

# The Treatment of Trauma-Related Structural Dissociation of the Personality:

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The diagnosis and treatment of chronically traumatized individuals is complex. This complexity can overwhelm and confuse clinicians, and can lead to treatment impasses and problematic transference and countertransference reactions.

In the current training, the complexity of chronic traumatization is comprehended in terms of the theory of structural dissociation of the personality, and from this theory many treatment guidelines are derived. Participants in workshops on structural dissociation generally report how the theory helps them to understand and treat individuals who have suffered major abuse and neglect. And many patients report how the theory assists them in developing insight into their symptoms and problems, and in attaining adaptive change. It often holds that in complex situations nothing is as practical as a good theory.

According to the theory of structural dissociation, traumatization consists in an essential dividedness of the personality between one or more parts that engage in functions of daily life and reproduction (i.e., survival of the species), and one or more parts that are fixated on traumatic memories and that engage in animal-defence like reactions when exposed to real or perceived threat (i.e., survival of the individual). The different parts of the personality exert different functions. These functions are realized by evolutionary derived action systems, such as attachment, exploration, play, and defence, and manifest in particular mental and behavioural action tendencies. Structural dissociation is a core feature of a wide range of trauma-related disorders: acute stress disorder, posttraumatic stress disorder, complex posttraumatic stress disorder (proposed diagnostic category), borderline personality disorder, trauma-related conversion disorder (DSM-IV)/dissociative disorders of movement and sensation (ICD-10), dissociative disorder NOS, and dissociative identity disorder.

All parts tend to display disturbed attachment patterns, notably a pattern known as disorganized attachment. However, disorganized attachment may not

be so disorganized after all in that it involves rather discrete alterations between several action tendencies. One action tendency is seeking proximity to perpetrating and neglectful caretakers, to seek acceptance, and to avoid feeling alone, abandoned, and rejected. An other action tendency is avoiding this proximity when it materializes, with engagement in animal-defence-like reactions such as flight, freeze, and fight. Survivors of chronic traumatisation thus seek acceptance, but fear intimacy and (positive) dependency.

The theory of structural dissociation, and the treatment model based on this theory aims to integrate a range of different perspectives, including Janet's psychology of action, emotion theory, affective neuroscience, developmental psychopathology, attachment theory, learning theory, cognitive theory, psychobiology of traumatisation, and sensorimotor psychotherapy.

This integrative theoretical orientation culminates in a phase-oriented treatment model that includes body-oriented interventions. Basically, body and mind are regarded as a functional unit.



Ellert R.S. Nijenhuis, Ph.D., is a psychologist, psychotherapist, and researcher. He received his with the highest honours at the Medical Department of the Vrije Universiteit Amsterdam for his book: *Somatoform dissociation: Phenomena, measurement, and theoretical issues* [reprint: W.W. Norton, New York/London].

In 1998 the International Society for the Study of Trauma and Dissociation (ISSTD) granted him the Morton Prince Award for Scientific Excellence for his scientific contributions; in 2000 the Pierre Janet Writing Award; in 2002 the status of Fellow for his outstanding contributions to the diagnosis, treatment, research, and education in dissociative disorders; and in 2005, together with several of his colleagues, the David Caul Memorial Award for a paper on an innovative PET study of dissociative identity disorder.

He works at the Outpatient Department of Psychiatry of Mental Health Care Drenthe, Assen, The Netherlands, where he engages in the diagnosis and treatment of severely traumatized patients. He performs his innovating

scientific research at this hospital, and collaborates with the University of Groningen (Netherlands) and Zürich (Switzerland), as well as several other institutions and clinics. His empirical and experimental research addresses the psychology and psychobiology of chronic traumatization and dissociation. He has written many clinical and scientific articles, book chapters, and some books, he is a reviewer of several professional journals, and he provides presentations and workshops at many international conferences.

In 2003, he was granted the closing plenary at the International Society for Traumatic Stress Studies (Chicago) addressing the emerging psychobiology of trauma-related dissociation and dissociative disorders.

He is a former Director of the Executive Council of the ISSTD, and a founding father of the ESTD. In 2004 Queen Beatrix from the Netherlands appointed him Knight in the Order of the Dutch Lion for his outstanding contributions to the study and treatment of chronically traumatized individuals.

In 2005, together with Helga Matthess, he founded Psychotraumatology Institute Europe. PIE organizes workshops and courses with leaders in the field regarding the assessment and treatment of chronic traumatization. November 2006 witnessed the release of the book *The haunted self: Structural dissociation and the treatment of chronic traumatization*, authored by Onno van der Hart, Ellert Nijenhuis and Kathy Steele, and published by W.W. Norton, New York/London. The authors were awarded ISSTD's Media Award for this work. According to Prof. Dr. Chris Brewin, the book is "brilliant," and Dr. Richard Kluft regards it as ".... a landmark contribution to the study of trauma and an instant classic in the study of dissociation and dissociative disorders."

Homepage: [www.enijenhuis.nl](http://www.enijenhuis.nl)

#### Locations and time:

The course will be held in Bergen, Norway. More precise location is not decided yet. There are 54 direct flight routes from different airports in Europe to Bergen (many of them cheap), and you can also go to Oslo, and there are departing flights from Oslo to Bergen more than every hour.

Here is a list of direct flights to Bergen:

<http://www.avinor.no/lufthavn/bergen/direkteruter>

Feel free to write to [ar-blind@online.no](mailto:ar-blind@online.no) for help with how to get to Bergen.

1st. seminar: March 8th and 9th

2nd. seminar: May 24th. and 25<sup>th</sup>.

3rd. seminar: September 13th. and 14th

4th. seminar: November 29th. and 30th.

Time Schedule:

1.day: 1000 – 1800 (10am to 6 pm), and 2. day 0900 (9am – 5 pm) each of the four sections of the course.

Language:

The course will be in English.

Accomodation

You will get several suggested hotels when you register, both cheap ones and more expensive ones.

Subscription:

The fee is 13600 NOK (about 1750 Euro) which covers the whole course, including lunches, tea, coffee, fruit, cookies, and handouts. The bill will be divided in two, one before the first part, and one before the 3<sup>rd</sup> part.

You will get 10% off if you are a member of ESTD (European Society for Trauma and Dissociation). To get this, you have to have paid the membership fee for 2012 at the latest on the February the 1.st 2012.

You can subscribe by going to [www.krisepsyk.no](http://www.krisepsyk.no) and then go to “kurs” and register online.

Latest subscription is on February the 1.st 2012. One has to pay for the whole course, in case of withdrawals after this date.

Beware that it will be limited to 60 participants at the most.

You can also find a norwegian description of the training at [www.krisepsyk.no](http://www.krisepsyk.no)  
For more information, please send email to [ar-blind@online.no](mailto:ar-blind@online.no).