

GreenWood Mentors Presents

Working with Self-states and Dissociation in Anxiety, Depression, OCD..and more (7.5 hours CPD)

With Dr Fiona Kennedy



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

Part 1 of the BPS Approved 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 more?

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

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

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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.

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.

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

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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. 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).

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

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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

Dissociation may well be the set of processes that keep traumatic memories compartmentalised from other memories. Reprocessing interventions focus on re-integrating memory systems and working with other symptoms of PTSD. PTSD also involves a split between the emotional self or selves and the "apparently normal self". After recovery from PTSD the client can still struggle with how they behaved during trauma and or afterwards whilst affected by PTSD, feeling estranged from themselves or unable to trust themselves.

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

- 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 an observing self and take an overarching perspective on our-selves

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- identifying values and goals using an ACT/DBT approach
- validation of each and every self-state's function
- '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 self-states to work together to handle specific challenges or solve problems

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
- Assessing self-states and dissociation

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- 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: PTSD, cPTSD and EUPD/ BPD, 3: Depersonalisation, Fugue, Somatoform Disorders and PNES, 4: DID)
- A BPS Approved Certificate in Working with Dissociation and Self-States Across Disorders (if you complete all four workshops)

Your Trainer: Dr Fiona Kennedy



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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 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.