just "don't know why they... get so angry; eat so much; started this affair." In this case these clients are blended with the manager-firefighter polarization. They have been trying, sometimes for years, to "understand," to analyze, why they are engaged in this high-risk or hurtful behavior. Assuring them that these parts actually hold these answers "inside" is initially confusing, although also offers them hope about this process that feels so out of control.

Since firefighter parts tend to hold intense energy and are often experienced as a compulsion, helping the client focus on their body sense of the part is very helpful. This newly discovered internal quiet or calm may be triggering, which can lead the firefighter to try to label all this "going in" as boring. Having lived with many intense, powerful, compulsive parts, the absence of chronic surges of adrenalin may be very unfamiliar for the client.

Manager parts often express as "mind chatter" or in other head and neck regions of the body. Separating from both clusters of these parts and observing and appreciating their interrelationship can be very helpful.

When a polarization exists in the external environment, each partner in a couple may embody one side of the conflict. A common example of this is an under-functioning alcoholic firefighter and an over-responsible, critical manager engaged in a chronic power struggle over drinking, responsibility and judgmental attitudes.

In this case it is often helpful to begin work on the manager parts. A decrease in the critical reactivity and an increase in that person's clarity and self-focus will bring self-energy to the system and reduce the extreme positions, eventually working towards the hurt and vulnerability that exists within them both.

These are all examples of the intense protection the polarizations have long exerted towards the exiles in the systems. Getting permission to work with those vulnerable parts is still the ultimate goal and source of genuine healing and internal changes.

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