



# PODS

Partners of Dissociative Survivors

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>>> PODS: Support for people whose partners, friends or family members suffer from a dissociative disorder

NEWSLETTER — MAY 2011

## Rob's Report

It really does feel as if there is a shift going on just now. Awareness of dissociative disorders, although woefully scarce, does seem to be on the rise. In March Carolyn and I had the privilege of both speaking at the *Campaign for the Recognition and Inclusion of Dissociation and Multiplicity* in London, at which around 200 people gathered as a first attempt to put DID on the political map. A report of the day is available over the next few pages — it was an interesting day and I'm sure will bear much fruit.

As a result of the Campaign conference we felt it was important to gather together some of the prevalence statistics for DID and other dissociative disorders, as there seemed to be some confusion about just how 'rare' it is. In fact the latest *Guidelines for the Treatment of DID* issued just recently by the ISSTD (International Society for the Study of Trauma and Dissociation) clearly state that DID is not 'rare'. So we gathered together the headlines from a number of studies that have been carried out over recent years and you can now see what they say for yourselves on our website at [www.pods-online.org.uk/information.html](http://www.pods-online.org.uk/information.html).

We also enjoyed our trip up to Preston in April and were overwhelmed by the numbers who turned up for our PODS workshop *Living with Dissociation* — over 80 on the day, and a few unable to come at the last minute who have in some cases transferred to future dates. A report by one of the delegates is available on page 7 and onwards.

Our next workshop is fast approaching, and this takes us to the South coast with a venue near Southampton on 18 June 2011. It's not too late to book onto it — we'd love to see you whether you're a survivor or partner, a counsellor or therapist, whether you work in mental health services in the NHS or in the private or voluntary sector. Just about everyone is welcome and the feedback we've received on our previous courses indicates that just about everyone benefits. We then head up to Bradford for a workshop there on 9 July which we're running in conjunction with BSSVAAG (Bradford Specialist Sexual Violence and Abuse Advisory Group). Then in the Autumn we're back to home territory on 17 September in Huntingdon before heading down to the M25 area

with a workshop in Hemel Hempstead on 1 October. If you've not already been, please come! And if you have come already, come again! You'll be amazed at what you missed the first time around.

Carolyn also runs some training days and workshops separate from PODS, either on her own under the TASC umbrella (Trauma and Abuse Support Centre) or in conjunction with Deep Release and two therapists experienced in the field of dissociative disorders, Hazel Barton and Jane Potts. These courses are entitled *Dissociation, Trauma and Time-Travelling ... or Living and Working with Dissociative Identity Disorder* and are aimed more towards therapists and other professionals, although survivors are welcome if they can manage some slightly more triggering material than we include on our PODS days. Details of these training days, which have so far run successfully on 4 occasions, are available on page 9. Next up is 25 June in Huntingdon, before heading back to Hemel Hempstead on 10 September and then it's off to Cardiff on 29 October and Preston on 10 December.

Other good things that are happening in this field include the imminent release of First Person Plural's training DVD entitled 'A Logical Way of Being'. Details can be found on page 6.

We've also personally appreciated the publication of a few new books in recent months, not least Suzette Boon et al's *Coping with Trauma-Related Dissociation* which is reviewed on page 8. Also worth a look is *Ritual Abuse and Mind-Control: the Manipulation of Attachment Needs* edited by Orit Badouk Epstein, Joseph Schwartz and Rachel Wingfield Schwartz, which is a monograph that came out of a joint conference of the same title run by the Bowlby Centre and the Clinic for Dissociative Studies a couple of years ago. And finally the 2<sup>nd</sup> edition of Valerie Sinason's *Attachment, Trauma and Multiplicity* is now available, which has some updated chapters including a very interesting one by Adah Sachs in which she provides a theoretical framework for some of the boundary issues for therapists in working with DID. Well worth a read! For further details on all these books please go to [www.pods-online.org.uk/books.html](http://www.pods-online.org.uk/books.html).

If this newsletter has been forwarded to you from someone else and you would like to join our mailing list, please go to [www.pods-online.org.uk/newsletter](http://www.pods-online.org.uk/newsletter) to sign up, or email us at [info@pods-online.org.uk](mailto:info@pods-online.org.uk)



## Workshop Report — 9 April 2011: “Living with Dissociation” in Preston

*The following report of the PODS Workshop in Preston on 9 April 2011 has kindly been submitted by Wendy, a DID survivor.*

4.30 am: Notes from early morning daily meeting: “Ok everyone, good morning. Wakey-wakey! Teenagers’ time for our daily talk ... Why are we all awake so early? Well, I want to talk to you all about today. Oh yes sorry, I know it’s not my turn to moderate today but would anyone mind terribly if I did as I really do have something important to say. Yes, little one, you can tell a joke when everyone wakes up properly. He he. Ok everyone, we are going to meet other people like us today and listen to a lady tell us some new ways to encourage us on our journey to a fuller life ... So what do we think? Are we going to manage as a team to travel to this meeting? Can we as a team remain aware? If you wish, you may sleep. Everyone as comfortable as is possible with this? Good, then we can at least have another snooze until we need to shower ... no? Fine, let’s get up then. At least we will be on time and get a parking space.”

8.30 am. We arrive, far too early ... Luckily it takes us a while to sort out everyone’s jobs during the day. Cramped in our car, we pack teddy into our bag, and then with huge anxieties, loud audible grumbles and sighs of apprehension, we head towards the front doors of the venue ...

We bravely walk in trying to look as if we are full of confidence, taking internal deep breaths. “Come on everyone, keep up!” And we wonder if Carolyn will remember a previous correspondence in which I cheekily asked her to put a cardigan on the back seat, in the corner of the hall to save me a seat ... please ...?

And there it is, draped on the back of the seat, a cardigan, a friendly comfort blanket, a token of friendship and understanding, to reassure us that, despite our high levels of anxiety, we are important enough to do that for.

That feeling, of “I care enough about you all to aid your journey”, was evident and continued throughout the day.

9.20 am. Coffee in hand, we look around the room. It is full of psychologists, social workers and survivors, and we are struck that most seem nervous or anxious, yes maybe even Carolyn and Rob too. But we are all so busy trying to cope with and mask our anxiety, making ourselves stay and not bolt for the door, that nobody notices anyone else’s anxiety ... Perfect!

9.30 am. “First I was afraid, I was petrified ... kept thinking I could never live without you by my side ...” A video of a small green alien singing along to Gloria Estafan starts the day with a pertinent message. What a great start! Smiles all around, including all of me. We snuggle back into the cardigan and let out a sigh. This is going to be ok.

9.35 am onwards ... Here are two people who are being open about their experiences. They are not there as people who have their heads sorted and live the perfect life. They are on a journey in progress. They are telling me what has worked for them. What courage. What insight. What validation. What dedication. What strength.

Our jaw begins to drop. How on earth did this woman, this survivor, this trainer, get so inside my head?! Does she really understand who is in there? Oh yes, she most certainly does, and in great detail. There is an overwhelming and continual feeling, suddenly, of truly realising that I am not the only person in the world with DID and that it truly does exist. I am not making it up. (Note to self: tell the bloody psychiatrist one day!) She is talking about my secrets as if they are a perfectly normal reaction to my childhood, and stating very clearly that it is wholly acceptable. Nods from around the room confirm that others are thinking the same.

I am not mad and not alone ... Being part of something that people are listening to so intently, with such total engagement, where I am not judged, not blamed, not shushed ... it is very liberating and empowering for all of me. The inners we feared would run and hide sit and listen. My littlies that have gone to the back of the room to paint pictures and play with their toys occasionally look up and listen to



## Workshop Report — 9 April 2011 (cont)

the 'woman with all the knowledge'. Even my normally sleeping teenagers lie listening to 'the woman who knows all about us'.

With apparent effortlessness, Carolyn unravels the overwhelming, bewildering gobbledygook that we really need to know about. She puts it in a form that can really be used by us, to make a difference to all of me. She makes it about me/us. It is relevant and we understand it.

In analysing where we were prior to the workshop, we would say that we were on a path in the woods: there was the odd daisy and buttercup, a sporadic butterfly; the sun shone sometimes; there was an occasional Summer breeze, and if we were lucky sometimes too there would be a new flower to gaze at in wonder and awe – too far away to touch, but we could see it from a distance. We were happy with that path. It was safe, it was consistent, and it was – well, it was 'good enough'. We were where we wanted to be, weren't we? This was as good as it would get for us, right?

But I truly believe that the workshop changed the path. It helped me look to the right to see amongst the trees that there was another path, one that I had missed. This path had a variety of wildlife and butterflies; it had fields upon fields of daisies and striking flowers. The workshop gave me a new-found awareness, a sense of empowerment, and the knowledge that there is an even better existence for me. I returned to therapy later that week, much to my therapist's admiration, with that just-discovered knowledge, and a fresh sense of purpose. I had a strong yearning; I wanted more in my life for me or us. I no longer wanted to accept my level of existence on the path to the left. Carolyn, Rob and several other DID survivors gave me the new hope and encouragement that was on this better path.

Evening meeting – 11.30pm. General consensus. "Ok, everyone, gather around. Let's talk before sleep. Yes, yes, little, I do believe we need to thank the lady. We need to say thank you to all *her* inners for allowing her the time and energy to do this for us, to encourage us, to give us insight. And for sowing so many seeds today amongst professionals and survivors. We think she changed many people's lives today, and not many people can say that. Yes, little one, you may tell a joke. He he. We will tell our therapist all about it. Will she believe us? Well, we'll see."

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## "Living with Dissociation" Workshop Dates

- 18 June 2011 — Southampton
- 9 July 2011 — Bradford
- 17 September 2011 — Huntingdon
- 1 October 2011 — Hemel Hempstead

The cost is £45.00 per person or £75.00 for a couple (survivor plus partner, or survivor plus counsellor/supporter).

The days run from 9.30 am to 5.30 pm and consist of 3 taught sessions and a final session at the end which breaks into two groups: Rob takes the survivors and partners/supporters in one room for an 'open meeting' as a chance to meet others and talk about whatever issues have arisen during the day; Carolyn takes the counsellors, therapists and other professionals for a Q&A session.

Full details, booking forms or links to pay online are available at [www.pods-online.org.uk/events.html](http://www.pods-online.org.uk/events.html). If you have any concerns or queries or need an invoice raising, please email [info@pods-online.org.uk](mailto:info@pods-online.org.uk).



## Report of DID Inclusion Campaign Conference on 12 March 2011, London

The first meeting of the Campaign for the Inclusion and Recognition of Multiplicity and Dissociation was held at Holloway Resource Centre on Saturday 12 March 2011. The venue was subsidised by the Paracelsus Trust, the charitable wing of the Clinic for Dissociative Studies, and so a minimal entry fee of only £10.00 per person was charged. Over 200 people attended, well over half of whom were DID survivors and the remainder were principally partners, carers, supporters, counsellors and other related professionals.

There were 11 presentations during the day, 10 from DID survivors and one from a partner, and a plenary section at the end led by Dr Valerie Sinason based around crystallising campaign aims. The chair for the day was Dr Pat Frankish, also chair of the Paracelsus Trust, and the sessions were individually chaired by Peter Saunders from NAPAC, Mike Fisher from TAG, Dr Pat Frankish, and Valerie Sinason from the Clinic for Dissociative Studies.

**Carolyn Spring** opened the conference with a talk on 'Personal and Societal Denial'. Drawing from numerous examples in history, including the Rwandan genocide in 1994 and the slave trade in the 1800s, she showed that denial is the normative response to trauma and so society's denial of the reality and causes of DID is nothing new. She then suggested that we can learn from the campaign to abolish the slave trade, which overcame endemic denial in a society financially heavily self-invested in prolonging the slave trade, by raising awareness through all means available, including the support for the publication of 'survivor stories'.

**Carol Broad** spoke briefly and then showed a very moving video which she had put together which detailed a number of her alters and a brief description of each of them.

**Oriel** spoke about the struggles of being DID and trying to study at university, and how her experiences at undergraduate level helped her to do things very differently for her MA.

**Jane James**, a DID survivor of ritual abuse, talked in detail about her experiences growing up as part of a cult and the battle to get free, as well as her own struggle to come to terms with the acts of perpetration that she was forced to commit. This was a deeply distressing talk for everyone to hear, probably more so as a number of people could relate directly to it.

**Jo Rotas**, a psychotherapist who is also a DID survivor, spoke about *Helpful Ways to Deal with DID* – subtitled *Or at least, some of the things that have helped me*. She talked about safety, establishing a safe place, going back to basics with self-care, and maintaining boundaries, and then went on to discuss compassion and acceptance. She quoted Babette Rothschild's saying about opening a shaken bottle of coke – "It will take as long as it takes" – and the need in recovery to trust the process and to believe in the healing that is occurring.

**Gail** spoke of her experience of living with DID and the very obvious physical disabilities that it has left her with. She talked about the crucial importance of the support of her husband and the difficulty of people understanding what she is and is not capable of doing, when her capabilities can lie on such extreme ends of a spectrum.

**Nicky Robertson** talked about her experience of being DID within a Christian framework and how she has battled to reclaim a sense of good and a God of love after her early life ritual abuse experiences – how her Christian faith has informed her recovery progress as well as presenting a number of obstacles by way of triggers.

**Dr Ruth Cureton**, a former GP who has DID, spoke about the difficulty of getting a diagnosis through normal NHS channels and explained the obstacles for a GP due to the lack of 'READ' codes and how dissociative disorders are hidden away in diagnostic lists, making it difficult for GPs to identify and locate them. This was a very enlightening talk and helped explain the struggles we often face in having DID recognised by the medical professionals around us.



## Report of DID Conference (cont)

A short play by **Mr E**, a DID survivor, was read out by Beric Livingston and Amelia Roberts from the Clinic for Dissociative Studies. The play described the reality of Mr E's struggle with living with DID and was a very powerful and emotive piece of writing.

The artist **Kim Noble**, with the help of a supporter and her daughter Aimee, provided a Powerpoint presentation of her artwork, which shows the strikingly different styles between her alters. Kim recently appeared on the Oprah Winfrey show in America to discuss her artwork, and as well as exhibiting her work at the conference, Kim also provided a commentary on each of the different alter's work, explaining how she has principally got to know her inner team through the art they produce.

**Rob Spring**, who heads up PODS told the story of his wife Carolyn's breakdown some 6 years ago and the resultant eventual diagnosis of DID. He described the struggles they had as a couple in their relationship as well as his journey of discovery of the other parts of his wife's personality, the impact of secondary traumatic stress on himself, and how they have both worked to come to terms with the knowledge of extreme abuse which led to DID in the first place.

**Jacqui Dillon** from the Hearing Voices Network spoke about her experiences with DID and the work she is doing within HVN, of which she is National Chair for England. She described the pioneering work of Professor Marius Romme and Sandra Escher whose research, contrary to the perspective of biological psychiatry which says that 'voices' are a product of brain and cognitive faults, suggests instead that 'voices' makes sense when looking at the traumatic circumstances in life which provoked them. Their research shows that at least 70% of people who hear voices have had some traumatic experience which they connect with hearing voices.

**Jacqui Phillips** also read out a Campaign Statement from First Person Plural, the UK survivor-led organisation for people suffering from dissociative distress.

Campaign organiser Dr Amelia Roberts said, "Personally, I was absolutely humbled by the credibility, passion and professionalism of the speakers and it was they and the delegates who made it the most powerful conference I've ever attended."

Comments received from delegates included:

- "I felt as if all my personalities were taken from me, validated and I could just relax and recuperate. I feel so strong this week as a result"
- "I am so proud of myself for getting there"
- "I was so touched by the amount of professionals who spoke to me as a human being and not a basket case"
- "The atmosphere was so loving and containing that I was able to face my history with more courage than ever before"
- "The day was like a really intensive bereavement therapy, like a month's worth of sessions in one day. I benefitted enormously"

"It was a very good day," said Amelia, "but not without its faults. We had a number of issues with the venue including with the audio and the temperature of the room. I was also aware that we should have flagged up the particularly intense material more strongly. We did give warnings, but some people missed it or didn't realise quite how triggering it could be, so that is definitely something that we will do better next time. But my thanks to everyone who took part and attended for making it such as significant day."

### CAMPAIGN AIMS

- A vote was taken and the survivors agreed unanimously that they do not want the definition of DID to be included as a part of borderline personality disorder. Survivors wished the diagnosis to be defined as an aspect of post-traumatic stress disorder.

[cont ...]



## Report of DID Conference (cont)

- Guidelines for the best practice treatment for DID currently do not exist in NICE; this needs to change.
- GPs currently have no computer code for DID; this needs to change.
- Increased training was called for in respect of healthcare and public service provision.
- Disability assist dog status legislation currently excludes dogs which do not perform physical tasks; this needs to be challenged to support status of dogs which enable mobility for people who live with DID.
- A fair basis upon which funding decisions are made and a change to the current short phase funding, for example the three-month funding cycle, which causes intense distress. In addition an understanding that appropriate provision saves money spent on in-patient and emergency response services.

### HEALTH FORUM

There was a follow-up smaller meeting on 23 March 2011 at Church House in Westminster, which was a Health Forum aimed at challenging current Commissioning practices which adversely affect service provision for people with DID. The day was hosted by Sir Richard Bowlby and was entitled *Falling through the Commissioning Gap – the High Cost of Misunderstanding Dissociative Disorders*. Speakers included Professor John Morton,

Neurologist; Dr Guinevere Tuffnell, who has been a Consultant Psychiatrist at Great Ormond Street Hospital; DCI Clive Driscoll from the Metropolitan Police and Kathryn Livingston from First Person Plural.

### FURTHER INFORMATION

This is not the end of the campaign, but merely the beginning. There are plans for a campaign website, which will host podcasts of the day as well as links to other organisations.

The Campaign Coordinator, Dr Amelia Roberts, is being funded for one day per week for the next four months by the Paracelsus Trust and she can be contacted on [dr-amelia-roberts@hotmail.co.uk](mailto:dr-amelia-roberts@hotmail.co.uk).

The short version of the podcast of the day is now available to listen to or download on the PODS website at [www.pods-online.org.uk](http://www.pods-online.org.uk). Click on the ipod!

A longer version will soon be available and as soon as it is it will also be available on the PODS website.

*Report by Carolyn Spring*

*First printed in TAG e-newsletter April 2011*



## FPP DVD: A Logical Way of Being



First Person Plural is the UK survivor-led association for DID and similar complex dissociative disorders, and they have recently made a DVD which provides an introduction to DDs. It gives the viewer information about the primary features of dissociative disorders, together with some understanding of their origins in early traumatic attachment and abuse experiences.

For further details please go to [www.pods-online.org.uk/FPP-DVD.pdf](http://www.pods-online.org.uk/FPP-DVD.pdf) to download a flyer or email [fpp@firstpersonplural.org.uk](mailto:fpp@firstpersonplural.org.uk) or go to [www.firstpersonplural.org.uk](http://www.firstpersonplural.org.uk).



## A Jigsaw Puzzle Analogy — by ‘Moon Flea’

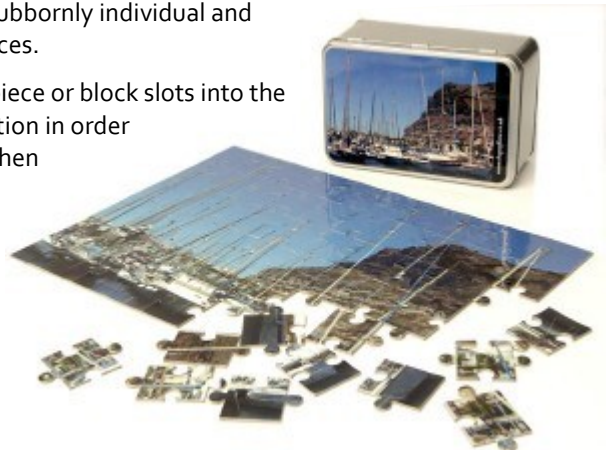
There is an analogy that we use to explain how we view therapy. We imagine ourselves as being pieces of a jigsaw puzzle all mixed up in a box. Sometimes there may be a photograph of the completed picture to work with, and sometimes the picture may be missing — or so similar, like a photo of baked beans that it is virtually useless anyway.

In order to complete the picture from all the pieces, they firstly have to be taken out of the box. This usually involves rummaging through the box in order to find the pieces with edges so that we can start by assembling the border. Some pieces will be upside down with the image hidden from view, so these have to be turned over to discover which part of the puzzle they belong to.

One by one each piece has to be studied and slowly fitted into place. Some will be easily recognised and fitted into place easily. Some may have a similar pattern and these can be built up into separate blocks at one side, or positioned roughly where you think they may go. Gradually they are built into the whole using other pieces to connect them to secure them in place. Others remain stubbornly individual and they are returned to frequently, and tried in different places.

There is a certain joy and sense of achievement when a piece or block slots into the correct position. But it takes time, effort, and concentration in order to slot in the final piece to complete the whole picture. Then we can stand back and admire all that hard work.

The medical terms of ‘integration’ or ‘co-operation’ can sound quite scary but in this explanation nothing is destroyed or reliant on each individual's constant agreement — everyone stays unique and complete in their own right, without damage or change, but totally unified as one to form a whole.



*With thanks to ‘Moon Flea’*

## PODS on Facebook

PODS now has a page of Facebook. Why does this matter? Well, social media such as Facebook, YouTube and Twitter are increasingly a big part of how information is disseminated. So if we want to raise awareness about DID and other dissociative disorders, we need to use whatever tools technology now provides us with!

So please help to spread the message by going to our page (search for “Partners of Dissociative Survivors”) and clicking on ‘like’. You will also receive occasional status updates, but over time we will build a network of people who are passing on the message that DID is real, as well as pointing people in the right direction for the help that is available to them.

Thank you!





## “Coping with Trauma-Related Dissociation” by Suzette Boon, Kathy Steele & Onno van der Hart

Every so often, something comes along that makes you realise how much you've needed it — but you didn't necessarily know you did until you got it. It's been like that for me with the publication last month of *Coping with Trauma-Related Dissociation*, a skills manual written by three leading clinicians and researchers. I wish I had had this book 5 or 6 years ago ...

There are a lot of good books on sale relating to DID — *The Haunted Self*, *Trauma and the Body*, *Attachment, Trauma and Multiplicity* — but many of them are written in a terse, academic style that is inaccessible to many people.

One of my great passions is trying to make complicated stuff simple, and that's why I love this book. I don't like complicated stuff being made simple by stripping it so bare that it's a dumbed-down version, but this book avoids that. The theoretical background is clear to see without getting in the way of what the authors are saying. It's good — very good.

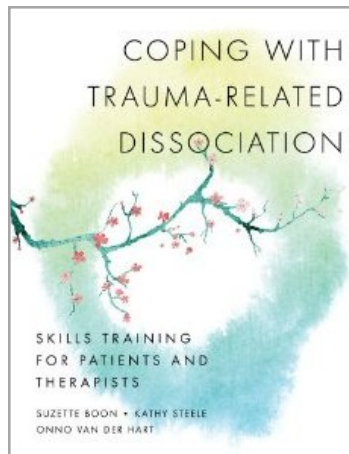
The book was written to be used in a 'skills group training' scenario for people with DID or DDNOS, with experienced clinicians leading the training. I'm not aware of anything that like happening in the UK, so maybe this book will prod things forwards on that front. However, the authors also recognise the value of the book being used alongside individual psychotherapy, and that's the context where I see it being most helpful currently.

Boon and colleagues provide some clear and comprehensive explanations in non-jargon terms of the theory of structural dissociation, but the main focus of the book is on developing 'skills' for managing life with a dissociative disorder. The first chapter homes in on grounding—how to stay present. As the authors say, if you can't stay present, there's not a lot of work that you can do in therapy, so it's a vital skill to learn, and it *can* be learnt! There are then a number of other topics covered, one chapter at a time, including:

- developing inner communication and cooperation
- reflecting and mentalising and overcoming the 'phobia of inner experience' (so, learning to think about what is going on inside — easier said than done)
- developing a sense of safety

- working on sleep, eating, daily routines, self-care and relaxation
- coping with triggers and memories
- understanding emotions and cognitions, such as anger, fear, shame and guilt
- managing attachment and relationships, including assertiveness and managing healthy boundaries

The scope of the book is comprehensive but not overwhelming, and each chapter comes with explanations, exercises and homework.



I'm a fair way down my therapeutic journey, but I've found this book so helpful that I'm going to go back to the start and fill in any gaps I have by working through it in and alongside my therapy a chapter at a time.

It's hard for therapists, let alone clients, to hold in mind the overall 'roadmap' of recovery: sometimes even bearing in mind the concept of a three-phase approach to treatment is hard enough. But this book really helps to drill down into many of the 'safety and stabilisation' aspects of phase 1 of treatment for DID and DDNOS. It gives a sense of hope, because it presents many of the challenges we face as skills that we *can* learn. It doesn't go into dealing with trauma

or working on memories (phase 2 stuff) — so people who don't have specific memories to work on, who have that frustrating amnesic blank, will get a huge amount out of this book if they are willing to put in the hard work.

The authors have a very clear stance in terms of integration being the end-goal of treatment, as laid out in the ISSTD guidelines for treating DID in adults, but the way that they explain how dissociation is the *opposite* of integration is very helpful and makes a lot of sense.

At about £22 it's not cheap, but if I had to choose between £22 on food and £22 for this book, I'd be willing to cope with a few days' tumble rumbles for the long-term gain of everything that this book has to offer.

*Coping with Trauma-Related Dissociation* is available to purchase at Amazon via this link: <http://tinyurl.com/newDIDbook>. You can also find it on the homepage of the PODS website under 'recommended reading' if you lose this link!

Carolyn Spring



## Other Events

### “Dissociation, Trauma and Time-Travelling ... or Living and Working with Dissociative Identity Disorder”

a joint Deep Release & TASC Training Day with Hazel Barton, Jane Potts & Carolyn Spring  
9.30 am—5.00 pm on the following dates:

**Saturday 25 June 2011**, Huntingdon, Cambs (£50.00 per person)

**Saturday 10 September 2011**, Hemel Hempstead, Herts (£50.00 per person)

**Saturday 29 October 2011**, Cardiff, Wales (£40.00 per person for ACC members / £60.00 for non-members)

**Saturday 10 December 2011**, Preston, Lancashire (£60.00 per person)

Suitable for counsellors, therapists, survivors, partners, pastoral workers, Rape Crisis Centre staff, and anyone else interested or involved in the field of sexual abuse, trauma and dissociation

#### COURSE OVERVIEW

Carolyn Spring has Dissociative Identity Disorder as a result of early childhood extreme/ritual abuse. Using her story as a basis, and expanding out into the experiences from 'the other side' of two leading therapists, this training day will explore the mechanisms of dissociation and DID, the effect of trauma on the body and brain, the reality and therapeutic minefields of disorganised attachment, and how healing and recovery can be possible through appropriate therapeutic work.

The training will be led by Hazel Barton and Dr Jane Potts, two therapists experienced in the field of trauma and dissociation, as well as by Carolyn herself. It will be a fascinating day full of insights into both living and working with DID.

*Please note that some content may be triggering for survivors but attempts will be made throughout the day to give advance warning*

Previous feedback:

- “Very eloquent speakers, with so much knowledge, taking the time to share.”
- “Perfect combination of tangible and accessible theory with human real experience made it very clear and easy to conceptualise.”
- “I found most helpful the humour, the genuineness, the honesty and vulnerability and the courage to say what survivors need.”
- “I have learnt so much from today. So informative. Probably the best training day I’ve ever been on.”
- “Three lovely people whose personality and humour kept us engaged. Felt they created a sense of safety for attendees.”
- “From booking onto this course to the running of this day it has been very well organised—including great handouts. Thank you.”
- “Was a really fantastic day. Gave real insight into why dissociation develops and how best to work with it.”

For further information or to book please go to [www.tasc-online.org.uk/training.html](http://www.tasc-online.org.uk/training.html).



## Useful Resources

### Emergency DID Info Cards

To date we have now distributed over 2000 of our 'Emergency DID Information Cards' and they are still available free of charge in the UK to anyone who wants them (contact us for overseas requests).

They were produced in response to a request from a therapist whose client was ill-treated by healthcare staff following an emergency admission to A&E. None of the staff had heard of DID and even the duty psychiatrist was sceptical. It was therefore felt that it would be useful to have a card which carried some information about DID and which would be presented to health staff to inform them and to help 'authenticate' the condition.

The cards are double-sided business-card size so they fit easily into a purse or wallet. One side contains information on a "How to Help" basis, explaining the existence of alters and the realities of amnesia and disorientation, while the reverse side carries more technical information about DID from a medical perspective.

Go to [www.pods-online.org.uk/resources.html](http://www.pods-online.org.uk/resources.html) for more details and to order, or email [info@pods-online.org.uk](mailto:info@pods-online.org.uk) letting us know your name, address and how many you would like.

#### FRONT

##### DID Emergency Information Card — How to Help

I have a condition known as Dissociative Identity Disorder. I am not 'mad' and nor am I attention-seeking or time-wasting. I have a history of severe childhood trauma and DID is a coping mechanism for this. DID is treatable via long-term individual psychotherapy.

I have different 'parts', 'alters' or 'personalities'. These may present as being of a different gender, age and developmental stage. We may be very frightened and traumatised and have difficulty distinguishing between the past and the present, so we may find it really hard to calm down. Please be careful about touching us and be gentle and patient. 'Alter personalities' may not be aware of what we have done (eg self-harm or attempted suicide) or where we are. We may be very disorientated and amnesic for what has just happened. Please try to understand our behaviours in the light of our past experiences.

This card is produced by PODS. For more information about DID and organisations that can help please go to our website at: [www.pods-online.org.uk](http://www.pods-online.org.uk).



#### BACK

##### Information on DID — For Health Professionals

DID (formerly MPD): see DSM-IV TR section 300.14 and ICD10 section F44.

- complex form of Post Traumatic Stress Disorder caused by severe childhood trauma and abuse
- as in PTSD, may be severe dysregulation with intrusions such as flashbacks and avoidances eg phobia of touch; also episodes of overwhelming psychological distress, with amnesia, disorientation, marked somatisation
- patient/client may benefit from contacting therapist or supporter to stabilise
- "characterised by the presence of two or more distinct identities or personality states that recurrently take control of the individual's behaviour, accompanied by an inability to recall important personal information that is too extensive to be explained by ordinary forgetfulness" (DSM-IV TR)
- for further information go to <http://tinyurl.com/DIDinfo>

## TAG (Trauma and Abuse Group)



TAG is the Trauma and Abuse Group and is a charity with a membership open to survivors, counsellors, partners, healthcare professionals—just about anyone!

Membership is only £15.00 per year and the benefits include at least two copies per year of their journal/magazine *Interact* (edited by Carolyn Spring). This contains many articles of interest to both therapists and survivors/partners — each edition contains a range of contributions aimed at a wide readership. TAG members also receive quarterly members' e-newsletters which contains up-to-date details of training events, as well as further articles, book notices and reviews, and regular news items. Back copies of *Interact* are also for sale either direct from TAG or via the PODS website at [www.pods-online.org.uk/resources.html](http://www.pods-online.org.uk/resources.html).

For further information about TAG go to [www.tag-uk.net](http://www.tag-uk.net)