

The Part That Wants Peace. The Part That Sabotages It.
Working with Polarised Protectors
A Two-Evening Clinical Workshop with
Stacy Ruse

Zoom Webinar
9 & 10 September 2026, Wednesday & Thursday
Times:
6:00 pm – 9:00 pm, London UK
1:00 pm – 4:00 pm, New York, USA

CPD hours: 6



Location: Online streaming only
(all our webinar tickets now include complimentary access to a video recorded version for 1 year or 3 years,
depending on the ticket type)

*"I want things to change."
"Then why do I keep destroying them when they do?"*

Every therapist knows this client.

The one who reaches toward closeness — and then recoils from it. Who sets boundaries — and abandons them days later. Who pushes relentlessly toward growth, healing, productivity, recovery — only to collapse the moment momentum begins to build.

From the outside, these patterns can look irrational, contradictory, even self-sabotaging.

But what if the client is not resisting healing at all?

What if two survival systems are fighting for dominance simultaneously — each convinced that the other will lead to catastrophe?

This is the Protector Paradox: the phenomenon in which opposing protective parts organise themselves around the same underlying wound while operating through radically different survival strategies.

One part strives. Another shuts down. One seeks closeness. Another anticipates danger and withdraws. One controls. Another collapses under the pressure of being controlled.



Neither part is "wrong." Neither will willingly surrender. And the client becomes trapped in the exhausting space between them — repeating the same cycles, relationships, compulsions, conflicts, and collapses while quietly concluding:

"There must be something fundamentally broken in me."

There isn't.

The system is working exactly as designed.

The problem is that it has turned against itself.

Beyond "Resistance": Understanding the Nervous System in Conflict

This two-evening intensive with Stacy Ruse explores polarisation not simply as ambivalence or "mixed feelings," but as a specific internal survival structure with its own clinical logic, pacing requirements, and neurobiological foundations.

At the heart of this work is a clinically transformative idea:

Two apparently opposing parts may, underneath, be protecting the very same exile.

The striving part and the avoidant part. The people-pleaser and the disappearing part. The hyper-independent part and the desperate attachment part.

Different strategies. Same terror.

And this is the part that changes everything clinically: the two strategies are not random. They are mirror responses to the same unbearable conditions. One part decided that survival required total control — relentless movement, vigilance, the refusal to stop. Another part, shaped by the same original wound, drew the opposite conclusion: that exposure leads to devastation, that forward motion invites catastrophe, and that the only safe direction is down.

Both readings of the original experience are internally coherent.

Both are, in their own logic, correct.

Which is precisely why neither will yield to the other — and why the conflict cannot resolve from inside itself.

Once therapists begin to recognise this, clients' "self-contradictions" start to make a very different kind of sense.

The Inner Wars Therapists Encounter Every Day

We will explore common but often poorly understood polarisation patterns, including:

- Control vs collapse
- Striving vs avoidance
- Pleasing vs withdrawal
- Self-criticism vs numbing
- Hyper-independence vs attachment hunger



- Perfectionism vs paralysis

These are not merely personality traits.

They are competing regulatory systems attempting to manage unbearable emotional states in fundamentally incompatible ways.

And when the conflict intensifies, the internal system often becomes increasingly extreme.

One protector escalates. The opposing protector escalates in response. The nervous system loses flexibility.

Eventually, some clients begin to dissociate — not because they are weak, resistant, or "non-compliant," but because another protective system has emerged whose sole task is to stop the internal world from tearing itself apart.

What Most IFS Training Doesn't Reach — and Why It Matters Now

IFS has become one of the most widely practised trauma-informed modalities in the UK and internationally — and rightly so. But the majority of IFS training, including foundational and intermediate CPD, addresses parts work at the level of individual protectors: how to identify them, unblend from them, and build relationship with them.

What receives far less clinical attention is what happens when two protectors are in direct structural opposition — when working with one, however skilfully, triggers the other into escalation, and the therapist finds themselves caught between two equally powerful, equally terrified systems with no clear way forward.

This is a significant and often under-recognised reason IFS-informed therapy can stall.

The emerging neuroscience of threat response helps explain why. Competing regulatory systems — one oriented toward activation and control, another toward shutdown and conservation — operate on different regulatory circuits.

At high arousal, these systems are no longer functioning through integrative processes. The parts cannot hear each other, not because the client lacks insight, but because integration requires a window of nervous system flexibility that chronic polarisation forecloses.

Insight, on its own, does not open that window.

This workshop is designed to.

When Dissociation Becomes the Last Protector Standing

One of the most clinically sophisticated areas explored in this workshop is the role of dissociation within highly polarised systems.

Rather than viewing dissociation simply as deficit or dysfunction, Stacy will explore it as a meta-protector — an emergency survival response designed to shut down overwhelming internal conflict when no resolution feels possible.

This reframing can profoundly shift how therapists understand:



- emotional disappearance
- shutdown states
- going blank
- numbness
- chronic disengagement
- "losing" clients during deeper therapeutic work

When the Therapist Enters the War

Experienced clinicians know that these systems rarely stay contained within the client alone.

At times, therapists themselves begin to feel internally split:

- pushing for movement while another part senses danger
- over-identifying with one protector while becoming frustrated with another
- oscillating between rescuing and withdrawing
- feeling unusually urgent, helpless, avoidant, or emotionally flooded

And here is what experienced clinicians rarely say aloud in supervision:

Some of us recognise this war not only in our clients.

The oscillation between relentless striving and sudden collapse. The part that pushes toward closeness and the part that quietly dismantles it. The exhausting cycling between control and surrender that no amount of self-awareness seems to permanently resolve.

For clinicians who grew up in environments where safety required vigilance, where stillness felt dangerous, where forward motion was the only reliable protection — the polarised client does not simply present a clinical puzzle.

They present a mirror.

This workshop holds space for that recognition — without pathologising it, and without leaving it unexamined.

The therapist is no longer simply observing the polarisation.

They are being recruited into it.

This workshop explores how therapist parts become activated in response to polarised clients — and how Self-led presence can restore enough internal stability for genuine therapeutic movement to emerge without forcing, shaming, overpowering, or collapsing the protective system itself.

Across These Two Evenings, We Will Explore:

- ◆ What polarisation actually is — and how it differs from simple ambivalence or "resistance"
- ◆ The neurobiology of competing protective systems
- ◆ Why chronic internal conflict becomes so resistant to change
- ◆ **How polarised protectors develop around attachment wounds and relational threat**
- ◆ Common polarisation patterns seen in trauma work
- ◆ Why therapists often become recruited into the client's internal conflict



- ◆ Dissociation as a "last-resort" protective strategy
- ◆ Practical methods for unblending and working safely with entrenched protector systems
- ◆ How to work with one protector without escalating another
- ◆ The role of pacing, consent, and nervous system safety in parts work
- ◆ **How opposing parts can begin moving from warfare toward collaboration**

What You Will Learn

By the end of this training, participants will be able to:

- Identify structural patterns of polarisation within internal systems
- Distinguish polarisation from ambivalence, avoidance, or simple resistance
- Recognise how opposing protectors may share a common underlying exile
- Explain to clients — and to yourself — why this conflict persists despite insight, and why that is not a failure of will, motivation, or therapeutic progress
- **Apply practical unblending strategies adapted for highly polarised systems**
- Work more effectively with shutdown, dissociation, and escalation cycles
- Recognise when therapist parts are becoming recruited into client polarisation
- **Work with one protector without triggering the opposing protector into escalation — understanding the specific pacing and sequencing this requires**

About Stacy Ruse

Stacy Ruse, LPC, E-RYT-500, is an internationally recognised trainer and consultant whose work integrates Internal Family Systems, EMDR, somatic practice, and transpersonal approaches. She is known for her warmth, clinical precision, and ability to make complex internal dynamics navigable without reducing them.

Her forthcoming book *IFS Made Simple* (New Harbinger, 2026) reflects the same clarity she brings to the training room — an approach that honours the sophistication of the internal system while giving clinicians practical, immediately applicable tools.

Clinicians who have trained with Stacy consistently describe the same experience: complex internal dynamics that felt intractable in the room suddenly become legible — and workable.

Is This Training for You?

If you have been working with clients who cycle — who reach toward change and then retreat from it, who make genuine progress and then quietly dismantle it — and you have sensed that something structural is happening that standard approaches aren't quite reaching, this training was designed with you in mind.

Not for clinicians encountering parts work for the first time. For those who already work with IFS or trauma-informed frameworks and have hit the specific wall that polarisation creates: the client who seems to be working hard, whose insight is real, whose commitment is genuine — and who keeps arriving back at the same place.

You are not missing something obvious. You are encountering one of the most clinically complex phenomena in trauma work — a system so organised around internal opposition that progress with one part reliably activates escalation in another.

The tools that work beautifully in less entrenched presentations simply do not reach here.



This workshop gives you the ones that do.

Stacy Ruse brings together IFS, EMDR, somatic practice, and trauma-informed approaches in a workshop that is both intellectually rigorous and deeply experiential.

This is not simply a training about "parts."

It is a training about the exhausting inner wars many clients have been losing for decades.

And what becomes possible — for them, and for you — when someone finally understands the logic of the conflict.

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