

Coping with Trauma-Related Dissociation: Skills Training for Patients and Therapists

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A Book Review by Tim Brunson, PhD

Psychological trauma is probably the most prevalent problem currently addressed by mental health practitioners. Unfortunately for many people, trauma often results in a variety of dissociation reactions - many of which go by diagnostic names such as Dissociative Identity Disorder, Post Traumatic Stress Disorder, and Dissociative Disorder Not Otherwise Specified. Coping with Trauma-Related Dissociation: Skills Training for Patients and Therapists by Suzette Boon, PhD, Kathy Steele, MN, CS, and Onno Van Der Hart, PhD, is an extremely comprehensive volume. It is intended to provide therapists, patients, and their families considerable insight and numerous effective tools.

Their book is based upon one central concept. They insist that sufferers of trauma-related dissociation need to achieve better personality integration. They claim that this comes from improved self-knowledge and acceptance. To do this they start with symptom stabilization, symptom reduction, and skills training. Once that is accomplished, they next move on to the treatment of traumatic memories. And lastly, the patient is then considered ready to complete the required personality integration. The cumulative result from these efforts is believed to be a vast improvement in the patient's life.

They start off by educating the reader as to the basic theories involving dissociation disorders. Although some clinicians will find this a welcome refresher, for others it is a clear, concise, and appropriately documented explanation.

The bulk of this book is a set of logically organized topics and related exercises designed to follow the three-step approach mentioned above. Each topic is encapsulated in an individual chapter, which offers a very coherent explanation followed by one or more homework assignments, which will help the patient integrate core ideas. Each chapter can thus be tackled as a discrete subject prior to moving to the next.

This book has several positive attributes. Other than its depth and comprehensiveness, I find that its most enduring quality comes from the authors' display of understanding and concern about the patient's comfort and safety. Additionally, while some clinician-authors frequently try to oversimplify trauma disorders, this book respects the complexity of the disorder while breaking treatment protocols into manageable bits of therapy. Additionally, the exercises are respectful yet sufficiently provoking to provide adequate self-discovery, which then can be addressed in a therapeutic relationship.

There is yet another important value to be found in this book. Even though their approach is primarily presented for the purpose of relieving the suffering of trauma-related disorder patients, the authors' wisdom can just as easily be applied to just about anyone wishing to improve their effectiveness and how smoothly they navigate through the myriad of challenges that life throws at them everyday.

Even though the authors do not use the word hypnosis anywhere in the book - other than one off-handed comment about "highway hypnosis" - they presented several hypnotic-like exercises involving mindfulness and guided imagery. While they did address a very relevant concept regarding their patients' "phobia of inner experiences," an experienced hypnotherapist is left to read between the lines when it comes to the appropriateness of their skills when it comes to the treatment of such trauma-related disorders. The danger herein involves inappropriately removing the patient's resistance - which may still provide a necessary feeling of safety. This is true even though there may be a need to promote transformation by enhancing selective thought. As this is one area that most mental health practitioners and clinical hypnotherapists have insufficient training, the considerable need for caution warrants that this issue receives separate discussion.

Despite this book's considerable value, there are a just a few relatively minor concerns that I wish had been addressed. First, considering that the typical dissociation patient is already dealing with a very stressful and disorienting situation, I found that the amount of information and size of this book to be overwhelming. I wonder if it would not be more effective if the book was reorganized into three volumes, namely: 1) orientation to the topic, symptom stabilization, and skills training, 2) effectively addressing trauma-causing memories, and 3) personality integration. Indeed, this format would still follow their 3-step approach without being as overbearing for patients. Of course, I would not make this statement if this book had been solely targeted to clinicians. Secondly, as this is a book both for clinicians and patients, I felt that the inclusion of how-to chapters regarding group training sessions to be rather awkward. Again, I would have left them out unless the book was only for therapists.

Obviously, this is a book that I would highly recommend for the intended audience. However, due to the prevalence of this disorder, I would expand my recommendation to include anyone who frequently deals with the public either in a clinical or other-helping relationship. In those cases the reader would gain a better understanding the behaviors that many people regularly exhibit.

