

GreenWood Mentors Presents

Certificate in Working with Self-states and Dissociation Across Disorders

Using theory and practice from CBT, DBT, ACT and CFT



Learn to work with multiple self-states across disorders as well as with dissociation between self-states, using evidence-based approaches.

Four online modules: 32 hours CPD or attend individual modules.

Module 1: 7th and 8th March 2023

Working with self-states and dissociation in anxiety, depression, OCD and more

Module 2: 5th and 6th April 2023

Working with self-states and dissociation in PTSD, cPTSD, and EUPD/BPD

Module 3: 9th and 10th May 2023

Working with self-states and dissociation in depersonalisation disorder, fugue states, somatoform disorders and PNES

Module 4: 5th and 6th June 2023

Working with self-states and dissociation in DID (dissociative identity disorder)

Introduction

The Cognitive Theory of Dissociation was developed by Dr Kennedy and colleagues and first published in 2004. Since then it has been developed and applied further and provided the theoretical basis for more published research. It is based in Aaron T Beck's cognitive model of personality and other

thinkers 'work on the self' (for example Pleydell-Pearce, Stopa, Brewin). It is very clinically relevant as little training is provided to clinicians on the topic, despite dissociation underlying many clinical presentations such as severe anxiety, depression, cPTSD, BPD, depersonalisation disorder, DID, somatoform disorders and more.

Fiona has a well-known interest in integrating CBT ACT DBT and CFT in theory and practice and applies this in her training, showing how insights from different approaches can complement each other in addressing the clinical issues stemming from dissociation.

Dissociation is an evolved set of responses elicited when a person is traumatised and helpless, and especially when the trauma is perpetrated by a carer. Learned in childhood, it continues into adulthood where instead of being adaptive it becomes problematic for the person.

This Certificated course takes us from working with anxiety, depression and OCD through trauma-based presentations (PTSD, cPTSD, EUPD) to 'dissociative disorders' (depersonalisation, fugue, somatoform and PNES) to DID (dissociative identity disorder)

Each module builds on the previous one to expand participants' skills in understanding, assessing, formulating and intervening with dissociation between self-states to enable the client to develop awareness, acceptance and control/choice over who and how to be in any given context.

We aim to create a coherent and safe small-group experience for participants during the training and a social media/supervision network to support certificated graduates going forwards.

The CBT model of self-states

Aaron T Beck's model of the self, created back in 1996, shows how 'orienting schemas' or our brains 'pattern-recognition systems, allow us to identify the current

context and the demands of the situation we find ourselves in. Other sets of schemas, organised together into modes, (or CBT 'hot cross buns') determine how we respond in terms of thinking, feeling, body sensations and physiological responses. For example, if I have a lift phobia and my friend invites me to meet at the top of the Eiffel Tower, my orienting schemas will recognise this as a threatening situation. I will transition into a self-state called "lift phobia mode" and may not be able to control or choose my responses from then on.

The concept of a continuously constructed, or 'working self' which we create from moment to moment, is also important in this work. Mental imagery plays a big role in the construction of self-states from moment to moment. The difference between an I-self and a Me-self (Brewin 2023) is also important.

By increasing our awareness of the different modes which make up our repertoire of self-states (our personality), we can begin to develop a compassionate observing self, involving acceptance of our-selves in all our manifestations and learning with the therapist to exercise control/choice over who and how we want to be.

Dissociation within and between self-states

The cognitive model of dissociation (Kennedy et al 2004, 2013) shows how dissociative processes affect perception, experience, and sense of self. Adversity in childhood, particularly where the child is helpless, can create dissociation between self-states so that we have reduced awareness acceptance and control/choice over our-selves.

At the perceptual level, we can experience spacing out (failure to process any information), and intrusive imagery. At the experiential level, within-mode dissociation means we can become unable to think, feel, respond physically, or carry out certain behaviours, as well as intrusions in each of these areas (intrusive thoughts, feelings, behaviours, physical responses).

The course demonstrates how the cognitive model of dissociation can be used to formulate the extent of structural dissociation of self-states and work to reduce this. We also present our new scale (in development) to assess dissociation between self-states.

Assessing self-states

We will share the scale currently in development to measure dissociation between self-states, the D-ISS. The scale is a 25-item 5-factor measure of Awareness, Acceptance, Control, Integration and Difference/Distance regarding a client's self-states. It has already demonstrated a good factor structure and internal reliability. It can be used in assessment and as a before and after outcome measure.

We will also discuss many other ways of assessing self-states and 'mapping the system' using communication books, diaries, artwork, play therapy techniques. Clients are asked to survey their friends and family (where safe to do so) regarding the different ways they can be in different contexts.

Validation and acceptance of all self-states is present from the therapist throughout assessment and treatment, whilst being careful not to approve or endorse abusive behaviours.

Intervening with self-states

Mindfulness practices allow us to create and access a compassionate observing self, or an overarching perspective on all of our self-states. Mindfulness also allows us to develop control and choice as to which self-states we can access. Mindfully observing and describing self-states together with our therapist helps us to develop perspective and a compassionate observing self. Techniques for change include

- introducing and normalising the concept of multiplicity and self-states to the client
- creative descriptions and representation of self-states using art, poetry, music, journalling, scrapbooking, WhatsApp groups
- commitment work from DBT/motivational interviewing/ACT creative helplessness... “why change and what are the obstacles”?
- mindfulness work to develop a compassionate observing self and become able to take an overarching perspective on our-selves
- defusing from fixed narratives about the self and self-states
- identifying values and goals using an ACT/DBT approach
- validation of each and every self-state's function in maintaining the client's physical and social safety
- ‘parts’ work, including chair work and gestalt, schema therapy techniques to facilitate communication between parts
- practical skills from DBT to calm and centre the self
- compassion-focussed techniques to develop self-acceptance, loving kindness, wisdom and strength towards our-selves in every self-state
- team-building techniques from management development practice to encourage the client to use self-states working together to handle specific challenges or solve problems with psychological flexibility

These are the general principles which will guide our work throughout the course. Brief descriptions of individual modules are below. For a detailed description of each module please visit www.greenwoodmentors.com/training

Your Trainer: Dr Fiona Kennedy



Dr Fiona Kennedy is a respected and knowledgeable, fun trainer with a knack of making complex concepts accessible without losing their richness. She has many years' experience in managing and delivering services in the NHS, and is Director of Greenwood Mentors Ltd, an award-winning company providing training, supervision and therapy.

She is a Fellow of the BABCP and a BABCP Accredited Trainer, Supervisor and Therapist, an Associate Fellow of the BPS and a BPS RAPPs Supervisor.

She has written books including the guided therapy book *Get Your Life Back: The Most Effective Therapies for a Better You*, for clients, shortlisted for the BMA Popular Medical Book Of The Year. In 2020 a therapist's companion to this appeared as part of the Routledge CBT Distinctive Features series: *Integrating CBT and Third Wave Therapies*. She co-edited *Cognitive Behavioural Approaches to the Understanding and Treatment of Dissociation* and developed the CBT theory of dissociation. Fiona and her husband have volunteered in India for the past 16 years, enabling volunteers and NGO staff to work with children and young people from severe disadvantage as well as with tribal groups from rural areas.

She is a visiting academic at Southampton University and an Associate Editor for *The Cognitive Behaviour Therapist*.

Module 1

Working with Self-states and Dissociation in Anxiety, Depression, OCD.. and more

With Dr Fiona Kennedy

Live online 9.30-1.30 GMT, 7th and 8th March 2023 or watch later (7.5 hours CPD)

Applying the Cognitive Model of self-states and dissociation to common mental health problems, using CBT and Third Wave therapies to help clients change

A one - day (two mornings) workshop: the first in our CBT, Third Wave and self-states certificate, or a stand-alone module.

Part 1 of the Certificate in Working with Self-States and Dissociation Across Disorders or a stand-alone module.

Are you looking for fresh CBT and Third Wave approaches to helping clients with anxiety, OCD, depression, and PTSD?

This course will show you how to recognise, understand and help change dissociation and self-states in problems we commonly deal with in therapy.

Self-states or CBT 'modes' are sets of schemas (ways of perceiving and responding to the environment) learned in childhood contexts, which we can struggle to manage as adults.

This training will explain Aaron T Beck's concept of the self, or personality as our repertoire of self-states, and how it applies to our experiences of anxiety, OCD and depression. It will show how to help clients develop awareness, acceptance and control of their self-states to help them live a meaningful life.

Dr Fiona Kennedy presents everything you need to know about the CBT theory of self and personality, self-states and the 'working self', and how to use this understanding to help clients. Dissociation between self-states along with self-state switching triggered by environmental events is covered. Help your clients get control and choice over which self-state they wish to access in any situation, using CBT, DBT, ACT and CFT.

Anxiety

Anxiety, including generalised anxiety disorder, phobias, social anxiety, and health anxiety, can involve splits (dissociation) between anxious self-states and more balanced states of mind. At high levels of anxiety "spacing out" dissociation often occurs, disrupting the individual's sense of continuity of self and interfering with therapy. Anxiety disorders often also involve becoming frozen (unable to move), becoming unable to think, etc, as well as experiencing intrusive frightening imagery and verbal thoughts.

OCD

In OCD, the self-talk is often about an inflated sense of responsibility, with consequent guilt and shame, leading to rituals and compulsions. In one self-state the client can see the irrationality of her behaviour, in another the compulsions seem the

only option. Dissociative experiences are often present as the client carries out rituals and routines, with a sense of comfort and detachment. Intrusive imagery and thoughts are a big part of OCD.

Depression

Depression involves learned hopeless and helpless self-states often with suicidal wishes to end being a self at all, to escape from the intolerability of the emotion of despair. On the other hand there may also be self-states of numbness and lack of feeling, which are disturbing to the client and her family in other ways. Disturbed somatic functioning including fatigue, eating and sleeping disturbances make life unbearable. Dissociation is present in the compartmentalisation of feelings and inability to access joy and pleasure, as well as in intrusive thoughts like "what's the point"?

PTSD

'Type 1' or 'simple' PTSD involving single-incident or longer traumatic experience, can lead to separation of self-states with dissociative processes maintaining this separation. The client may say "I have lost the self I used to be". In addition the client may dissociate at the perceptual and experiential level whilst in different self states. Dissociation during re-processing or re-living interventions can prevent them being effective.

Who will benefit from this course?

Anyone working with anxiety, depression or OCD who wants a fresh CBT/Third Wave approach focused on the self to incorporate into their work.

Learning methods

We will use instruction, demos, role-plays in breakout rooms, and video material to create a workshop with a small group of highly engaged participants, and we will make it fun!

What You Will Learn

- The CBT model and concepts of the self and self-states
- The CBT model of dissociation
- The role of dissociative processes in maintaining less than effective functioning in the world
- Formulating anxiety, depression and OCD using this model
- Working with these presentations to increase awareness, acceptance and control/choice of self-states

Take Aways

- The D-ISS (Dissociation-Integration of Self-States Scale): a brand-new scale measuring dissociation between self-states
- A FREE article by Dr Kennedy
- The foundations of the next three workshops, (2: cPTSD, EUPD/BPD ED and psychosis, 3: Depersonalisation, Fugue, Somatoform Disorders and PNES, 4: DID)
- A Greenwood Mentors Certificate in Working with Dissociation and Self-States Across Disorders (if you complete all four workshops)

Dates and times

9.30-1.30 GMT

7th and 8th March 2023 or watch online

Venue

online only or watch later

Module 2

Working with Self-States and Dissociation in PTSD, cPTSD and EUPD/BPD

with Dr Fiona Kennedy

Working with The Cognitive Model of Dissociation and the Self, using CBT and Third Wave therapies to help clients change

Live online 9.30-1.30 GMT, 3rd and 4th March 2023 or watch later (7.5 hours CPD)

A one - day (two mornings) workshop: the second in our CBT, Third Wave and Self-States certificate, or a stand-alone module.

Part 2 of the Certificate in Working with Self-States Across Disorders or a stand-alone module.

(All modules 1: Anxiety, Depression, OCD, PTSD 2: cPTSD and EUPD/BPD, 3: Depersonalisation, Fugue, Somatoform Disorders and PNES, 4: DID)

Are you looking for fresh CBT and Third wave approaches to helping clients with cPTSD, Eating Disorders, EUPD/BPD and psychosis??

This course will show you how to recognise, understand and help change self-states in challenging trauma-based presentations we deal with in therapy.

Self-states or CBT 'modes' are sets of schemas (ways of perceiving and responding to the environment) learned in childhood contexts, which we can struggle to manage as adults.

This training will explain Aaron T Beck's concept of the self, or 'personality' and how it applies to our experiences of PTSD, cPTSD and EUPD/BPD. It will show how to help clients develop **awareness, acceptance and control** of their self-states to help them live a meaningful life.

Dr Fiona Kennedy presents everything you need to know about the CBT theory of self and personality, self-states and the 'working self', and how to use this understanding to help clients. Dissociation between self-states along with self-state switching triggered by environmental events is covered. Help your clients get **control and choice** over which self-state they wish to access in any situation, using CBT, DBT, ACT and CFT.

Trauma-based presentations

During and after trauma, information-processing is affected by dissociative processes, especially if the survivor is helpless during the trauma. Dissociation can change the storage of information and our ability to recall events with an act of will. Absence of and compartmentalisation of memories is an important feature of PTSD, cPTSD and EUPD/BPD. In trauma-based presentations, dissociation at three levels: Perceptual Experiential and Self (PES) often occurs.

cPTSD

'Type 2' trauma, or complex PTSD (cPTSD) involves PTSD occurring in a prolonged way, with personal victimisation, often with multiple perpetrators, usually in childhood. These experiences create all of the changes described in Type 1 PTSD above, but also increased dissociation at all three PES levels, as well as problems with attachment, identity and sense of meaning and purpose. The multiplicity of selves and dissociation between self-states is greater in cPTSD.

EUPD/BPD

People whose presentations meet the criteria for EUPD/BPD usually have severe and prolonged trauma in their backgrounds, often at the hands of carers. The conflicts these experiences produce during child development can lead to a differently-developed self, involving more extreme dissociation between more self-states. This lack of integration and acceptance of one's one self-states affects

attachment, emotional regulation, impulse control, identity and sense of reality, all characteristic features of EUPD/DID.

Dissociation between self-states

Adversity in childhood, particularly where the child is helpless, can create dissociation between self-states so that we have reduced awareness acceptance and control/choice over our-selves. The course demonstrates how the cognitive model of dissociation can be used to formulate the extent of structural dissociation of self-states and work to reduce this. We also present our new scale (in development) to assess dissociation between self-states: the D-ISS.

Who will benefit from this course?

Anyone working with PTSD, cPTSD and EUPD/BPD who wants a fresh CBT/Third Wave approach to incorporate into their work.

Learning methods

We will use instruction, demos, role-plays in breakout rooms, and video material to create a workshop with a small group of highly engaged participants, and we will make it fun!

What You Will Learn

- CBT model and concepts of the self and dissociation
- Formulating PTSD, cPTSD and EUPD/BPD using this model
- Working with these presentations using CBT DBT ACT and CFT
- To increase awareness, acceptance and control/choice of self-states

Take Aways

- The D-ISS (Dissociation-Integration of Self-States Scale)
- A FREE article from Dr Kennedy
- The foundations of the next workshop on dissociative disorders, part 3 of the series
- A BPS Approved Certificate in Working with Self-States Across Disorders (if you complete all four workshops)

Dates and times

9.30-13.00 GMT April 3rd and 4th 2023 or watch later

Venue: online only

Module 3

Working with self-states in Depersonalisation Disorder, Fugue, Somatoform Disorder and PNES

Working with The Cognitive Model of the self, using CBT and Third Wave therapies to help clients change

A one - day (two mornings) workshop: the third in our "CBT and self-states" certificate, or a stand-alone module.

Part 3 of the Certificate in Working with Self-States Across Disorders

(all modules: 1 Anxiety, OCD and more; 2 PTSD, cPTSD, EUPD; 3 Depersonalisation, PNES, Fugue, Somatoform; 4 DID)

Are you looking for fresh CBT and Third wave approaches to helping clients with Depersonalisation Disorder, Fugue, Somatoform Disorder and PNES? (psychogenic non-epileptic seizures)?

This one-day (two mornings) course will show you how to recognise, understand and help change self-states in problems classed as dissociative disorders. The final two days in our series will examine how to work with DID (dissociative identity disorder).

Self-states or CBT 'modes 'are sets of schemas (ways of perceiving and responding to the environment) learned in childhood contexts, which we can struggle to manage as adults.

This training will explain Aaron T Beck's concept of the self, or 'personality 'and how it applies to our experiences of Depersonalisation Disorder, Fugue, Somatoform Disorder and PNES. It will show how to help clients develop awareness, acceptance and control of their self-states and dissociation to help them live a meaningful life.

Dr Fiona Kennedy presents everything you need to know about the CBT theory of self and personality, self-states and the 'working self', and how to use this understanding to help clients. Dissociation within self-states and between self-states along with self-state switching triggered by environmental events is covered. Help your clients get control and choice over which self-state they wish to access in any situation, and reduce other dissociative symptoms, using CBT, DBT, ACT and CFT.

Depersonalisation Disorder

Depersonalisation Disorder involves symptoms of depersonalisation (feeling that one or parts of it are not real), derealisation (feeling that the world or other people are not

real), and symptoms such as experiencing the world in 2D, feelings that one is wandering around in a fog, not being fully present in the world and unable to access it, not recognising oneself in the mirror, not feeling bodily sensations or emotions. Delusional beliefs may develop as an attempt to account for these experiences, such as that one is an alien.

Fugue States

Fugue states can last for a few minutes to days or years. In a fugue state, the person 'loses time' and/or lives a different life to their normal one, sometimes returning to their normal life after a period of time. Upon returning, they have amnesia for the events occurring in the fugue state.

PNES

PNES (psychogenic non-epileptic seizures) can take various forms but have characteristics of epileptic seizures such as a loss of conscious awareness, amnesia for events occurring during the episode. However EEG investigations show no epileptic activity. Clinicians and clients are often puzzled how to formulate these states and also how to treat them, as they are beyond the client's conscious control.

Medically Unexplained (Somatoform) Symptoms

Medically unexplained symptoms are a wide category of difficult to treat 'non-organic' presentations such as severe pain, trouble urinating, extreme fatigue and other somatoform symptoms. Among the many challenges these pose, the client's difficulty believing there is a psychological component to the problem is often a barrier to effective intervention.

Treating Dissociative Presentations

This training builds on the past two modules (working with self-states in anxiety, depression and OCD and working with self-states in PTSD, cPTSD and EUPD/BPD). In dissociative presentations, overcoming dissociation is necessary to mindfully observe and describe self-states - this can be achieved in various ways:

- feeding back to the client their behaviour in session
- inviting the client to survey family and friends to help collect data on dissociative symptoms
- recording symptoms in a diary, along with what makes them worse and what makes them better
- using the PES Cognitive Model of dissociation (Perceptual Experiential Self) to explain what is happening to the client.
- Formulating the cognitive processes involved in dissociation and in the appraisals of dissociation
- Using the therapeutic relationship to create a secure attachment to allow dissociative processes to break down
- Working at the level of the self:

- Using scrapbooking, WhatsApp groups, communication books to 'map the system' and facilitate communication between self-states
- identifying values and goals using an ACT/DBT approach
- mindfulness work to develop an observing self and take an overarching perspective on our-selves
- practical skills from DBT to calm and centre the self
- using adapted grounding techniques with signals and over-practice to reduce triggering
- investigating the nature of triggers and practising exposure without dissociation
- de-fusing from beliefs and thoughts about symptoms and recovery
- developing an over-arching compassionate observing self
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Who will benefit from this course?

Anyone working with Depersonalisation Disorder, Fugue, Somatoform Disorder and PNES who wants a fresh CBT/Third Wave approach to incorporate into their work. Or anyone who has previously avoided working with these presentations because of a lack of available CBT/Third Wave training.

Learning methods

We will use instruction, demos, role-plays in breakout rooms, and video material to create a workshop with a small group of highly engaged participants, and we will make it fun!

What You Will Learn

- CBT model and concepts of the self
- Formulating Depersonalisation Disorder, Fugue, Somatoform Disorder and PNES using this model
- Working with these presentations to increase awareness, acceptance and control/choice of self-states

Take Aways

- The D-ISS (Dissociation-Integration of Self-States Scale)
- A FREE article by from Dr Kennedy
- The foundations of the next workshop on DID
- A Greenwood Mentors Certificate in Working with Self-States Across Disorders (if you complete all four modules)

Dates and times

9.30-1.00 UK time

May 9th and 10th 2023 or watch later

Venue: online only

Module 4

Working with Self-states in Dissociative Identity Disorder

2 days 9.30-4.30 GMT (11 hours CPD): NB this module is two full days

June 5th and 6th 2023

Working with The Cognitive Model of the self and dissociation, using CBT and Third Wave therapies to help clients change

A two - day workshop: the fourth module in our "CBT and self-states" certificate, or a stand-alone module.

Part of the GreenWood Mentors Certificate in Working with Self-States Across Disorders (four modules)

Are you looking for fresh CBT and Third wave approaches to helping clients with DID (dissociative identity disorder)?

This course will show you how to recognise, understand and help change self-states and the self in DID. It is the final two days in our series and runs for two whole days online.

Self-states or CBT 'modes' are sets of schemas (ways of perceiving and responding to the environment) learned in childhood contexts, which we can struggle to manage as adults.

This training will explain Aaron T Beck's concept of the self, or 'personality' and how it applies to DID. It will show how to help clients develop **awareness, acceptance and control** of their self-states and dissociation to help them live a meaningful and purposeful life.

Self-States

Dr Fiona Kennedy presents everything you need to know about the CBT theory of self and personality, self-states and the 'working self', and how to use this understanding to help clients. She demonstrates how dissociation within self-states and between self-states, along with self-state switching triggered by environmental events, reduces the client's awareness of self and control over her life. Help your clients get control and choice over which self-state they wish to access in any situation, and reduce other dissociative symptoms, using CBT, DBT, ACT and CFT. Help them integrate and align their self-states to become a functioning 'team'!

Dissociation between self-states

Adversity in childhood, particularly where the child is helpless, can create dissociation between self-states so that we have reduced awareness acceptance and control/choice over our-selves. The course demonstrates how the cognitive model of dissociation can be used to formulate the extent of structural dissociation of self-states and work to reduce this. We also present our new scale (in development) to assess dissociation between self-states: the D-ISS.

Dissociative Identity Disorder (DID)

During and after trauma, information-processing is affected by dissociative processes, especially if the survivor is helpless during the trauma. Dissociation can change the storage of information and our ability to recall events with an act of will. Absence of and compartmentalisation of memories and abilities as well as of aspects of the self, is an important feature of DID.

DID lies at the extreme end of the continuum of self-state organisations that we cover in this course. There is extreme dissociation between self-states with very low **awareness, acceptance or control** over the states. This causes severe problems in living. It is as if there is a battle raging within the client rather than her self-states functioning together as an effective 'team'. There is considerable 'othering' of self-states which may not be seen as part of the client at all, and may be experienced as other identities which take over the client's body and mind, or as external ghostly or menacing figures. Beliefs about the nature of these experiences can include religious interpretations (possession by god, the devil, evil spirits, jins etc), magic, voodoo and satanic influences, control by aliens or being taken over by malicious individuals.

Treating DID

People with DID have usually experienced invalidation of their lived experience and of the diagnosis, from the public as well as from mental health professionals and the mental health system. They may feel ashamed and hide their subjective reality. Assessing DID can be difficult because of the client's lack of awareness of other self-states, reluctance to disclose their subjective world, and fear of being told they are mad.

Clinicians treating DID are often met with similar incredulity, and told they want to be special or have encouraged their client to present as DID. The diagnosis itself is the centre of considerable controversy and myth.

Treating DID has until recently mostly been the prerogative of psychodynamic practitioners. This course will show how to use CBT, DBT, CFT and ACT to increase **awareness acceptance and control** in DID.

This training builds on the previous three days (working with self-states in anxiety, depression and OCD, working with self-states in PTSD, cPTSD and EUPD/BPD; working with self states in depersonalisation and other dissociative disorders).

In order to mindfully observe and describe self-states in DID, client and therapist must first reduce dissociation. This can be achieved in various ways:

- Using the therapeutic relationship to create a secure attachment to allow dissociative processes to break down
- Using the PES cognitive model of dissociation (Perceptual-Experiential -Self) to explain what is happening to the client.
- Feeding back to the client their behaviour in session
- Inviting the client to survey family and friends to help collect data on dissociative symptoms
- Working at the level of the self:
 - using scrapbooking, WhatsApp groups, communication books
 - having a DBT-style pre-commitment phase of therapy, where the client chooses to commit to doing therapy: s/he must sign a therapeutic contract in all their self-states to ensure commitment is maximised
 - clarifying shared values across all self-states
 - committing to working as a 'team' to achieve a meaningful and purposeful life
 - listing life-threatening and therapy-interfering target behaviours to diary and reduce
 - 'group' tasks and dialogue to increase team effectiveness
- Using a DBT framework to structure the therapy: listing target behaviours and chain analysing when they occur; identifying and teaching skills to help clients cope without spacing out, or switching self-states and manage the target behaviours which are ruining their lives.

Who will benefit from this course?

Anyone working with DID who needs a CBT/Third Wave approach to understanding and treating DID. Or anyone who has avoided working with DID in the past because of lack of expertise.

Learning methods

We will use instruction, demos, role-plays in breakout rooms, and video material to create a workshop with a small group of highly engaged participants, and we will make it fun!

What You Will Learn

- CBT model and concepts of the self
- Assessing for DID
- Formulating DID using this model
- Working with these presentations to increase awareness, acceptance and control/choice of self-states (treating DID)

Take Aways

- The D-ISS (Dissociation-Integration of Self-States Scale)
- A FREE article by Dr Kennedy

- Skills to assess, formulate and treat DID
- A GreenWood Mentors Certificate in Working with Self-States Across Disorders (if you complete all four modules)
- A supervisions and support network to help you going forward

Dates and times

2 days 9.30-4.30

GMT (11 hours CPD)

June 5th and 6th 2023

Venue: online only or watch recording

Summary of Course Dates Times and Fees

<p>Dates</p>	<p>Module 1: 3rd and 4th March 2023</p> <p>Working with self-states and dissociation in anxiety, depression, OCD and more</p> <p>Module 2: 5th and 6th April 2023</p> <p>Working with self-states and dissociation in PTSD, cPTSD, and EUPD/BPD</p> <p>Module 3: 9th and 10th May 2023</p> <p>Working with self-states and dissociation in depersonalisation disorder, fugue states, somatoform disorders and PNES</p> <p>Module 4: 5th and 6th July 2023</p> <p>Working with self-states and dissociation in DID (dissociative identity disorder)</p>
<p>Times:</p>	<p>Modules 1-3 9.30-1.00 pm with 15 min coffee break</p> <p>Module 4 9.30-4.30 pm with 60 mins lunch and 15 mins coffee am/pm</p>
<p>Duration:</p>	<p>Modules 1-3 7 hours each, Module 4 11 hours = 32 hours total CPD</p>
<p>Delegate fee:</p> <p>(Early Bird also available for one week between each module)</p>	<p>For whole course £800; (for individual modules 1-3 £200 module 4 £300 = £900 if bought separately).</p> <p>Groups of up to five: for whole course £1,300; (for individual modules 1-3 £350 module 4 £450 = £1,500 if bought separately)</p>

