

Online Modules

Module 1. Introduction to Structural Dissociation

Kathy Steele

1. Four definitions of dissociation, with assessment and treatment implications
 - a. (1) Spacing out; (2) Shutting down; (3) Depersonalization; and (4) Structural Dissociation
2. The biological and psychological underpinnings of structural dissociation, with treatment implications
 - a. Biological underpinnings of structural dissociation
 - b. Psychological underpinnings of structural dissociation
 - c. How structural dissociation develops: The coherence of personality and self in normal development vs. in developmental trauma
 - d. Structural dissociation as defense or as deficit? It matters for treatment.
 - e. What maintains dissociation?
3. What is a dissociative part?
 - a. Distinguishing dissociative parts from ego states, borderline modes, and “inner child” phenomena
 - b. Using parts language: what is helpful and what is not
4. Symptoms of (structural) dissociation that are unique to dissociative disorders (OSDD-1 and DID)
 - a. Amnesia, past and present
 - b. Schneiderian symptoms, including hearing voices
 - c. Somatic dissociation
 - d. Other symptoms of structural dissociation

Module 2. Case Formulation and Treatment Planning with Structural Dissociation

1. Assessment beyond dissociation: Comorbidity, including personality disorders; skills capacities or deficits; degree of inner awareness and cooperation; readiness for therapy
2. Prognostic Factors
3. Case Formulation in Complex PTSD and DID
4. Treatment planning
 - a. Setting collaborative and reasonable treatment goals
 - b. How to rationally sequence working with dissociative parts
 - c. Thinking about how to work with the client as a whole system
 - d. When not to work with parts

Module 3. EMDR in Complex Trauma and Dissociative Disorders

Dolores Mosquera

1. The AIP Model in complex trauma and dissociative disorders
2. Relevant concepts for the work with dissociative disorders and EMDR
 - a. Relevant concepts for the therapeutic work-regarding internal conflict
 - b. Relevant concepts for the therapeutic work-regarding preparation
 - c. Relevant concepts for the therapeutic work-regarding procedures and processing
3. Identifying and working with trauma-related phobias in the different phases of EMDR
4. Types of dysfunctional stored information that can be targeted

On-site program

Kathy Steele & Dolores Mosquera

Day 1. Assessment, case conceptualization and treatment planning.

1. Phase 1. History taking. How and what should be gathered
 - a. Caveats about taking a detailed trauma history
2. Assessment and diagnosis
 - a. Tools: DES, MID, SCID-D, dissociative symptom cluster questions
 - b. Case examples and videos
 - c. Practice in small groups
3. How to identify prognostic factors
4. The AIP Model in complex trauma and dissociative disorders. An overview
5. How to formulate a treatment plan for a client with OSDD or DID
 - a. Checklist for treatment planning
6. EMDR Case conceptualization for dissociative disorders
 - a. Participants will bring their cases
 - b. Practice in big group
 - c. Practice in small groups

Day 2. Stabilization. Phase 2

1. Basic tools to organize the stabilization phase with dissociative disorders and complex trauma cases
 - a. Special issues in using general stabilization skills with dissociative disorders

- b. Stabilization in Complex PTSD
 - c. Stabilization in Borderline Personality Disorder
 - d. Stabilization in Dissociative Disorders
2. The relevance of Adaptive information in the treatment of dissociative disorders with EMDR
3. How to work with dissociative parts
 - a. Sequencing work with parts to maximize integration
 - b. Helping the Adult Self engage with parts
 - i. Identifying and working with Adult parts that are avoidant
 - ii. How to work with Adult parts that are constantly triggered
 - c. When, why and how to work with child parts
 - d. Working with perpetrator-imitating parts
4. Helping the client develop co-consciousness and inner cooperation
5. Role play in big group
6. Practice in small groups

Day 3. Working with defenses, phobias, resistance and complicated issues

1. Identifying defenses in the different phases of EMDR Therapy
2. Working with trauma related phobias in Phase 2 of EMDR Therapy
3. Common resistances and how to address them
4. Self-harm and suicidal tendencies
 - a. Role play
 - b. Practice in small groups
5. How to handle aggression towards therapy and/or therapist
 - a. Role play
 - b. Practice in small groups
6. Managing narcissistic clients and/or parts
7. Dealing with sociopathy and sadism
 - a. Role play and discussion

Day 4. Trauma processing

1. How to know when it is safe to process
2. Identifying and understanding different types of dysfunctional stored information
3. Possible targets when Standard Procedures are not possible
 - a. Case examples
 - b. Practice in small groups with case examples

4. Titrating strategies with and without EMDR Therapy
 - a. Role play in big group
 - b. Practice in small groups
5. Micro-processing procedures
 - a. Case examples
 - b. Videos
6. Trauma processing and reprocessing
 - a. Videos

Day 5. Integration and Special Issues

1. What is integration?
 - a. Distinguishing general integration from the special case of integrating dissociative parts
2. How to promote integration
3. Frequent difficulties with integration and how to address them
4. How to know when we are on the right track
 - a. Markers of progress across therapy
 - b. Markers indicating need for consultation
5. Managing the therapeutic relationship
6. Special issues (by preference of the participants)