

Expression of Self In the Treatment of Complex Trauma and Dissociation

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Abstract

Expression of self is essential to recovery; a dialogue of disclosure and exploration. Trauma victims are characterized by an impaired ability to express their feelings, needs, and wishes thereby inhibiting their ability to form healthy, meaningful relationships. This workshop delineates factors inhibiting the expression of self, and details strategic and specific interventions to facilitate the recovery of voice and self.

Summary

Expression of self is essential to recovery. Therapy is inherently a verbal process; a dialogue of disclosure and exploration. Not merely telling the tale of abuse but more in the revealing and recognition of what it means to be one's self. Through that shared interaction, our clients come to know themselves. Successful therapy hinges on helping our clients find their voice.

Trauma survivors are characterized by numerous problems and difficulties in being able to give voice to their feelings, wants, and dreams. From the deficits and distortions arising from dysfunctional family dynamics, through the fundamental separation of body and mind via somatoform dissociation and alexithymia, to the complete disconnect of dissociative identity disorder; our clients have been taught to not speak their mind, to not know or name their feelings, and to not acknowledge their needs. This impaired ability to express one's self inhibits and interferes with the ability to form healthy, meaningful relationships further shaming and isolating the survivor.

This workshop delineates the factors inhibiting the expression of self, discusses the impact of the loss of voice and loss of self, and details strategic and specific interventions to facilitate the recovery of voice and self.

Objectives:

Participants will be able to

1. discuss the relationship between self-expression and the development of a sense of self
2. delineate factors contributing to the loss of self-expression,
3. detail specific interventions to facilitate self-expression

INTRODUCTION

One reason I think of shame states as a variant of a traumatic state is because when in shame's grip, the person often can't speak. There is both immobilization of movement (loss of agency) and an inability to speak that often fuels further shame.

... about reclaiming one's self after being subjugated to a shame state: finding one's true voice as an aspect of restoring your agency and dignity. (K. Benau, 2017)

Trauma Clients Reveal a Lack of an Authentic Self

Trauma survivors are taught to silence their feelings, wants, and dreams.
Their inability to express their experiences results in the loss of self.

Words Have Power

Words reflect/reveal our perceptions of reality and our self in the world

TAKE HOME MESSAGE

Complex Relational Trauma requires clients to give up their authentic self in the service of survival and in service of the abusive/exploitive other

[E]motional neglect is a traumatic configuration of the relational field including the child and his/her caregivers, so that the child's developmental needs are disavowed, and his/her internal world is subdued to parental projections, fears, desires, and so on. (A. Schimmenti, 2017)

Self-Expression is the Expression of the Self

Self-Expression is Essential to Recovery.

THE RELATIONSHIP BETWEEN SELF EXPRESSION AND SENSE OF SELF

Self as Organizing Principle of Experience

Self as Process

Self as Active Verb

Self in Relationship to Others

Attachment

Acknowledgement, Acceptance, Approval, and Affection

Identification, Opposition, and Autonomy

Role of Boundaries in Defining the Self

Self vs Other

Me vs You

What I Like vs What I Don't Like

FACTORS INHIBITING SELF EXPRESSION

Dysfunctional Family Dynamics

Don't Talk, Don't Tell

Your Feelings Are Wrong

Bateson's Double Bind Theory

Lack of Personal Boundaries

Enmeshment

Inability to stop abuse leads to feeling powerless

Inability to create and/or repair disruption of relationship
with caregiver leads to feeling powerless

Play a Role, Not Yourself

Alexithymia

- Lack of Affective Language
- Lack of Affective Awareness
- Correlation with Somatoform Dissociation

Dissociative Defenses

- Dissociation as Means of Coping with Multiple, Conflicting Demands
- Split in Awareness of Self
- Alters As Roles
- Me vs Not Me

Neglect

- Non recognition is greater than a failure to see
- Rejection of the child as a person
- Strips the child of needs, wants, feelings, and value
- Physical, sexual and emotional abuse result in “Not-Me”
(I do/feel things I don’t want to do/feel)
- Neglect results in “No-Me”
(I do not exist)

GOALS FOR TREATMENT

- Development of Affective Language
- Development of Boundaries
- Development of Meaningful Narrative
- Defining and Expressing Goals, Wishes, and Dreams
- Defining and Expressing an Authentic Self

RESPONSIBILITIES OF THE THERAPIST

- Empathically Attuned
- Mindfully Present
- Aware of Counter-transferences
 - Positive
 - Negative

GENERAL GUIDELINES

- Treatment is non linear
- Gentle weaving in of treatment lessons through-out the therapeutic encounter
- Processing the nuances of relationships
- Reclaiming one's self after being subjugated to a shame state
- Finding one's true voice as an aspect of restoring your agency and dignity

THERAPEUTIC INTERVENTIONS

- Somatic Awareness Exercises
 - Now I Am Aware Of
 - Body Inventory
 - What Is It Like To Be You Now?
- Trying On Feelings
 - Observe and Reflect on Physiological Markers
 - Mirror Client Postures
 - Attend to Counter Transference Feelings
 - Try Saying: “I am feeling X.”
 - What Is It Like To Be You Now?

Saying “No” Experiment: “*At this moment, it just doesn’t feel right.*”

- Experiment vs Exercise
- Start Small
- Feelings vs Reasons
- Escape Clause

Redirection Experiment

- Experiment vs Exercise
- Pre-experiment Preparation
- Initial Statement of Compliance
- Second Statement of Disagreement

Collaborative Goal Setting

- Begins with Initial Contact
- Power with Model
- Invite Input
- What Is It Like To Be You Now?

Meaningful Narratives

- Lessons Learned
- Deals Made
- Shame vs Powerlessness
- Coherence in the Face of Conflict and Chaos
- Facilitate a comprehensive, overarching narrative to foster an authentic self

Conclusion

BIBLIOGRAPHY

Benau, K. (2017) Private communication

Chefetz, R.A. (2015) *Intensive Psychotherapy for Persistent Dissociative Processes*. W.W. Norton & Co., New York

Clayton, K (2004) The interrelatedness of disconnection; The relationship between dissociative tendencies and alexithymia, *Journal of Trauma and Dissociation* 5 (1) 77 - 101

Dalenberg, C.J. (2000) *Countertransference in the treatment of trauma*. American Psychological Association

Danylchuk, L.S., Connors, K, J., (2016) *Treating Complex Trauma and Dissociation: A practical guide to navigating therapeutic challenges*. Routledge, New York

Freyd, J., Klest, B., & Allard, C., (2005) Betrayal trauma: Relationship to physical health, psychological distress and a written disclosure interview. *Journal of Trauma and Dissociation* 6 (3) 83 - 104

Liotti, G. (1992) Disorganized/disoriented attachment in the etiology of the dissociative disorders. *Dissociation*, 5 (4), 196-204

McCann, I.L., Pearlman, L.A. (1990) *Psychological Trauma and the Adult Survivor: Theory, Therapy, and Transformation*. Brunner/Mazel, New York

Schimmenti, A., (2017) Private communication

Schore A. (1994) *Affect regulation and the origin of the self: The neurobiology of emotional development*. Hillsdale, NJ Erlbaum

Van der Hart, O, Nijenhuis, E., Steele, K., (2006) *The Haunted Self*. W.W. Norton & Co., New York