

## **FFP Statement to the “Campaign for Recognition & Inclusion of Dissociation & Multiplicity” Conference, London, 12<sup>th</sup> March 2011**

First Person Plural ([www.firstpersonplural.org.uk](http://www.firstpersonplural.org.uk)) is the only survivor-led registered charity in the UK which has a specialist focus on complex trauma-related dissociative conditions. We have a membership base of which 63% are individuals with lived experience of these conditions, 15% are partners, family and friends and 22% are professionals and organisations.

Initially the organisation was formed to help alleviate the profound feelings of isolation that are so often an issue for those living with dissociative distress. The original members were all sharing similar stories of not being believed, being misdiagnosed, revolving door syndrome and re-traumatization within the NHS. And sadly we've heard more of the same as our membership has grown.

First Person Plural's ethos of awareness-raising quickly evolved and was later formalised when we became a registered charity in 2005. We offer training and awareness-raising related to understanding dissociation, designed and delivered by trainers who are experts-by-experience. That is - *individuals with lived experience of dissociative identity disorder who have training skills and a broad-based theoretical knowledge of dissociation, dissociative conditions, trauma and attachment.*

Over the last ten years we have delivered training to multi-disciplinary mental health teams, rape crisis centres, solicitors, paramedics, a prison-based trauma team and housing associations, to name just a few. These wide audiences reflect a need for a working knowledge of dissociation to become mainstream training for most people whose jobs bring them into direct contact with vulnerable people.

Recently we are also seeing adoptive mothers amongst our delegates. They are desperate for help with their children who have extreme and enduring abuse in their past. And who, now they are living in a safe environment which allows expression of this trauma history, show behaviour that is dominated by its effects. This often gets labelled as a behavioural disorder by children and family services that have insufficient knowledge about the effects of traumatic dissociation. The adoptive mothers then find themselves being blamed for causing contaminated attachments with these children and get caught in a Catch 22 when they are threatened with their child being removed. The mothers understand the implications of this and the disastrous consequences it would have on their traumatised children but no one is listening to them. Our training gives them an insight into what they instinctively know is happening to their children and, for a very brief time, helps them feel less alone.

When First Person Plural was started in 1997 a dominant consensus view was that it was inadvisable, maybe even destructive, for two or more people with complex dissociation to meet or make contact with each other unless they were supervised by a health worker. In other words, survivor-led groups such as First Person Plural were commonly seen as counter-therapeutic.

The rhetoric of general mental health policy in the UK, even then, was about dissolving rigid divisions between them and us - that is between professionals and service users. Yet, First Person Plural had a number of experiences in our early years that demonstrated reluctance on the part of several trauma and dissociation professionals to accept that the different knowledge, expertise and perspectives of those living daily with dissociative distress was at least equal and usefully complimentary to their own.

So, it is very rewarding to see how things have changed so much already that we can all be here together at this campaign meeting – a meeting that has been enabled and supported by professionals but is dominated by the voices and perspectives of those who have this lived experience.

However, there wouldn't be a need for this campaign meeting if the improvements in inclusivity that have gradually been achieved within the field of dissociation were being mirrored without - in wider society.

People whose lives are affected by complex dissociation do not get the recognition and acceptance which should be theirs as a human right. And sadly, for the majority, this means being denied the support and treatment which could minimise the adverse affects of traumatic dissociation on their lives and even enable them to experience integrated functioning for all or much of the time. Sadder yet, is that many also have no choice but to accept services, particularly when in crisis, that are not only ineffective in the long term but add to their trauma burden and may exacerbate their underlying unrecognised, untreated trauma-related complex dissociative disorder.

A very experienced group therapist who has worked with adult survivors of childhood sexual abuse for many years identifies a new group member as being highly dissociative. What should she do? Should she risk suggesting she goes down the mental health route knowing that she is unlikely to get the recognition and help she needs; and will probably have to jump through many hoops that at best are not going to harm her and, at worse, will make her very ill? Should she send her back to her link worker who has never heard of dissociation although she is making the decisions about what is best for this client?

Should she perhaps, try to offer a short-term supportive arrangement in the hope of offering some immediate containment knowing that this carries a risk of the client beginning to feel safe enough for more and more fragments of her traumatic history to break through her dissociative defences – perhaps just as the brief period of holding therapy has to end. How negative to have to try and decide which path would cause the least harm?

Hopefully the work started here today will make stories like this a thing of the past.

First Person Plural's vision is of a society that

- Recognises that dissociative identity disorder and related complex dissociative conditions are long-term adverse effects of abuse, trauma and/or unhealthy attachment relationships with parent-figures during early childhood, and are not extremely rare or fictional problems;
- Provides local free access to specialist trauma & dissociation assessment and, sustained effective treatment and support, for all those who may be at risk of, or are identified as having dissociative identity disorder or other trauma/abuse-related complex dissociative conditions;
- Provides informed support services for family, friends and carers of people who experience dissociative identity and other complex dissociative disorders; and
- Acts to prevent dissociative identity disorder and other complex dissociative conditions through encouraging and supporting the healthy psychological & sociological development of all children and young people, in particular, by protecting them from sexual, physical, psychological or emotional abuse, neglect and unhealthy traumatic attachment relationships.

The Campaign for Recognition and Inclusion of Dissociation & Multiplicity being launched here today clearly shares this vision. Some of the actions needed to achieve it have already been happening for many years. The efforts to date of all the organisations and many of the individuals here today, (and some who are not) have built strong foundations. Their work has facilitated the development and nurturing of the critical mass of opinion, determination, motivation, energy, expertise and innovative thinking represented here. And it is this that makes the time right to plan and implement a strategic, co-operative, inclusive, sustainable and, above all, effective campaign of integrity, with realistic goals, and a realistic timetable.

For that is what is needed. No campaign can succeed if it is a flash in the pan, if it uses data which can't be adequately supported; if it's made up of un-coordinated actions with each organisation / individual doing their own thing without liaising with or sharing knowledge and expertise with each other; if it risks duplication of effort; if it isn't inclusive of other initiatives, such as the ESTD-UK research group, which could contribute to the campaigns goals; if those goals are set so high and the timescales so narrow that those involved are overcome by the de-motivating force of lack of achievement long before any successes of the campaign can be measured.

First Person Plural wants to be involved in a successfully targeted, strategic campaign that works gradually and sustainably towards:-

- Changing mental health and similar assessment practice in ways that ensure that complex dissociative conditions are no longer disregarded, unrecognised or undiagnosed;
- Changing health commissioning policies and practices in ways that ensure that all people with dissociative identity disorder and related conditions have easy, routine access to effective psychotherapy and additional support services. With both being provided for long enough to achieve stable recovery, without over-frequent reviews which threaten premature funding or service reduction or withdrawal – currently a common practice which can compromise the effectiveness of otherwise appropriate therapy.
- Ensuring that the necessary training becomes routine and mandatory for those who will be part of the multi-disciplinary team required to maximise the effectiveness of therapy.
- Ensuring that pre- and post- qualification education and training for all mental health and related professionals gives sufficient and accurate coverage to dissociative identity disorder, other complex dissociative conditions and related topics such as early trauma and attachment difficulties and how these impact on mental and physical health and well-being;
- Changing societal knowledge and attitudes so that those who live life dissociatively can be open about their experience and still be able to participate in society as equals, not judged, not assumed to be crazy, not feared, not rejected, discriminated against nor stigmatised.

This is what we hope from this Campaign for Recognition and Inclusion of Dissociation.



# First Person Plural

national survivor-led association for dissociative identity disorder  
and similar complex dissociative conditions