Today on IFS Talks we are so lucky to be speaking with Dr. Nancy Wonder. Nancy Wonder PhD, is a licensed psychologist practicing in Tallahassee, Florida. She's taught for the Institute of Internal Family Systems, PESI and Intimacy from the Inside Out for over 15 years. She's currently a senior lead trainer for Intimacy from the Inside Out and teaches in the US and internationally. Nancy's students describe her as warm, authentic, and an excellent clinician. Dr. Nancy Wonder has published two chapters regarding the use of IFS with a case involving pornography addiction and one on IFS and supervision. She developed an IFS Continuity program for treating sexual addiction and sexual victimization. Also, Dr. Wonder, along with Dr. Winikates, created a webinar for loneliness that they offered through the Internal Family Systems Institute early in the pandemic. She has a wealth of experience.

Tisha Shull: Dr. Wonder, Nancy, thank you for being here with us today on IFS Talks.

Nancy Wonder: I'm happy to be here.

Aníbal Henriques: Thanks much, Nancy, for willing to sit with us. What parts come up today hearing your bio?

Nancy: Well, it sounds okay. Yeah, that all happened, you know. When you said I have a wealth of experience, Tisha, I was a little bit, that part that feels like, I don't know anything, got a little, like a little activated, like, "is that true I don't know anything or is what Tisha say is true?" So, I'm working with that polarity, but other than that, it was all good. It was accurate. Thank you.

Tisha: Nancy, will you tell us a little bit about your journey into the world of psychotherapy?

Nancy: I will. I didn't become a psychologist until my forties. I got divorced from my first husband at 40. It was his idea and I decided to get a PhD. Why not? Right? And I got a PhD in counseling psychology from Florida state here in Tallahassee, and I did a residency out of prison where I worked with sex offenders. And this is when I started working with people with sexual issues and something about it called me and I felt like I really wanted to work in this area. And so, as I established private practice, I started working with sexual offenders, both juvenile and adults, as well as sexual abuse victims. And I've been in private practice now here since 2000.

Tisha: And how did you discover Internal Family Systems therapy?

Nancy: Well, it was about 2003 or 2002. I went to a yoga workshop. I like to do Iyengar yoga and my teacher here and I drove to Lafayette, Louisiana, and there was another teacher, yoga teacher there who is outside of Atlanta. And I'm going to forget her name right now, but she handed me a brochure about Dick Schwartz coming to outside of Atlanta to this university to do an introduction to Internal Family Systems. And just the way it was so serendipitous, I thought this is really, this just seems right to me. I should get at us. So, I drove up there and it

was a two-day intro workshop. I really was impressed with Dick. It really suited my background of, for example, I did my dissertation on imagination skills and youth. So, I liked Jungian psychology and really liked active imagination. And so, it just totally suited me personally, a big daydreamer in my childhood to go inside and feel my parts. And so, at the end of the workshop, I went up to Dick and said, I'd really like to try this work out as a client. And he said, nobody in Florida was doing it. And so, he gave me a list of three names, and I started working with Barb Cargill, who's one of the founder, the founder woman that worked right with Dick in Chicago. And so, I worked with her for three years. And then I, around that time, started my level one. So, I just fell in love with that. It just really spoke to me.

Aníbal: Nancy, in your career, you worked a lot with the dark side of sexuality, meaning sexual abuse, harassment, sexual offending, and sexual addiction. And you say that working with couples, you saw those things as blocking the light of sexual intimacy. So, I have two questions, maybe difficult ones. If I may, why is sexuality such a vehicle for those forms of abuse? And the second is can we heal from those dark sides of sexuality in our lives and allow our sexuality to shine in a good way?

Nancy: Well, I think that, first of all, sexual abuse is very common. In the United States, I don't know the Europeans statistics, but I think their similar though. In the United States, we believe that one in four women or, and some of us, most of us that have worked with sexual abuse think that's even higher, have been sexually abused by the time they're 18. I don't know why I can't get those statistics in my head right now, but anyway, it's very common.

Tisha: Really high numbers.

Nancy: Really high numbers. And those are the people that seek mental health treatment. So, I'm sure people that actually practice psychotherapy see that sexual abuse is even higher than we realize. Plus, there's a lot of misogyny and objectification of women in the United States, as well as Europe, I'm sure, evidenced by our last president of the United States who was obviously misogynist and treated women like objects. And, that's just very prominent in our culture. And this really affects women's sexuality as well as men's. So, it's endemic in our culture. I think it's gotten better over the years as we've gotten more information and we do more prevention and teach kids about healthy touching, but it's still quite prevalent; sexual abuse and sexual addictive kinds of behaviors and sexual offending.

Tisha: Do you feel like it's more of an American issue than it is an issue in other countries?

Nancy: I think that's a good question. Because I know some other... Other countries are more relaxed about sexuality than we are, perhaps? We have a huge polarity in our culture. Maybe the churches, maybe the Protestant background, the messages we get even from our Supreme Court this week is that sex is bad. You know, it's dirty. It's meant to only be for procreation. And on the other hand, in America, we sell products with sexuality. Say a pair of tires have a woman

with a bikini beside them. You know, we love eroticism. We use it to sell products. Pornography is prevalent on the internet. So, everybody's getting really polarized messages in our country, perhaps a little less. Like, when I was in Europe, spending some time in France, there is a more ease around sexuality. It seems like. But I really don't, I'm really not an expert in European cultures, but I do believe it's a little more relaxed. So, in America we're so uptight about sexuality, that it creates this problem of sexual compulsivity, sexual abuse... If that makes sense. It's like a giant polarity.

Aníbal: And so, can we heal from those dark sides of sexuality in our lives and allow our sexuality to shine in a good way?

Nancy: Yes, I totally believe that. And that's really been my life's work. The meaning of my career is to help people heal, both offenders and victims. I kind of work on both sides of the coin and I totally believe we can heal and prevent... Like, sometimes sexual abuse runs in generations of families. And if we can just heal the current generation, it's going to make the future generations safer.

Aníbal: Nancy, why is sexuality itself important in relationships?

Nancy: I believe it's important because it can increase pleasure and closeness. It can offer reassurance, validation. You can feel supported if you, you know, having the sexual intimacy with your partner. And it just can reinforce feelings of intimacy, feelings of desire, being desirable. And it, it doesn't mean it's going to improve about relationship, but it can help people who have some other problems in relationship when they can come together sexually and intimately in a healthy way.

Tisha: And we have almost a challenge within the couples' therapy world and the therapy world to highlight and illuminate and talk about sex and sexuality in relationships. Do you feel like there's an underlying reason for that? Is it cultural? Is it something that therapists are afraid to bring up or talk about? And in so many reasons it's important.

Nancy: Yeah, I think it's all of those reasons, Tisha. For example, we don't get a lot of education. When I went to graduate school, I had one class in human sexuality and it was a, just a general informational class. That doesn't give you enough to really work with someone in a clinical setting. And that is true. There's been studies shown in Canada and the United States that therapists do not get enough training in graduate school. And so, we don't even bring it up. Many of us have our own parts that we haven't even looked at or been with. So, for us to bring up sexuality takes a lot of courage. So, I really encourage therapists to find out more about their own sexuality and get some CU trainings so that you can bring it up because so many people are sexually abused and so many people are impacted by sex and internet porn and et cetera, et cetera, that it's a crime in a way for us not to bring it up in a therapeutic relationship.

Tisha: Nancy, with that, what can therapists ask themselves about their own sexuality and what could they understand about their own parts around sexuality? How do we help ourselves?

Nancy: Right. I think, yeah, there's some questions they can ask themselves. So, what parts and polarizations are present when you try to talk to a client about sexuality? So, we need to get to know our own polarizations. For example, I was born in the 1950s in the United States of America in the Midwest, which the message was girls need to, you know, it was a double standard. Girls need to protect their virginity; boys can do whatever they want. So, I had a lot of polarities thinking that sex was dirty and bad, and women weren't supposed to do it. And so, to be with all my parts around that, and some, I have some sexual, I guess, sexual abuse as a child, and I needed to work with that before I could be with another person who's had sexual abuse. So, working with our own sexual hurts and pains and feeling into which one of your parts are really concerned about talking about sex? What's scary about it? And I think it can be scary if you haven't worked with your own sexual trauma or even if it's not trauma capital T, you know, most women and some men get some kind of sexual harassment in their life and get all these mixed messages about sex. And to really tune into what specific sexual topics make you uncomfortable and why do they make you uncomfortable? And should you just not work with those? Or should you get more training? For example, some people don't want to work with polyamory or some new social issues that are coming in on board.

Aníbal: Beautiful. Nancy, you also say that through tracking courageous communication and individual work in the presence of the other, we can help couples to talk about sex in a new way. So, what exactly is this tracking and courageous communication?

Nancy: Okay. So, hopefully many of you have listened to Toni Herbine-Blank's IFS Talks podcast, but she developed a model called Intimacy from the Inside Out, which is IFS applied to couples. And this model, I find a really powerful way to work with sexual topics with clients. So, once the therapists themselves have worked with their own parts and they feel that they can be present with a couple working around sexuality, we can use this tracking protocol to examine what happens between them in their sexual life. Just like you do anything. You know, you track the protocol between doing dishes, not doing dishes, taking care of the kids, all these conflicts that people have. What we do is we track the fight or the conflict by listening for the parts. So, we don't get so involved in the content, but we're listening for the parts that get involved in this conflict with a couple. So, you can track sexuality. For example, let's say there's a man and a woman. A heterosexual couple. A woman's a lot of times doing dishes and the man loves to see her, comes home from work and is so happy to see her and so he slaps her butt while she's doing dishes at the sink. So, for him, that's like, "oh, I'm so glad to see you, and you've got a great butt and I'm just going to put my hand on it." But for her, the context... You know, her kids are in the other room, she's doing dishes, she's had a hard day. So, for them to talk about that, she can say, you know, "I had a part that feels disrespected when you do that with the kids in the next room." And he can say, "but I had a part that was so happy to see you." And then they can start

learning about their parts and how they protect themselves. So, you break down the sexuality, just like you would in any conflict.

Aníbal: Nancy, you also say IFIO is a model of differentiation.

Nancy: Yes.

Aníbal: The more the couple is able to differentiate the closer they come, you say.

Nancy: Yes.

Aníbal: And that this is true in the aspect of sexual relationship too. So, can we take out the blame of sexual intimacy?

Nancy: Yes. Right. The tracking protocol shows a conflict between couples as cyclical. There's no beginning or end. So, it takes away the blame. As people start to pair their protectors with their exile and same thing with sexuality. You've got to get people talking about it because they can feel like they can't be any different than their partner. So, we want to get people to do a Uturn and feel how they're different than their partner. Maybe their partner wants to look at porn, but they don't. And how can the couple be okay about that? They can be different, but still have a sexual relationship. And the way we help people differentiate is help them do a U-turn, feeling their protectors and exiles, and being able to accept their partners, you know, be more loving, self-loving, and then loving to their partners, protectors and exiles, therefore they may not get everything they want sexually from their partner, but they certainly can begin to talk about it and understand. So, this is going to increase their intimacy. The more they differentiate within themselves, the more they can connect to the differences in their partner.

Tisha: Are there common themes you could share that would illustrate this like particular exiles that come up and the protectors that, that are, I mean, everyone's an individual, but I could see, you know, if someone has an exile around sexual abuse and their partner comes up and smacks them on the butt. Yeah. That might illustrate a common theme.

Nancy: Yes. I think it does. So, there could be a part of that woman who has a hypervigilant... I don't know if you've read *The Sexual Alarm System*, we can put the resource. I can give you the resource later, but she talks about many women because of the prevalence of sexual abuse, sexual harassment, and all these kinds of things, have a sexual alarm system. So that we, as a young woman, especially, are in a hypervigilant state much of the time because men have...And I know this is going to sound sexist, because I know it happens to men too, that men get objectified as well. But just as an example of this heterosexual couple we're illustrating, that might feel belittling to her and objectifying to her because of stuff that happened to her, say in middle school, the boys teased her about her budding breasts. You know, we don't know, but a lot of times there's exile pain, even if it's not capital T trauma around sexuality, but it's a

message that you got from your peers or school that your exiles took in, took in burdens. And so, to have somebody do something that reminds you of that, it's going to set off this trauma response and the protectors are going to get on board. And so perhaps this woman might get mad, have rage. She might, you know, just turn off to him, shut down and not want to have sex with them, period. You know, just completely withdraw from him. So those are the kinds of protectors exiles we see in sexuality.

Aníbal: Nancy, you have written this beautiful chapter on treating pornography addiction with IFS in the book, *Internal Family Systems: New dimensions*. There, we can read the challenge for the therapist in a case like this is to not manage the firefighter, meaning the addicted part, but instead to calm shaming managers and attend to the exile. So, what exiles, vulnerable parts do you usually find when working with these clients? Pornography addiction ones.

Nancy: Every single person I've ever treated, and Dick will agree with with this statement as well, has had some kind of trauma. So, the sexual addiction doesn't come out of nowhere. And, and yes, usually the sexual addict part is a firefighter that helps distract or sooth the client's pain from exile pain. For example, I have a client who had a lot of loneliness as a child, and he experienced quite a lot of neglect. When people experience, you know, it's very traumatizing and his father had an addiction, had Playboy magazines, for example, in the closets. So, when he was so lonely and so neglected and so criticized, he would find the Playboy magazines. And this is a typical story. How sexual pornography is passed down in generations. You know, the father never openly said, oh, by the way, I love to look up porn. But the many clients I've had have found porn hidden and the whole hiding part is kind of makes it exciting and secretive. But they are distracting or soothing exiles that have loneliness. Exiles who've maybe had physical abuse. Some, one out of four sexual offenders have been offended themselves. So, definitely the exiles are all different, and I could give you a million examples, but they've all been traumatized somehow. And in that have had deep, deep pain and somehow, they were turned on, no pun intended, to sexuality, either by pornography magazines or by pornography on the internet or with peers. And it really helped them feel better. And then it's just, pornography is highly addictive. It's as addictive as cocaine, some people say.

Aníbal: Wow.

Nancy: So, once you've used it, often enough, it becomes a habit and it's hard to break.

Aníbal: And Nancy, how different or similar can be the work with a sexual perpetrator compared to the work with a sexual victim treatment.

Nancy: Well, I have parts that identify more with a sexual victim. So, you know, I'm sort of an old feminist and women's health advocate, so I would align with the victim more. So that's one thing. And with the perpetrators or sexual addiction not so much. I find that I can be a little more judgy, I might have parts that I need to relay, you know, critical parts and judgment parts

because I really think sexual abuse is not okay. Like, big time. I think it's not okay. But I'm able to have empathy for them. I don't know why, compassion, because it's all about trauma. So, there's really not that much difference. You do IFS with them. You find their protectors, you make friends with their protectors and then you go to their exiles. So, it's really the same thing. It's more maybe what happens within me.

Tisha: Was it different working with sexual offenders before you started training in IFS therapy?

Nancy: Totally, totally different. Yeah. Well, traditional sex offender treatment is caught at the behavioral and, you know, the ABC model and all that for people who know, you know, like the cognitive-behavioral model. So, we would talk about what they were thinking, what they were feeling when they did the offense. And you know, it just wasn't enough. I knew these guys were hurting. I just had a lot of compassion for them from the get-go. And I knew there was something missing in that treatment because it was all about accountability and shaming. They would have to stand up and say their offense and grope. And I didn't like that. I mean, just at my core, my intuition. So, this isn't the way to treat these men. And because most of them are men, I'm sorry. I have treated a couple of female sexual perpetrators. So, I just knew that was wrong and IFS gave me another completely different paradigm. And I think it's very effective and Dick has used it a lot with perpetrators and he would also agree that it's very, very effective.

Tisha: Yeah. There's a question I think that comes up a lot when we are talking about, you know, sort of that term from Dick's new book, like *No Bad Parts* and people kind of bump into this feeling around, well, wait a minute, like what about parts that really do hurt people or abuse people or cause other people harm or trauma? Like how do we frame the no bad parts mentality with, you know, actual behaviors that cause harm or intended as harm?

Nancy: That's a good question. So, I don't know if you've read Dick's chapter about perpetration.

Aníbal: I did.

Nancy: It's in one of the books, but it's really very good. And he says that the perpetrators were perpetrated on. So, they do that because they were so humiliated and so hurt by their own parents, caregivers, somebody, that they form a part. Now, he says a perpetrator part... Probably I am not going to remember exactly, has a kind of, even a different energy than firefighters. It's even bigger than that. He kind of puts it at its own classification and Dick and I would be an advocate of limiting these people, you know, either putting in prison or a very controlled probation because those parts are very hurtful. But when you get to know the trauma underneath, then you understand why... It's just like all our protectors get formed by how we're treated by people. And that's exactly how these perpetrators are treated. So, I still think of them as parts and most of the people I work with now have sexual addiction and it's not so violent or,

you know, it's not so perpetrating. And so, it's a little easier to have compassion for those parts as firefighters. But yeah, this perpetration is kind of a, something that if we could get to the trauma underneath and help the exiles unburden, that those perpetrator parts will soften.

Tisha: So, to actually go to the trauma and have it revealed to the perpetrator almost as a way of preventing further perpetration,

Nancy: That's right, that's the core.

Tisha: You need to heal so that you're not going to hurt anyone.

Nancy: Tisha, that's exactly right. And that's what we need to do in our culture. We need to help even criminals, all these people that we want to just lock up, drug addicts, et cetera, et cetera. Let's find out the trauma.

Tisha: Yeah. My first work was in a woman's prison in a substance abuse unit and oh gosh, the traumas...the experience was heartbreaking. And IFS was, was not prevalent...

Aníbal: Nancy, can we get back to the protocol for sexual discussion?

Nancy: Sure.

Aníbal: So, you'll say you are an advocate for helping couples talk about sexuality while being held by the couple therapist. So, can you say more about the IFIO protocols that can be used for sexual discussion for couples?

Nancy: Yes. First of all, I talked about tracking, which is when we track the protective cycles and you probably are aware of... Not you, but the audience are aware of how you can feel protected around sexuality, how you can keep yourself separate from the other person and you have to keep yourself safe. So, in the tracking protocol, we can explore, you know, what parts of you get turned off in the sexual encounter? What parts of you get more excited? And, then the couple can notice each other's protectors and exiles and learn a lot about each other. Like, I've had sessions where for the first time a woman has shared her sexual abuse in high school, you know, kind of a date rape situation to her partner. He had no idea, but they were able to do that with me, holding them in a container, a safe container. And then there's, we have this protocol that Toni developed called courageous communication. And so that gives couples a chance to tell the other one what their parts are needing around their sexual life. And in courageous communication, we try to take out the blame. So, we encourage the speaker to talk about their own parts and their experience and what their parts need. So maybe, maybe like this couple, we keep referring to, the woman doing the dishes, she may need to say "because I was sexually harassed so much in middle school, I really need to fill up a safe context before you touch me in any intimate way." So that would be an example of her courageously telling her husband how

she liked to be touched and what context. And, but the thing about creative communication, which I think Toni talked about in her podcast is that we need to help the listener. So, that husband needs to be available, you know, not to feel defensive, not to feel, you know, "oh my God, she's going to cut me down. She's going to embarrass me. She thinks I'm a pervert." So, we need to help the husband relax. And this is true for lesbian couples, gay couples, you know, that we all have protectors and we all have shame about our sexuality. So, in that protocol, we unblend the listener. So, you know, you say to the man, "so tell me, what is it like to now hear from your wife?" And he might, "oh, I think she's going to blame me. She gets so mad at me." "It's okay. So, find the part that thinks you're going to be blamed and you help him unblend and you reassure him that you're going to be there to help them have this conversation." So, it can be really powerful because couples have trouble talking to each other about sex.

Tisha: And to be aware of what parts of you come up and come in and block as a listener seems really valuable.

Nancy: Exactly.

Tisha: Oh, I can't listen because I'm on the defensive...

Nancy: Right. So, I would help that person unblend from their defensiveness and get a relationship with the... Unblend, have more space. So, you're setting up the speaker and the listener to do this project.

Aníbal: Nancy, in her 2021 book *Come as You Are,* sex educator, Emily Nagoski describes the dual control model of sexual responses. This model involves our Sexual Excitation System or what Nagoski calls our accelerator, which scans our external external-internal environment for sex related stimuli and responds to these with increased desire and arousal. And it also includes our sexual inhibition system, which scans our internal and external environment for threats and then functions as a brake turning off sexual arousal. So, therefore, whether we are able to experience sexual arousal depends on the balance between the accelerator and the brakes. One of the main struggles for survivors of sexual trauma, she says, is that sensations, ideas, and contexts that could have been interpreted as sex-related and arousing are now perceived as threats. So, now when the accelerator system starts to be activated in the interaction with our partner, for example, their brakes are activated as well, and their desire or arousal is shut down. How can IFS help or relate with this perspective?

Nancy: I guess you anticipated that I might talk about that. Because I was thinking about that this morning when I was thinking about this talk. Larry and I talked about... Larry Rosenberg and I did an advanced workshop for IFIO level one graduates on sexuality. And we talked about that dual control model of sexual response. So, what I want to think about that are how are the brakes parts and how are the accelerator parts? So, we would change brakes and accelerators as parts. So, what kinds of things might your partner do that make you shut down sexually? So,

you start helping people talk about that. And so, for example, if somebody has been sexually abused and they're working through the act of abuse, they're really working through the parts. I know in my case, I didn't want to have sexual contact with my husband for a few months. And luckily, he was really generous and easy about it. But there's many times when, if you are working with sexual abuse that you need to just have a time out from sex, but then once you know, and once you've healed the exiles, you know what's going to trigger them. So, it's important to be able to talk to your partner, like you're saying, Aníbal, if the partner does something similar to their perpetrator, it's going to totally shut down the sexual encounter. And so, there's a couple of things you can do. Talk to your exiles, tell them they don't need to be in the bedroom, in the adult bedroom with your lover. And secondly, know the things that might trigger them and communicate that to your partner. So, when we get partners to talk about brakes and accelerators, for example, the one we keep using the husband and wife by the sink, she might really like that when they're in the bedroom, she might like that, you know, caressing of her but, but not in the kitchen. So, people can talk about the context where they feel... context is really big for women, especially when they've been sexually abused. What is the best context that she can feel safe and comfortable? And it's true many men have been sexually abused. So, it's true for both men and women in all types of relationships. So, if you can talk to people, talk to your partner, "this turns me on, you know, when you kiss me this way, this accelerates me, but when you touch me there that feels familiar of some sexual pain for the past." So, we like to think of those as parts and put the brakes and accelerators into a part paradigm.

Aníbal: Beautiful.

Nancy: So, here are some examples of brakes. If you'd have negative feelings about your bodies, which many of us do, both men and women, you know, there's so much emphasis in our culture on attractiveness and sexiness and certain body shapes. But if you don't feel good about your body, and there's a way that your partner doesn't make help you feel good about your body, you're going to put a brake on, you're going to have a part that says "I'm not attractive enough." So, shame and guilt are things that can put on the brakes. Other things, the anxiety of "am I any good at sex? Am I going to be able to perform well? Am I going to orgasm? How am I going..." Those kinds of worries and concerns about being good sexually. That happens for all different types of people. Also unwanted pregnancy, contraception. That is big time brake. And if people haven't talked about that and discuss that and made that a safe situation, and some of it it's just timing. You've got to see how your partner is. Is your partner open and available? Or are they to tizzy about some work conflict or a really stressful day? It's really important to notice how your partner is. And then sometimes brakes are put on because people don't feel accepted in their relationship. Like if you criticize, say if you criticize your lover all day about everything they do wrong, that night, the lover's not going to want anything with you, right? So, feeling used or feeling coerced, also mental health issues, can affect sexuality.

Tisha: What do you perceive as being kind of the next place to go around therapy and sexuality? Do you have a vision for how we can begin to create...

Nancy: I think talking about it and... I kind of love the younger generation, you know, the binary, the... I have trouble with that sometimes. Polyamory... I'm like, "we did that in the seventies, don't you remember it didn't work then..." But anyway, I try to be more modern and listen to people in different generations. And I think they're bringing us more openness, more acceptance. You know, I don't want to be a traditional male. I don't want to be a traditional female. And I think that, I think that's great. I think it's wonderful. And there's just more consciousness around sexuality. And I think as psychotherapists, we need to work with our own parts around sexuality. And so, we can free up our clients. You know, people tell me they feel comfortable talking to me about it and we need more clinicians that feel comfortable talking about it because people need to talk about it. Even if they haven't ever been sexually traumatized, they still have different cultural messages and family messages that we all need to be able to work out and figure out how it impacts our own sexuality. It's a wonderful vision though, Tisha. I was wondering about writing a book on IFIO couples and sexuality today.

Aníbal: That would be wonderful.

Tisha: Yeah. You would have a broad readership.

Nancy: Probably, yeah.

Aníbal: Nancy, what is coming for you as a trainer and an author? You know, you have these new chapter coming in the new book, *Internal Family Systems Therapy, Supervision, and Consultation* edited by Emma Redfern.

Nancy: Yes.

Aníbal: And your chapter is called, I guess, *Making the Unconscious Conscious in IFS Consultation of Sexual Abuse, Sex Offending and Sexual Compulsivity Cases*. Do you want to share more about this chapter?

Nancy: Sure. It was such an honor for Emma to ask me to write a chapter. I enjoyed writing it because it was really culminating for me to just bring it together. You know, my work over the years and the things I've done and how I have supervised lots of people. And so, it was fun to pick out three cases that I could examine more closely and talk about how I, as a consultant, had to help the therapist's parts around what was coming up for them around sexuality. And so, there was a lot of education, but also feeling into their own protectors and exiles that have been impacted by sexuality and then asking them to go to individual therapy to work with any trauma.

Aníbal: So, Nancy, thank you so much for having us. It was a joy to be here with you and Tisha, and we hope we can keep meeting and sharing this model, our work and our lives. Thank you.

Nancy: I would love to. Thank you so much for having me here.

Tisha: Thank you, Nancy. Thanks for sharing your wisdom and giving us all a little bit more courage to talk about sex.

Nancy: Except that I couldn't remember how many people have been sexually abused, but then you can take that out, right?