ROADMAP FOR MODULE TWO



Identifying Dissociation

List 3 red flags associated with structural dissociation:

Have you noticed any of these signs in your clients? Add them to your "My Patients" list.

My Patients:

Working with Dissociation

What's the first thing you might do if you suspect you have a dissociative client?

Ogden and van der Kolk presented 3 approaches to working with dissociation.

Which of these approaches might work with your patients?

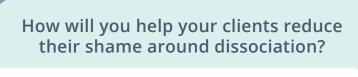
A somatic approach

A experiential approach

A cognitive approach



Have you updated your patient list with approaches you'll try using?









Calming a Dysregulated Nervous System

Fisher and Lanius presented several strategies for calming a client's nervous system. Which strategies will you use?

Have you updated your patient list with strategies you'll try using?





Common Mistakes in Working with Dissociation

Have you noticed the following cues while working with dissociation?

- My patient had a very difficult time getting re-grounded with me.
- My patient began to get very hyperaroused, and even started to self-harm in session

That means your pacing is off. Slowing down will help to prevent your patient from dissociating further or becoming dysregulated.

What language will you use to help clients feel comfortable discussing dissociation?



Dissociative Identity Disorder (DID)

Lanius gave 4 questions you can ask to help you screen for DID. What are they?

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- I can differentiate between signs of DID and dissociation.

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Brand gave 5 types of dissociation needed to arrive at a diagnosis for DID. What are they?

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- I can differentiate between voicehearing related to schizophrenia vs. voice-hearing related to dissociation.