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Meaning and Connection

The Practice of Spiritual Care in IFS

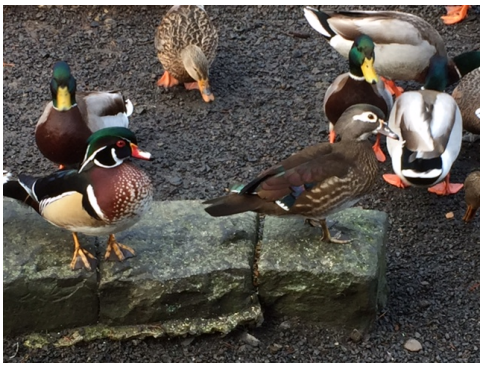
What is "spiritual care," exactly? In the context of IFS, spiritual care means respecting and supporting the spirituality of our clients. Then, what is spirituality? People define spirituality in so many contradictory ways, and some definitions of spirituality wouldn't be very compatible with IFS. I'll offer my own definition in a moment, but I want to begin by acknowledging that even talking about this subject can activate parts of ourselves that have suffered harm in the name of religion or spirituality. Does spiritual care even belong in a psychotherapeutic model like Internal Family Systems at all?

I believe that spiritual care *does* have a place in IFS, and that IFS-informed practitioners (including psychotherapists) are already practicing a kind of spiritual care just by respecting and supporting the Self and parts of their clients. I also believe that professionals in the field of spirituality tend to approach IFS differently from most therapists. A person who is actively practicing IFS with an emphasis on spirituality might have some fresh insights into the transformative potential that this wonderful model has to offer.

What sort of people qualify as spiritual care practitioners, and what sort of spirituality do they represent? Spiritual care practitioners could be almost anyone, so bringing them all together under one job description within the IFS community might seem like the set-up for a corny joke: *A rabbi, a yoga teacher, a shamanic healer and a prison chaplain walk into a bar….* Have you heard this one before? I'm guessing the punchline would have something to do with the fact that they're all getting into the spirits, but they can't agree on what to order. Their roles,

responsibilities, skills, qualifications, and areas of expertise vary wildly. Since they don't seem to have much in common, it could be challenging to figure out where these folks belong in the IFS neighborhood pub. Nevertheless, spiritual care practitioners of all kinds do share some essential characteristics, and they *do* belong—in fact, belonging is their business. Even though they may start out as individual "customers" looking for what IFS might have to offer them in their work, before you know it they're going to be standing behind the bar and serving the whole community. Spiritual care practitioners can learn and benefit from IFS, but IFS can learn and benefit from spiritual care practitioners, too.

The characters mentioned in the joke might not actually identify themselves as "spiritual care practitioners." I'm giving them this name as a way of conveying what it is that unites them, and what it is that they have to offer. Since no simple job title really describes the work that I do, I started calling myself a "spiritual care practitioner" to cover the bases. I have training and experience in pastoral services, hospice chaplaincy, dream studies and dreamwork facilitation, Buddhist end-of-life care, grief support, Quaker ministry, spiritual direction, and miscellaneous other spirituality-related areas—as well as some psychotherapy training, which could be considered spiritual, too. Sitting down at the IFS bar (there really should be such a thing somewhere), I'd just be ordering a glass of water to clear my palate after that platter of assorted *tapas*! When I work with clients now, I draw upon everything I've learned in my various roles, and it all adds up to something surprisingly clear and simple—plain, fresh water rather than a mixed drink or a heady wine. The essence of spiritual care work, even though it's done by an odd assortment of people in a wide variety of ways, comes down to something that everyone needs and everyone knows—like water, or like Self energy. (I believe we all know Self on some level, even if our parts don't consciously know that they know.)



In this essay, I want to consider what spiritual care *is* and *isn't*, and how it aligns with IFS. I'll describe some different types of spiritual care practitioners, and look at what being IFS-informed

might mean to each of them. I'll address concerns and limitations that spiritual care practitioners would need to bear in mind when integrating IFS with their work, and I'll discuss some of the contributions that professional spiritual care practitioners might make to IFS. Finally, and most significantly, I want to share a spiritual care perspective on the IFS tools that could be safely taught, learned, and practiced by non-therapists (as well as therapists), and explore how IFS-informed, non-professional spiritual care practitioners could fundamentally change the unfolding conversation about IFS in the world, IFS in our collective future.

Defining IFS-Informed Spiritual Care

When I talk about "spiritual care" or "spirituality" in an IFS context, I'm not talking about religion. A religion is a collection of culturally-based beliefs, practices, values, norms, stories, traditions and institutions (the word religion has roots that mean "tying together"). Factions or individuals within a single religion might differ about exactly what elements are essential to their faith, but there are some agreed-upon tenets that make a person a Christian or a Buddhist or a Muslim. Many people are both spiritual and religious; many (myself included) are spiritual-but-not-religious; and some people consider themselves religious but don't practice what they preach. Religion is not a bad thing, and IFS-informed spiritual care practitioners might well be religious people, but they also might *not* be.

I would define spirituality much more broadly than religion. Spirituality is a universal life force. The root of the word "spiritual" is literally "breath," and spirituality comes as naturally to us as breathing. My own understanding of how spirituality applies to IFS is pragmatic—I don't try to explain what spirituality actually *is*, but focus instead on what that universal life force *does.* We experience spirituality in our lives through a sense of *meaning* (within us) and *connection* (between us).

On some level, we all grapple with questions about what makes life meaningful; we also ponder how we are connected, where we belong. Meaning and connection are as difficult to pin down as spirit, but they are still substantial and fundamental concerns. We might not be able to describe *meaning*, perhaps confusing it with intensity or purpose, yet we can tell when something feels authentically meaning*ful* (like learning or sharing), and when it feels painfully meaning*less*. Meaning is the light inside our experiences, just like Self is the light inside each of us, and within each part of us. Meaning motivates our best intentions, and makes us feel more alive.

It's possible for meaning to seem negative—for example when someone attributes "meaning" to acts of violence, justifying these acts as righteous retribution for harm done. The true meaning lies not in the violence but in the original experience of caring about something enough to want to protect it; in IFS terms, the caring is Self-led, and the vengeance is not. A part genuinely cares, and has the good intention to be protective, but may also hold some misguided, burdensome beliefs about how to act on that intention. The part is motivated by real meaning, but then mistakenly attributes false "meaning" to actions that actually diminish life. Most experiences aren't unambiguously meaningful or meaningless, however. There's a spectrum of meaning that's related to the degree of available Self energy. When our parts have access to more Self, they are able to find their experiences more truly meaningful, and their actions will be more Self-led; when they have access to less Self energy, they will still sense the potential for meaning but may not really experience much of it, and so will strive for what they imagine to be meaningful in ways that are less Self-led.

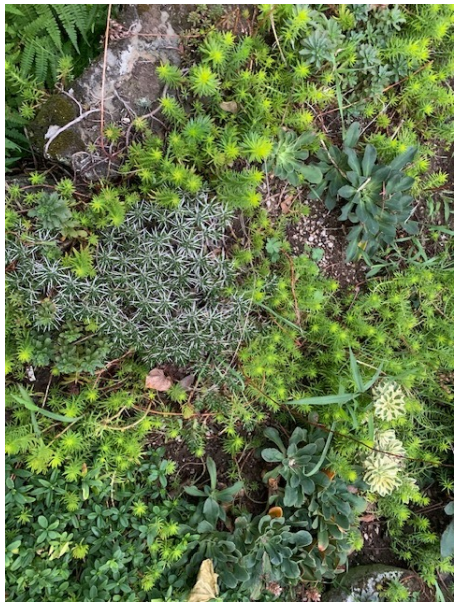
Like meaning, *connection* can be a rather vague concept, but it's easy to recognize its real presence or absence. When I am truly connected to someone or something, or when I feel utterly

disconnected, I *know* it. Obviously, parts sometimes mistake addictive, destructive attachment for authentic connection, but their good intention is still a genuine Self-led desire to be connected. Burdensome beliefs and behaviors lead to confusion about what authentic connection could be. If a relationship causes pain or shame, this is not really an experience of connectedness, but it may still be motivated by the

unrealized potential for authentic connection at the heart of the part. As with meaning, we're rarely perfectly connected or entirely disconnected; there's a spectrum of connectedness depending on how much Self energy is available for relating to others. Connection is not just about relationship, but also about belonging and participating in the world in Self-led ways.

You might notice that I'm basically defining spirituality as synonymous with Self energy. I'm suggesting that Self goes by many names, and spirituality (in the form of meaning and connection) is how we experience Self. I've been cautious about using the word "love" in my definition of spirituality, just as IFS tends to be cautious about including "love" as a Self quality, because this word has so many connotations that can be misleading. Nevertheless, love is really what we're talking about when we talk about spirituality or Self. I would say that meaning plus connection equals love.

The distinction between spirituality in general and spiritual care in particular is that spirituality is an energy or essence (*love* as a noun) and spiritual care is a practice (*love* as a verb), just as Self is an energy or essence and IFS is a practice. More specifically, spiritual care is the practice of finding meaning and connection in our experiences. We find meaning when Self energy is available to our parts, and then we are able to feel connected as that Self energy expands outward to meet the Self energy of others. Spiritual care practitioners help facilitate the process of finding meaning and connection by making Self energy more accessible, more free-flowing. Of course, that is what all IFS-informed practitioners (including therapists) do, but IFS-informed *spiritual care* practitioners would tend to emphasize different aspects of the process. While a psychotherapist might focus especially on mental health concerns (with an emphasis on parts mapping, addressing polarizations, unburdening, etc.), and a coach might work more with inner managers and their roles in our lives, a spiritual care practitioner would concentrate primarily on meaning and connection



(developing Self capacities and Self leadership, cultivating safety and trust within the system, tending relational and existential concerns).

I want to be clear that when I talk about IFS-informed spiritual care practitioners, I'm talking about people who have access to a certain amount of Self energy themselves, and therefore a level of openness to the religious affiliations or spiritual orientations of others. This includes working comfortably with those who do not define themselves as religious or spiritual at all. Spiritual care practitioners should be able to do IFS without labeling it "spiritual" unless the client considers it spiritual. Likewise, they should be able to work with people who hold beliefs very different from their own. While no IFS-informed practitioner can be expected to condone all the beliefs and behaviors of all parts or all people, *every* IFS-informed practitioner should have a capacity to bring a measure of care and respect to all parts and all people. A spiritual care practitioner who is drawn to IFS wouldn't need to be advised to avoid imposing their religion or spirituality on others, because any practitioner who needs to persuade, condemn, or exclude others wouldn't be a genuine spiritual care practitioner (by my definition), and probably wouldn't be drawn to IFS in the first place.

Different Kinds of Spiritual Care Practitioners

Here's a brief guide to the kinds of spiritual care practitioners you might encounter. Bear in mind that many actual spiritual care practitioners fit into more than one of these categories (as I do), and some belong to categories not named here. The broad term "spiritual care practitioners" will refer to both professionals and non-professionals, and might include anyone who supports others in accessing more meaning and connection. Technically, many therapists (and especially IFS-informed therapists) are spiritual care practitioners. However, I'm not including them in my list, since therapists are already card-carrying members of the IFS community and I'm specifically exploring how spiritual care practitioners who are *not* licensed therapists might make a contribution. I also want to note that words like "chaplain" and "pastor" come from the Christian tradition, though they are now often applied in other traditions as well. I use these words because they are the most familiar names in English for the roles they describe, but I am not just referring to Christian practitioners when I use them.

PROFESIONAL SPIRITUAL CARE PRACTITIONERS

Religious Professionals: Clergy, monastics, and others employed in various roles by religious communities or institutions. Some religious professionals provide types of counseling (see below), while others preach, teach, administer, or perform practical duties, but they all have roles that are directly or indirectly concerned with meaning and connection. Religious professionals might be interested in IFS as a way of better understanding themselves and their relationships with the people they serve. Depending on their specific roles, they will have different types of training and education; some are suited to doing IFS professionally with clients, and others are not.

Pastoral Counselors: Religious and/or spiritual professionals who provide care and counseling to individuals, families, or groups within a specific community. They may offer guidance, referrals, education, or even directives in order to support people in their spiritual lives and help them cope with practical problems. Pastoral counselors are usually highly trained, and their training (like that of chaplains) contains psychotherapeutic counseling components. All pastoral counselors are accountable to the organizations that employ them, and some also have accountability to certifying authorities as well. Pastoral counselors associated with a particular religion may have a vested interest in how the client/parishioner understands that religion, which could be problematic where IFS is concerned. IFS-informed pastoral counselors who are religious themselves need to be careful not to enforce conformity to religious values at the expense of genuine spiritual care, even when their clients/parishioners are likely to share their faith. This isn't always an issue, however, since not all pastoral counselors subscribe to a particular religion. For example, I worked in pastoral services at a retirement community, but was not affiliated with the religious faith of the order of Catholic nuns who employed me. This was appropriate since many of the residents I served were not affiliated with that faith either. Whether they are religious or not, pastoral counselors are likely to have an affinity for IFS, especially in areas where their specialized skills and resources can be

put to use (like working in community settings and applying the psychospiritual wisdom of IFS to everyday life challenges).

Chaplains: Those who provide spiritual care for people in difficult and potentially traumatic contexts. Chaplains are most commonly employed in hospitals, prisons, and the military. They also serve in some nursing facilities, hospices, crisis situations, and social service organizations. They listen, create a safe container for the sharing of traumatic experiences, occasionally counsel, offer grief support, pray with those who want prayer, facilitate services and ceremonies, assist with memorial planning, and advocate for those they serve. Until about 20 years ago, many chaplains were volunteers with very limited training (they did an incredible job, though they often lacked resources and supervision), but modern chaplaincy is almost exclusively professional, with stringent job requirements. Chaplains may be religiously affiliated or not. Some are Board certified and some are not, but all are accountable to their employers, and most are highly trained (their education and internship processes are comparable to those of medical professionals like doctors and registered nurses). Their extensive experience in responding to trauma, death, grief, shock, rage, despair and physical distress suggests that IFS-informed chaplains could apply their specialized skills particularly effectively with inner exiles and firefighters. While IFS typically involves an extended course of therapy delivered in an office or on-line, there is a case to be made for IFS-informed care that could be offered on-the-spot, on a short-term basis, in critical situations like those where chaplains customarily serve. Simply by bringing an awareness of parts and Self to troubled or traumatized people facing overwhelming circumstances, IFS-informed chaplains could meet a profound need that is currently not being adequately met.

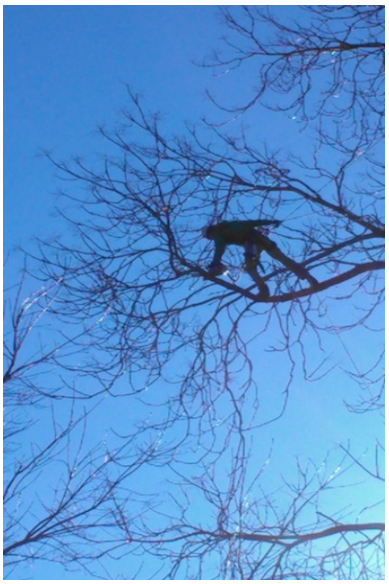
Spiritual Directors: Spiritual direction was originally defined and provided by religious professionals (monastics and clergy) within the Christian tradition, but it has been expanded to include many faith traditions, as well as many non-religious practitioners and clients. Ironically, spiritual directors do not "direct" their clients at all. Spiritual direction is a practice of deep listening, and spiritual directors (sometimes also called

"spiritual companions") cultivate a caring, attentive presence for their clients, ask open-ended questions, and sometimes offer prayer, reflection or meditation. They meet with clients on an ongoing basis, with the goal of exploring and deepening the clients' spiritual lives rather than addressing problems. Spiritual directors are trained through programs that range from two-week intensives to two-year immersive education, so their skills and qualifications can vary accordingly. They usually work freelance, though some of them come together to form collective practices and a few are employed by organizations, so their accountability and supervision depend upon their circumstances and choices. Most spiritual directors are part-time, many are retired from other professions, and some are volunteers; they tend to be dedicated to this work, often experiencing it as a calling rather than as a career. IFS-informed spiritual directors might need to be especially careful about boundary issues, since the friend-like nature of their role can be both a strength and a drawback, yet they can be truly gifted at long-term, non-directive, practitioner-client relationships, and they know how to recognize and cultivate Self energy.

Other Spiritual Care Professionals: This catch-all category refers to those who have spirituality-related jobs not affiliated with a particular religion and not directly related to counseling (like energy healers or astrologers, for example). I can't generalize about their specializations, since they represent such a diverse group. Nevertheless, the fact that their work involves facilitating meaning and connection to some degree suggests that many of them could bring IFS-informed spiritual care practices to what they do, and that their perspectives could be valuable in the IFS community.

NON-PROFESSIONAL SPIRITUAL CARE PRACTITIONERS

I'm arbitrarily designating a great many good people as "non-professional spiritual care practitioners." They might be professionals in other fields, or they might just be ordinary folks going about their daily lives. Spiritual care is being offered by people from all walks of life every day. (Even non-human creatures can be spiritual care practitioners!) Encounters with activated exiles and protectors-in-extreme-roles are commonplace, so pretty much anybody could benefit from having basic IFS skills (which are essentially spiritual) to help bring a sense of meaning and connection to those parts of ourselves and others when they come up. Some people are especially likely to need such skills in their work, particularly people who are in positions that involve direct interactions with the public: bus drivers, librarians, waiters, teachers, clerks, medical assistants… well, the list goes on and on. Although their jobs aren't supposed to be "spiritual," the people in this loosely-defined group are providing spiritual care (meaning and connection) to their customers co-workers or clients indirectly all the time. But spiritual care isn't just happening on the job, it's also in our homes, with our friends and families. I'll be exploring this in more depth later on, so for now I'll just say that we don't need to water down our IFS in order to apply it to contexts other than therapy, we just need to emphasize the *spiritual care* aspects of IFS-informed practice rather than the psychotherapeutic aspects. IFS is versatile enough to be adapted. I hope that those who fall into my loosely-defined category of non-professional spiritual care practitioners will come to feel increasingly welcome in the IFS community, because IFS is not just meaningful for an elite group of highly-educated, financially well-off professionals. Any practitioner from any kind of background could have something unique to offer IFS, so that IFS might be of the greatest possible benefit to the widest range of people.



Taking Care: Knowing Our Own Limitations, and Using Our Common Sense

Spiritual care practitioners are not therapists. It can benefit both therapists and spiritual care practitioners to learn from each other and study IFS together, since there are many IFS tools that are applicable to both—but spiritual care practitioners should not be studying IFS to learn how to do psychotherapy. There are some very good reasons for caution when it comes to the potentially problematic ways that non-therapists might practice a psychotherapeutic model like IFS. However, some of the warnings that have been expressed on this subject represent misguided or exaggerated concerns, so I'd like to address those issues first.

In the IFS community, it's sometimes assumed that non-therapists should avoid working with exiles and firefighters, and more generally that non-therapists should not be working with intense trauma at all. There is a basis for this belief, since some non-therapists (including some spiritual care practitioners) are not equipped to cope with the kinds of complicated psychological dynamics that are likely to be present when exiles and firefighters are activated. Nevertheless, there are also plenty of non-therapists (including chaplains, emergency health care workers, and other types of "first responders") whose professional roles and training make them even more likely to be familiar with trauma than the average psychotherapist. Many spiritual care practitioners regularly encounter traumatic and complicated situations in the communities they serve, and they are quite capable of supporting a client's system in the presence of activated exiles and firefighters. Still, this does not mean that they will work with those parts in exactly the same way that a psychotherapist would. Any IFS-informed practitioner should be able to work with *some* exiles and firefighters under *some* circumstances, but it's essential to define "working with" in a way that is appropriate to the experience, skills, and training of the practitioner. For any spiritual care practitioner, "working with" a part is likely to have more to do with promoting the Self-to-part relationship (unblending, validating, witnessing), and less to do with the kinds of interventions that represent more therapeutic modalities (unburdening, explicit direct access).

It's impossible to set specific guidelines for what any general category of practitioners should or should not be doing with their clients. This is true for therapists and non-therapists alike. Some psychotherapists are trained to work with trauma, others are not; some are trained to work with couples, or groups, or children, and others are not. We don't say that *all* therapists should avoid working with children, just because *some* therapists aren't qualified to do so, and we don't say that *all* therapists who are qualified to work with children should be able to work with *all* children, or that *all* therapists should approach their work in the same way. As IFS-informed practitioners, we must assess our clients' individual needs and circumstances, and if their needs do not match our training or abilities, or if their parts do not respond well to our particular approach or personality, we must refer them to someone else. Whether or not a particular client is a good fit for a particular practitioner depends upon many factors.

The most significant and valid concern about non-therapist practitioners of IFS is that there may be limited accountability, supervision or professional support for their practice because they are

not licensed in the same way that psychotherapists are licensed. Spiritual care practitioners may have gone through extensive certification processes, and they may have extensive professional accountability, but there are no consistent standards (like licensing) that can apply to all of them. This does not mean that spiritual care practitioners can't be fully qualified to practice IFS. Finally, there is one clear mandate that applies to every IFS-informed practitioner, whether you are a therapist or a non-therapist: ***Stay in your own lane.*** With IFS, it is always essential to be mindful of our personal gifts and limitations, as well as our professional training and constraints. Ultimately, we must all hold ourselves accountable.

If you are a spiritual care practitioner with a client who has serious mental health issues, you probably need to refer that client to a psychotherapist. If you are a psychotherapist and your client has existential concerns or significant grief, you may need to refer that client to someone who specializes in spiritual care. This doesn't have to be an either/or situation; it may be

appropriate for a client to continue seeing both a psychotherapist and a spiritual care practitioner, because for that client each of them fills a different need. These kinds of things need to be determined on a case-by-case basis.

Those of us who are IFS-informed spiritual care practitioners are always going to be going off-script to some extent, because the IFS script was originally written for psychotherapists. Therefore, we need to be extra careful not to forget the key elements of IFS as we explore what parts work might mean to our specific clients in our specific fields of practice. This is not a bad thing—it encourages us to cultivate our capacity to improvise and adapt in a very client-centered way.

Let's return to the IFS neighborhood pub…. When spiritual care practitioners are standing behind the bar and serving the community, they're filling some orders for things that aren't on the typical menu: orders for challah or communion wafers, for meaning and connection, for plain water and fresh air. But they are not writing a whole new menu. The basic psychotherapeutic IFS menu doesn't need rewriting; it includes good spiritual sustenance already. When non-therapists are learning the model, they're tasting and testing everything that IFS has to offer, adding a touch of their own favorite spices and developing a few new specials so that they will be able to provide for the kinds of clients they are likely to be serving. These little variations can help the basic recipes to suit the palates of more people. As they are doing this, they need to be careful that they're not serving up something that could cause harm, something that is not really IFS at all.

It's fine for an IFS-informed practitioner to vary the language used to describe what they are doing, and it's fine to focus more on unblending than on unburdening, for example; it's *not* fine to tell a client what to believe, or skip past protectors and try to unburden exiles when the client doesn't have sufficient Self energy available. In other words, good IFS is good IFS no matter

who is practicing it—and bad IFS is just *not* IFS. In my view, to be considered IFS-informed, both therapists and non-therapists must have enough Self-awareness to know when their own parts' agendas are interfering with their practice. We need to know the difference between Self-led creative cooking and a parts-led, potentially poisonous, misuse of ingredients.

What Spiritual Care Practitioners Bring To IFS

I hope it's becoming evident that spiritual care practitioners have a lot to offer IFS. They could also play a significant role as IFS continues to expand to reach more people and fill more needs in the future. Spiritual care is already a fundamental aspect of IFS, since the characteristic qualities of Self bring more meaning and connection to our lives. Those who are familiar with the practice of spiritual care are likely to find it natural to embrace the guiding principles of IFS. Since spiritual care is all about accessing Self energy, spiritual care practitioners are people who cultivate qualities of Self in their personal lives and support those qualities in the communities they serve. The Self-led discernment that arises from nurturing our spirituality will be essential as IFS grows and adapts to the different contexts, different cultures, different needs and demands of our tumultuous and troubled world. IFS-informed practitioners of all kinds are making heartfelt efforts to create a more Self-aware world, but I'd like to name a few areas where spiritual care practitioners in particular are likely to shine.

Most professional providers of spiritual care incorporate mindfulness practices into their daily routines. Practices such as meditation, prayer, reading, journaling, artistic endeavors, and

experiences in nature are helpful for anyone, but these become indispensable if your work is providing spiritual care to others. Life happens at such a crazy pace these days, and spiritual care professionals have a responsibility to slow down, pay attention, and bring more mindfulness to their own actions so that they can provide sanctuary for those who are swept up in the chaos of the modern world. Mindfulness practices help a person to cultivate qualities of Self. A mindful person is better acquainted with the inner world, and more attentive to the outer world. For these

reasons, most spiritual care professionals come to IFS knowing themselves well, and understanding others, too. They may have a heightened capacity to see the gifts and burdens that our parts carry, which leads them to treat those parts with authentic kindness and respect.

Spiritual care professionals know how to stay fully present, holding Self energy with parts that are struggling or suffering. Their work is also, by its very nature, non-pathologizing and non-directive, which gives them a head start when it comes to learning and applying IFS. While psychotherapists can be deeply attuned with the non-pathologizing and non-directive perspective of IFS, they may have to resist some of their own training when they apply this perspective with clients. Many programs teach models of psychotherapy that are based on the belief that clients' systems are not to be trusted and need to be "fixed." While IFS-informed psychotherapists may consciously reject these models, they are likely to have "therapist parts" with a different agenda—parts that, due to training and professional constraints, might take on too much responsibility and over-manage the healing process. Spiritual care practitioners have a lot less unlearning to do in this regard; they rarely see themselves as "fixers." In their work, they must accept that they cannot fix the suffering they witness, and this is extremely humbling. Professional spiritual care providers are trained to focus on what they really *do* have to offer: presence, patience, compassion, curiosity… in other words, Self energy. Ultimately, they are aware that the process of healing is paradoxical and mysterious, not something that can be forced, no matter how much we want it to happen. By witnessing from Self, spiritual care professionals (and non-professionals) offer the suffering person a safe space for a "you-turn," so that person can access their own Self energy and the potential for true healing. This is just good, basic IFS—and good IFS is good spiritual care.

Spiritual care practitioners also have a meaningful role to play in the area of accessibility. Who gets access to IFS? Of course, IFS is meant for everyone. Yet financial, social, educational, environmental and political obstacles are everywhere in our world, and not everyone has access

to precious resources (like IFS) that should belong to all of us. If IFS is limited to those who can afford and access psychotherapy, there are many, many underserved communities and individuals who will be excluded from IFS. Currently, in less privileged communities within wealthy countries like the United States, the available mental health care is inadequate, punitive, and potentially damaging to those who are forced to depend upon it. Such mental health care certainly does not include IFS by skilled, well-trained psychotherapists. Even those from the most privileged communities in those wealthy countries may not be able to find a qualified IFS therapist. On a global scale, the problem is even greater. Entire regions of the world do not have access to a fair share of mental health resources, especially regions populated by the global majority. If IFS is just a psychotherapy model practiced exclusively or primarily by psychotherapists, it will never be able to reach its full potential on a global scale, and this would be tragic. But if IFS is understood to be a form of spiritual care, then there are more options for how and by whom it can be taught, learned and practiced. With more options and more practitioners, more IFS becomes available to all; the potential for serving more people and meeting more kinds of needs increases exponentially.

I've been making a case for professional spiritual care practitioners to become IFS-informed, but there is also a need for the kind of IFS that non-professional spiritual care practitioners can provide. Professional services of any kind—including medical care, psychotherapy, and even spiritual care—can be inaccessible to many populations. Unfortunately, professional spiritual care providers in the U.S. are not covered by insurance, which can exclude some people from accessing support from pastoral counselors or spiritual directors. Still, professional spiritual care is almost always less expensive than psychotherapy, and is often available in community settings or in crisis situations where it can be accessed for very low cost or free (at least on a short term basis), and IFS could also be reaching more people in a wider variety of ways by expanding beyond the limitations of professional services entirely.

Community spiritual care has always been the closest thing to therapy for many marginalized communities where costly psychotherapy might not be an option, or might not adequately represent people's real life experiences and concerns. Some people can access spiritual care

through a church, temple, mosque or other religious center—receiving this care not just from clergy but from one another in their congregations. They may also access spiritual care (in the form of meaning and connection) by talking to a neighbor, a clinic nurse, the mail carrier, or a clerk at the grocery store. Spiritual care is potentially accessible to everyone, so if there are more IFS-informed spiritual care practitioners in the general public, IFS will be able to reach more people in communities that are politically and economically marginalized, and those spiritual care practitioners will themselves belong to the communities they serve. The need for meaning and connection is universal, and the capacity to access Self energy is universal, even though not all people have equal access to professional services, political power, or economic resources. When more people learn IFS, more people will be Self-led and able to discern *when* and *how* to offer IFS supportively and appropriately. When spiritual care becomes IFS-informed, the nurse will offer IFS-informed nursing, the neighbor IFS-informed neighborliness, the chaplain IFS-informed chaplaincy. When IFS is spiritual-care-informed (focused on meaning, connection, and Self energy, rather than psychotherapeutic goals), people can effectively and safely offer and receive IFS from one another in a wider range of ways.

IFS skills that invite a person to plunge more deeply into their internal system (like explicit direct access and unburdening) might be risky for non-professionals, or for professionals in fields that aren't therapy- or counseling-related. The store clerk or bus driver certainly shouldn't be doing unburdenings intentionally on the job, yet they could learn to hold a safe container of Self energy for someone experiencing activated and blended parts. There are some IFS tools that anyone can learn. Sometimes all it takes to help a person unblend is to invite that person to notice the part that is suffering; if they are able to notice with even a bit of clarity, curiosity, or compassion, then Self is already present. This kind of IFS might not always effect immediate change, but even if the suffering person cannot unblend, the practitioner can do so, becoming a Self-led presence rather than just another bystander overwhelmed by their own parts. The IFS skill of validating a

protector's good intentions (not the same as validating behaviors, of course) is similarly low-risk and high-reward. IFS offers a framework for understanding what is going on in complex emotional situations, and offers many kinds of helpful tools for responding to those situations. We should all have access to this framework and these tools.

A Personal Example

Forty years ago, I was a bartender at a lesbian tavern. Although I didn't realize it at the time, I was practicing spiritual care, and even a kind of IFS, with many of my customers. I remember one customer who was a firefighter—the kind who fights house fires not internal fires, though she had some powerful, internal firefighter parts as well. One of her firefighters drank. Every afternoon following her shift, she'd sit down at my bar, and we'd work together to mitigate the impact of that internal firefighter. I'd get her other parts involved—the easy-going parts-in-beneficial-roles, who liked to talk about sports, eat bar snacks, and play a round of checkers with me. The pint would sit on the bar, and, with my encouragement, her managers would challenge her to see how long she could make that one pint last. Gradually, though, the empties would line up, more firefighters would come along to start picking quarrels with other customers, overtipping, and trying to flirt with me, so pretty soon I'd have to cut her off, help her to a cab, and send her home. I had enough Self capacity to be kind, to respect her courage and good intentions, to maintain healthy boundaries (I didn't flirt back, and I used those extra tips to pay her cab fare). I wanted to create an atmosphere that encouraged her parts to make a little bit of space for hope, but that atmosphere was still situated in a bar, and she and her firefighters were customers who weren't getting a lot of benefit from being there. Still, can you imagine how much more meaningful these interactions could have been if I'd had some IFS skills? Our efforts to create a shared sense of meaning and connection had merit, yet I can see now, in hindsight, that there were many missed opportunities when an IFS framework and toolkit could have made a real difference. She wanted to help herself, but her parts didn't know what to do with her—they were polarized and hurting each other. My own parts were worried about her, anxious about my role in her problems (should I be serving drinks at all?), and also just passing the time until my own shift was over. Even if I'd had IFS tools, it's unlikely that I (in my bartender role) would have been able to positively impact the trajectory of this customer's alcoholism. But her Self was

somehow there with her in the midst of her struggle, looking for ways to reach her troubled parts. It would have been helpful for us both if I'd known that at the time. What would have happened if I'd unblended from my own parts enough to provide a safe container? What would have happened if her parts could have felt acknowledged and valued enough to make space, to allow her Self energy to come through for them?

Conclusion

Some aspects of IFS—the spiritual care aspects, like unblending, validating, and witnessing—come naturally to us because they are fundamental human experiences. We practice them intuitively, but we can also learn tools and skills that make them more readily available when we need them. Professional spiritual care providers already cultivate similar tools and skills, but learning IFS could broaden and deepen what they bring to their work. Non-professional spiritual care practitioners (1984-me, the neighbor, the store clerk, the mail carrier, and all the others) also have personal tools and skills, but IFS could help them broaden and deepen their capacity to respond to the situations they encounter regularly.

On the other hand, spiritual care practitioners of all kinds can serve to remind the IFS community that meaning and connection (and love) matter more than techniques and protocols. The spiritual care practitioners behind the bar at the IFS neighborhood pub might be new in town, but they're already at home here, already listening to you and learning from you, already stepping up to bring you a glass of the sparkling water of life (an IFS house specialty), with a twist. That extra twist—some fresh spiritual citrus—adds a lot of flavor!

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