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Dissociative Identity Disorder (DID)

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Summary: Dissociative identity disorder (DID) (formerly known as multiple personality disorder) is a condition that can occur in those who have suffered significant stress and trauma in their childhood. As a result, they may have frequent periods of dissociation and spacing out in response to stress. Because you do not remember what happens during a dissociative episode, it causes gaps in your memory and it is as if you have a different identity. The good news is that there are many strategies and treatments to support those with DID.

Mary's Story

Mary is 30-years old. She lives on her own, and does not have any contact with her family. She has no memory of her childhood at all. She is a gentle person, and works in an office. Sometimes she meets people who say that they know her, however she has no recollection of having met them. What is going on with Mary?

Could I have Dissociative Identity Disorder (DID)?

Do you notice any of the following?

- A feeling that your sense of self has two or more distinct parts, and that each of those parts has its own behaviours, moods, thoughts, memories, and way of understanding the world
- That sometimes you don’t recognize yourself
- You experience thoughts or feelings that do not seem to be you
- Big gaps in your memory, such as:
    - Forgetting what you did the day before?
    - Forgetting your childhood memories?
- Finding evidence of things that you don’t remember doing, e.g. finding new items that you don’t remember buying; finding notes that you don’t remember writing; meeting people who seem to know you, but you don’t seem to know them?

Normal Dissociation

It is normal for many people to have experienced dissociation at some point in their lives.

For example, people can dissociate or space out:

- During a long, boring drive, and then not really remember how they got somewhere;

- While reading a very engaging book or movie;
- While daydreaming.

Dissociation is also a normal coping process that can happen with severe stress, such as abuse or trauma, such as:

- Abuse such as physical abuse or sexual abuse;
- Trauma such as being in a car accident, or going through a natural disaster.
- Combat, such as faced by troops during wartime.

In order to cope with the experiences, a person may dissociates (aka “zone out”, “space out”) in order to survive.

What is Dissociative Identity Disorder?

When a vulnerable child faces severe stress in their life (such as from abuse and trauma), this can then lead to frequent periods of dissociation. When severe enough, the frequent dissociation prevents the person from developing a stable sense of self, which later becomes dissociative identity disorder (DID).

DID was formerly known as multiple personality disorder (MPD). We now understand however, that affected individuals do not have multiple personalities, but rather they have the lack of a single, stable sense of self.

Classic symptoms of dissociative identity disorder (DID) include the following:

- Dissociation, which is a mental process where individuals are not fully connected with their thoughts, feelings, behaviours or memories;
- Switching to different “alters”, which are alternate identities or personality states. It can feel like you have different persons living in your head. There is usually a main part or “host”, along with at least one other part.
- Amnesia (loss of time, or ‘blackouts’), whereby the person can’t remember periods of time, or even portions of their childhood.
- Each identity can have its own name and unique differences in voice, gender, mannerisms. Some identities may even require different prescription glasses.
- At least two of these identities or personality states recurrently take control of the person's behavior.
- Distress or troubles functioning due to having the condition.

Other symptoms include:

- Derealization, which is the feeling that the world is not real or in a haze.
- Depersonalization, which is the feeling of being detached from your body, as in an “out of body” experience
- Switching to different alters, which may appear as sudden changes in mood, behaviour or personality

Dissociative identity disorder is:

- NOT due to the direct effects of drug or alcohol use, i.e. not due to blackouts or behaviour during alcohol intoxication.
- NOT due to a medical condition such as a seizure disorder.
- NOT a child having imaginary friends.

Associated Symptoms and Conditions

Dissociative identity disorder (DID) is a complex condition usually takes a very long time before it is properly diagnosed.

Many times, before they end up receiving a DID diagnosis, people with DID are first diagnosed with other conditions such as: .

- Depression, which is problems with extremely low or sad mood

- Mood swings, which is problems with moods going from one extreme to another
- Anxiety, panic attacks or other anxiety problems
- Thoughts of suicide, due to the high level of stress that people with DID often experience
- Alcohol or drug use, as an attempt at coping with stress
- Post-traumatic stress disorder, a condition that may be seen after individuals experience high stress or even life threatening situations
- Borderline personality disorder, a condition where individuals have severe problems with emotional regulation and controlling their feelings, often seen in those with past trauma

What are Dissociative Disorders (DID)?

In the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), dissociative identity disorder (DID) is actually one of three related dissociative disorders.

The other two are:

- Depersonalization-derealization disorder.
    - Key features are feeling depersonalization and/or derealization.
    - Depersonalization: Feeling detached or outside yourself; feeling as if you are watching a movie.
    - Derealization: Feeling that the world isn’t real.
    - Symptoms can last a few moments, or may last years, and may come and go.
- Dissociative amnesia.
    - Key features are memory loss that's more severe than normal forgetfulness and that can't be explained by a medical condition.
    - An episode of amnesia usually occurs suddenly and may last minutes, hours, or rarely, months or years.
    - You can't recall information about yourself or events and people in your life, usually dating back to when the trauma first started.
    - Dissociative amnesia can be specific to events in a certain time, such as intense combat, or more rarely, can involve complete loss of memory about yourself.
    - Dissociative fugue is a type of amnesia where a person can end up travelling and confused, wandering away from their life. People may be in a fugue state for months, or years -- and can thus end up with new relationships, new jobs, new lives.

What Causes Dissociative Identity DIsorder?

Certain people are more vulnerable to getting DID:

- A child who is disconnected from adult caregivers;
- Younger children as they have not yet had the opportunity to develop a stable sense of self or personality;
- People who are easily hypnotizable (i.e. prone to go into trance).

The following steps can lead to DID:

- A vulnerable person experiences stressful experiences (such as abuse and trauma) over and over again
- Faced with trauma, the person “spaces out” or “dissociates” as a survival strategy, in order to cope with the trauma
- One part of the person’s self becomes the part that endures the trauma, whereas another part exists after wards.
- Unfortunately, dissociation causes its own problems…
- Most people take for granted that they can remember what they did the day before, or last week, or last month… It is remembering our past that contributes to our sense of self. Now imagine if you can’t remember what happened the day before, week before, last month, or years ago…
- Life would be pretty stressful and scary.

How Common Is It?

1-3% of the population (according to the International Society for the Study of Trauma and Dissociation)

If You Suspect Dissociative Identity Disorder

Start by seeing your family doctor. Your doctor can help make sure that your symptoms aren't due to a medical condition such as (traumatic) brain injury, medication, sleep deprivation, or drug use.

And if required, your doctor can help you to connect to mental health services.

Treatment for Dissociative Identity Disorder

There are different types of treatment that can be helpful for dissociative identity disorder.

Treatment aims to integrate or connect the different alters into one single identity and generally consists of talk therapy (a.k.a. psychotherapy).

Therapy goals include:

- Mapping out the alters, where the therapist and the person try to find out which are the various alters, and their purpose
- Integration, which is helping the alters co-exist with one another as a whole, functional personality. Once integrated, the person no longer experiences switches in alters, nor does the person have loss of time or blackouts.

Types of counselling/ psychotherapy include:

- Cognitive behaviour therapy (CBT);
- Dialectical behaviour therapy (DBT);
- Eye movement desensitization and reprocessing (EMDR).
- Hypnosis.

Has counselling/psychotherapy been tried, but not been helpful?

- If so, then medications might be helpful for specific symptoms such as depression or anxiety which have not responded to non-medication treatment.

Self-Help: General Lifestyle Strategies

Do's

Do reduce stress in your life.

- What are the top stressors in your life, e.g. school, work, relationships?
- What are some ways to cope with those stressors?
- For example, if work is stressful, can anything be done to reduce those stresses?

Do limit recreational screen time.

- Try to keep recreational screen time to less than 1-2 hrs daily. Excessive screens can overstimulate the nervous system, as well as keeping one from sleeping.

Do get enough sleep.

- The average person (teens and adults) needs at least 7-9 hrs of sleep, with some people requiring up to 11 hrs/night.

Do get time outdoors in nature.

- Nature, especially combined with physical activity, is calming for our nervous systems. For example, try to find ways to walk outside every day, such as on your way to school/work, during the day, or at the end of the day.

Do eat a healthy diet.

- Limit caffeine, as caffeine is a stimulant and can directly stimulate your body's alarm.
- Limit recreational drugs. Even if substances such as cannabis, nicotine and alcohol seem to help with anxiety in the short-term, they usually worsen anxiety over the long run.
- Limit processed foods as many artificial ingredients (e.g. artificial sweeteners, coloring or preservatives) can worsen anxiety.
- Eat more a Mediterranean style diet which is high in whole grains, vegetables and fruits.

Self-Help: Specific Strategies for Dissociative Identity Disorder (DID)

Do's

- Do create a Coping Plan, which includes things such as:
  - What are your triggers? E.g. Sensory triggers (noise, etc.)? Emotional triggers (e.g. being sad, upset)?
  - What helps you feel safe? E.g. favorite stuffed animal, photo, jewelry, other mementos, etc.
  - What keeps you grounded? Grounding strategies include counting things in the room, looking at photos of yourself with loved ones, etc.
  - What can you do when you are feeling unsafe or overwhelmed? E.g. distracting yourself, going to a safe place, etc.

See here for an example of a coping plan (also known as a safety plan or crisis plan)

Supporting a Loved One with Dissociative Identity Disorder: Information for Family and Friends

Do's

- Do spend time with your loved one, and always be kind and compassionate.

- Do support your loved one in getting professional support. Offer to drive or accompany your loved one to appointments

- Do support your loved one with any dissociation. Is your loved one all of a sudden looking confused, frightened or not following a conversation? There may have been a switch in personality state. If the alter does not know you, the person may become frightened. You might:
  - Introduce yourself to your loved one
  - Take a pause, slow down and ask them if they are okay.

- Do accept whichever personality or 'alter' that your loved one is having at the time -- it is a part of them. If your loved one is feeling angry, accept and validate they are feeling angry. If your loved one is feeling scared or anxious, accept they are feeling scared or anxious.

- Do help your loved one with stability and routines. Do consider writing down a weekday and/or weekend schedule to help organize your loved one. Regular routines help with safety.

Don'ts

- Don't do things which might make your loved one feel unsafe.

References

Treatment Guidelines for Dissociative Identity Disorders in Adults
http://www.isst-d.org/education/treatmentguidelines-index.htm

Treatment Guidelines for Dissociative Identity Disorders in Children
http://www.isst-d.org/education/treatmentguidelines-index.htm

For More Information

International Society for the Study of Trauma and Dissociation
Information about complex trauma, dissociation and dissociative disorders for health professionals, teachers and school staff, and the general public.
www.isst-d.org

An Infinite Mind
Non-profit organization that supports survivors of trauma-related dissociation, with many resources for those with DID.
https://www.aninfinitemind.com/index.html
Sidran Institute
Information about trauma, post-traumatic stress disorder, dissociative disorders, and co-occuring problems.
www.sidran.org

About this Document

Written by the eMentalHealth Team.

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