

After the Diagnosis, What Next? Phase I Treatment of Complex Dissociative Disorders

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Phase-oriented treatment, the accepted standard of care for complex posttraumatic stress and dissociative disorders (DDNOS and DID), stresses the need for careful pacing and regulation of arousal, because many patients have many debilitating symptoms, are especially prone to regulatory difficulties, and lack essential life skills. The first phase of therapy is thus focused on symptom reduction, stabilization, and skills building. Therapists often have many questions about this phase: How do I prioritize and begin treatment? How do I engage a patient who desperately demands help, but also views me with distrust and fear? How can I be in charge of the therapy while still making it a collaborative effort with the patient? How do I work with different kinds of dissociative parts, such as extremely dependent, avoidant, angry, or persecutory ones? How do I keep the focus of the whole person in a very complicated therapy in which I must work with parts? What are major pitfalls in Phase I? Two seasoned therapists will offer practical answers to these and other questions. We will discuss a step-wise treatment of common problems such as lack of healthy routine and structure in life (sleep, eating, balance between work, rest, and leisure), overwhelming feeling and flashbacks, impulsivity, and relational problems. Many of these difficulties and symptoms can be understood as stemming from a series of trauma-related phobias that maintain dissociation and hinder adaptive functioning in the present. We will begin with a very brief theoretical overview and move to essential treatment principles that organize therapeutic goals and interventions, regardless of the therapist's theoretical orientation. In the afternoon we will discuss a Phase I skills training manual for patients with a complex dissociative disorder (DID and DDNOS). Didactic presentations, case vignettes, and role play will be included.