International Society for the Study of Trauma and Dissociation
Professional Training Program: Diagnosis and Treatment of
Dissociative Disorders, Standard Course, Part I
[Curriculum for 2012-2013 ISSTD “Standard” Course]
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Standard Course Curriculum, Part I, 2012-2013

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Intended Participants: Licensed mental health professionals (psychiatrists, psychologists, clinical social workers, mental health counselors) who are personally treating a person with Dissociative Identity Disorder or Dissociative Disorder NOS.

Meeting Frequency: Once monthly for 8 months.

Course Format: 2.5 hour sessions of literature discussion, lecture, and discussion of your cases.

Evaluation Forms: are online with the Course Syllabus. Complete the forms and submit them at the conclusion of the course.

History: Originally created Elizabeth Bowman, M.D., in Indianapolis, and expanded by Rich Chefetz, M.D., and again by Rich Chefetz, M.D. and Elizabeth Howell, Ph.D. The current version of the course was designed by Elizabeth Howell, Ph.D. and Shielagh Shusta-Hochberg, Ph.D.

Acknowledgment: Much of the course springs from Richard P. Kluft’s creative and prolific formulations of DID therapy. We and the field of dissociation are deeply indebted to him.

Disclaimer: This course provides an introduction to a variety of specific techniques that are applicable to stage-oriented treatment of complex trauma and dissociation. Nevertheless, this course is not adequate training in hypnosis or EMDR. If you plan to use these modalities, you should seek additional, specialized training, in those modalities.

Recommendation: We recommend that you join ISSTD. Membership in ISSTD gives you free access to every past issue of the Journal of Trauma & Dissociation and a wealth of clinical articles and discussions from past issues of The ISSTD Newsletter.

Educational Materials
You will receive a PDF file containing the assigned readings, and you are asked to buy a copy of Frank Putnam’s, Diagnosis and Treatment of Multiple Personality Disorder (1988). This is an old, but still excellent text, and it can be purchased used or new for a low price, ranging $1 to $20. Several of the chapters from the book are included in the curriculum. Additionally, it is a book well worth having.

**Educational Objectives**

**Overall Objective:** At the end of this experience, participants will have sufficient knowledge to better be able to diagnose Dissociative Identity Disorder (DID) and Dissociative Disorder Not Otherwise Specified (DDNOS), and will have a solid foundation of knowledge and skills needed to conduct individual psychotherapy to treat these illnesses.

**Class 1: Beginning the Treatment: Putting the Essentials in Place**

Objectives:

1. Be able to begin the initial formal treatment with caveats and limitations clearly articulated. The clinician should be prepared to submit to the new patient any initial paperwork and should be able to begin formal charting and adequate progress note-taking.

2. Be able to clearly delineate clinician availability between session appointments including setting up contingency plans if patients should experience emergencies between sessions and after hours when they may not immediately reach the treating clinician.

3. Be able to explain that treatment for trauma, and especially for the dissociative disorders, needs to proceed carefully so as not to unduly overwhelm or destabilize patients, and help manage expectations by explaining that such treatment typically takes years rather than weeks or months, and that in some cases a definitive diagnosis may not be reached until later in the treatment.


5. Have an understanding of the phenomenological world and characteristics of people with complex trauma and dissociative disorders.

**Class 1: Assigned Reading**

*The Course Directors assume participants are very familiar with the appropriate formal intake process. This basic topic is stressed here because dissociative survivors of trauma are often vulnerable to and made anxious by a lack of clear clinical limits and boundaries; likewise, they are reassured by their presence. It goes without saying that clear boundaries and limits protect clinicians as well.*


**Class 1: For Reference or Additional Study**


**Class 2: Diagnostic Basics**

Objectives:

1. Be able to demonstrate knowledge of questions for an office mental status examination for complex trauma and dissociative disorders.
2. Be able to understand the rationale for the comprehensive diagnostic workup.
3. Be able to use the DES (Dissociative Experiences Scale) to screen for pathological dissociation; and the SDQ (Somatoform Dissociation Questionnaire) for screening and assessment.
4. Be able to diagnose DID or DDNOS (ego state disorder), using the DDIS (Dissociative Disorders Interview Schedule), SCID-D (Structured Clinical Interview for DSM-IV Dissociative Disorders), the MID, or other diagnostic questions and instruments that screen for and/or assess amnesia, depersonalization, derealization, identity confusion, identity alteration and somatoform dissociation.

5. Understand and be able to recognize common clinical presentations and co-morbid diagnoses of persons with ego state or alternate personalities typical of DDNOS or DID.

6. Be able to state five characteristics of a factitious or malingered presentation of DID.

Class 2: Assigned Reading


5. The following are recommended for study and are available to individuals through the web: SDQ 5 and the SDQ20 (The Somatoform Dissociation Questionnaires). ISSTD members may go to the Members Corner of the www.ISST-D.org website. Non-members may go to Ellert Nijenhuis’s website (www.enijenhuis.nl).


Class 2: For Reference or Additional Study

1. Nijenhuis, E. R. S. articles on somatoform dissociation. Individuals may go to his website (www.enijenhuis.nl) and request free membership in the 'download for members' section


foundational article in the DID field. Contains clinical symptoms and common comorbid diagnoses.


**Class 3: Initial Steps: Pacing and Phase-Oriented Treatment**

**Objectives:**

1. Understand the stage or phase-oriented model of working with trauma and its application to work with dissociative disorders, reiterating the need to slow down patients who are urgently rushing toward recovery without sufficient preparation, risking dangerous decompensation.

2. Be able to be on the alert for landmines of dissociated traumatic material that may explode without warning.

3. Be able to deal with the sudden emergence of traumatic material when it does occur.

**Class 3: Assigned Reading**


4. Class 3: For Reference or Additional Study

3. Van der Hart, O., & Steele K. (1997). Time distortions in dissociative identity disorder: Janetian concepts and treatment, *Dissociation*, 10:2, 91-103. [This article has a good, but brief section on phase-oriented treatment.]

Class 4: Boundaries

[The Course Directors assume participants are very familiar with the concept of interpersonal boundaries. This topic is stressed here because: Often having been subject to severe boundary violations in their early lives, many dissociative patients are vulnerable to repetitions of the violations of their personal boundaries, and sometimes they may be prone to violate other’s boundaries; they may lack adequate understanding of how therapeutic boundaries are designed to protect them.]

Objectives:

1. Understand the rationale for the maintenance of appropriate therapeutic boundaries in the treatment of DID and DDNOS.
2. Be prepared to respond appropriately to requests for touching, holding, or sexual activity.
3. Understand the use or abuse of personal disclosure.
4. Understand the influence of dissociation on the function of the clinician.

Class 4: Assigned Reading

3. Benatar, M. (2003). Surviving the bad object. *Journal of Trauma and Dissociation*, 4(2), 11-25. [Note your responses to reading this and in class can discuss. An excellent case study illustration of boundary issues in a clinical impasse and resolution in a transference-countertransference enactment; highly relevant to treating the toxic patient.]
Class 4: For Reference or Additional Study


Class 5: Transference and Countertransference

Objectives:

1. Understand the significance of the treatment frame and how this affects both transference and countertransference experience.

2. Understand the common transference reactions and associated transference-countertransference matrices in the treatment of persons with dissociative disorders.

3. Understand the range of countertransference responses to dissociative processes.

4. Understand traumatic transference.

5. Be able to discuss Davies and Frawley’s (1994) eight transference-countertransference positions as well as Karpman's drama triangle* in the evaluation of transference and countertransference. *Karpman’s triangle describes the universal positions of victim, perpetrator and rescuer; note similarity to Davies and Frawley (1994).

Class 5: Assigned Reading


transference and countertransference positions. The book itself has an accumulated wisdom in a relational psychology perspective.


**Class 5: For Reference or Additional Study**


5. Bromberg, P. (2003). Something wicked this way comes. Trauma, dissociation, and conflict: The space where psychoanalysis, cognitive science, and neuroscience overlap. *Psychoanalytic Psychology*, 20, 558-574. [This article has an excellent section on shame in the transference-countertransference.]


**Class 6: Organization of the Personality**

Objectives:

1. Be able to describe the usual kinds of alter personalities and relationships among them.
2. Be able to facilitate negotiation with and between alter personality states.
3. Understand the meaning of the terminology, Emotional Part of the Personality and the Apparently Normal Part of the Personality
4. Understand the genesis and meaning of somatoform dissociation.

**Class 6: Assigned Readings**

listing of types of personality states in DID, manifestations of altered personalities, and a discussion of the switching process.


3. Van der Hart, O., Nijenhuis, E. R. S., Steele, K., & Brown, D. (2004). Trauma-related dissociation: Conceptual clarity, lost and found. Australia and New Zealand Journal of Psychiatry. 38, 906–914. [This article may be challenging but an excellent description of the authors’ view of the structural dissociation of personality.]

Class 6: For Reference or Additional Study


Class 7: Treatment Techniques and Theoretical Approaches

Objectives:

1. Understand and know how to avoid common clinical pitfalls of work with dissociative disordered patients.
2. Know techniques to pace the emergence of traumatic material in the therapy of DID or DDNOS patients.
3. Understand the place of abreaction of trauma in the treatment of DID or DDNOS patients.
4. Be able to use "talking through" and other techniques to encourage co-consciousness of alter personality states.

Class 7: Assigned Reading


**Class 7: For Reference or Additional Study**


**Class 8: Clinical Approaches to Working with Persecutory Alters**

Objectives:
1. Be able to state two techniques for working with persecutory alter ego states.
2. Be able to discuss the creation of persecutory alters.
3. Be able to understand the importance of persecutory alters and their role in survival.

**Class 8: Assigned Readings**


**Class 8: For Reference or Additional Study**


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### FOR FURTHER READING AND REFERENCE


29. Goodwin, J. & Attias, R. (Eds.), *Splintered reflections: Images of the body in treatment*. New York: Basic Books. [This has been retitled “Memories of Fear,” and is available on David Baldwin’s trauma pages: http://www.trauma-pages.com].


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