Voices, Trauma, and Dissociation
Understanding and Working Towards Recovery

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War is Peace
Freedom is Slavery
Ignorance is Strength
Paintings by sufferers of schizophrenia

Paintings by schizophrenia sufferers often have an odd, eerie quality. In many cases the usual artistic conventions are disregarded, and the pictures include written comments, digits and other idiosyncratic material. For example, Guardian Angels was painted by Else B, an institutionalized schizophrenic. In all her works, the legs of angels are painted as though they had fused at the top, to make sure that “nothing happens there.” (Prinzhorn, 1972; courtesy of Galerie Rothe Heidelberg)
“It’s better to light even a little candle than to curse the blackness.”

Peter Benenson, founder of Amnesty International
“The human animal is a unique being, endowed with an instinctual capacity to heal, as well as an intellectual spirit to harness this innate capacity.”

Peter Levine (1997)
What is Trauma?
Trauma

First used in a psychological sense in 1908 by William James:

“Certain reminiscences of the shock fall into subliminal consciousness ... If left there they act as permanent ‘psychic traumata’, thorns in the spirit, so to speak.”
Shattered Assumptions

Trauma shatters assumptions people hold about the world, other people and themselves – assumptions needed in order to feel safe, deal comfortably with others and have confidence in oneself.
In Small Groups…

• “What kind of experiences might traumatise people?”

• “What impact might traumatic experiences have on us?”
Attachment Behavioural System

Is the attachment figure sufficiently near, responsive and attuned?

Child feels security, love, self-confidence.

Yes

Child is playful, smiling, exploring, sociable, showing a basic sense of trust of self and others.

Fear & anxiety

Defence/survival strategy

Child is avoidant, watchful, wary, showing a basic distrust of others

No

Child uses attachment seeking behaviours: visual checking, signalling a need for contact, pleading, clinging etc.

Child is ambivalent, alternately angry and clinging, showing a basic mistrust of self.
Childhood Maltreatment

Neglect
- Failure to provide adequate food, clothing, or hygiene (physical); failure to provide nurturing or affection (emotional); failure to enrol a child in school (educational); failure to provide or maintain necessary healthcare (medical).

Sexual Abuse
- Asking or pressurising a child to engage in sexual activities (regardless of outcome); actual sexual contact with a child; indecent exposure towards a child; displaying pornography to a child; using a child to produce pornography.

Physical Abuse
- Physical aggression, including: punching, kicking, bruising, pulling hair or ears, biting, slapping, burning, stabbing, choking, or shaking.

Psychological Abuse
- Emotional violations, including: name-calling; ridicule; degradation; destruction of personal belongings; harming pets; excessive criticism; inappropriate or excessive demands; routine humiliation; withholding communication.
Post Traumatic Stress Disorder (PTSD) & Complex Post Traumatic Stress Disorder (CPTSD)

While PTSD is understood as the consequence of single-incident trauma, CPTSD is used to capture the sequela of exposure to prolonged, repeated, coercive trauma.

Characterised by a loss of control, disempowerment, and in the context of captivity or entrapment (lack of escape):

– Childhood abuse
– Organised sexual exploitation
– Domestic violence
– Torture
– Hostages/prisoners of war
– Survivors of religious cults
– Bullying
– ‘Gaslighting’ (violations of personal boundaries, such as serial, intimate betrayals that are discovered and denied
Characteristics of CPTSD

- **Attachment:** unstable relationships, lack of trust, social isolation, difficulty perceiving and responding to other’s emotional states.
- **Dissociation:** amnesia, voice hearing, traumatic flashbacks, and dissociative trance.
- **Behaviour:** sleep problems, aggression, poor impulse control, and difficulties with self-soothing.
- **Cognition:** problems with a variety of ‘executive functions’, such as planning, judgement, concentration.
- **Emotion:** difficulty in identifying and expressing emotions and internal states, and in communicating needs, wants, and wishes.
- **Self-concept:** fragmented, disconnected sense of self, disturbed body image, self-injury, low self-esteem, and excessive shame.

*Individuals often receive a diagnosis of BPD, schizophrenia, or DID*

*All the first-rank symptoms of ‘schizophrenia’ are prevalent in individuals meeting the criteria for CPTSD*
“One of the first things you need to ask is, how did you survive this? This is amazing that you’re still here. It’s amazing that you still have the guts to go on with your life. What is allowing you to function? What are you good at? What gives you comfort?”

Bessel van der Kolk
Psychotic vs. Dissociative?

In small groups think about the differences between voices that are deemed “psychotic” (e.g. ‘schizophrenia’) and voices that are deemed ‘dissociative’ (e.g. dissociative identity disorder)
“The personality falls to pieces. These fragments can then exist side by side and alternately dominate the main part of the personality, the conscious part of the patient. However, the patient may also become a definitely different person from a certain moment onwards...Thus we have here two different personalities operating side by side...When the patients think of themselves as different persons, they utilise a correspondingly different tone of voice...the patient appears to be split into as many different personalities as they have complexes.”

Bleuler (1911) The Group of Schizophrenias
Dissociation, Trauma and Psychosis

“[Schizophrenia] may well be the effect of a particularly powerful psychological trauma on a very sensitive person rather than a disease in the narrow sense of the word.”

(Bleuler, 1911)
Divided World

Them

Abnormal

Us

Normal
United World

Continuum of Experience

- Moderate Experience
  - Ordinary Reaction

- Extreme Experience
  - Extraordinary Reaction
The Multiplicity in All of Us
“One of the most important psychiatric works to be published since Freud.”

- New York Times

- Establishing safety.
- Remembrance and mourning for what was lost.
- Reconnecting with community and society.