

Surviving Trauma: The Theory of Structural Dissociation and Defense Mechanisms

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Theory of Structural Dissociation

This theory suggests that trauma causes the physical split between the two brain hemispheres to also become a psychological divide. The left hemisphere, responsible for day-to-day functioning, enables people to continue in their daily routines. For instance, a child is able to attend school the day after an abusive episode. The right hemisphere, which lacks verbal capabilities, holds implicit nonverbal memories of the trauma, and anticipates subsequent traumatic events.

To better illustrate this, consider the left brain as the "going on with normal life" part and the right brain as the "traumatized" part. Such terminology helps clients relate to their trauma rather than trivializing or blending with it.



Characteristics of Chronic Trauma

It's rare for people to experience a single traumatic event. Most traumatic experiences, such as war, child abuse, domestic violence, and terrorism, persist over time. Constant rather than rare exposure to such threats is a key distinction. As with what "D" endured during her childhood, chronic trauma necessitates further psychological splitting. Due to prolonged exposure to trauma for years, the person has to defend against different dangers at different times.

The "going on with normal life" part exists on one side. On the other side, the "traumatized" part, subparts emerge, each driven by distinct responses:

- Fight
- Flight
- Fear or freeze
- Total submission
- Cry for help

Someone may possess only some of those parts. For example, they might have multiple fight parts but only a few flight parts. Complex PTSD or dissociative disorders can lead to numerous parts of each type. In cases like "D's", the subparts interfere with day-to-day functioning, disrupting normal life.



Parts as Defensive Approaches

- Going on with normal life part: prioritizes survival and function. Such people
 are often hesitant to discuss their trauma, as they fear being overwhelmed.
 They prioritize concerns about their family, job, or household over traumatic
 experiences and emotions.
- **Cry for help part**: a defense strategy manifesting as intense distress, desperation for help, vulnerability, and a childlike attitude. This strategy elicits sympathy and a desire to help from observers.
- **Submit part**: is characterized by feelings of hopelessness, helplessness, a need to appease others, and a fear of causing inconvenience. This part often feels shame and tries to avoid being troublesome. Interestingly, this part is usually the least problematic.
- **Fear part**: as a warning system, this strategy alarms the body, cautioning a person about potential harm.
- **Flight part**: involves escape behaviors such as commitment issues, difficulty maintaining therapeutic or romantic relationships, and tendencies towards addictive behaviors or eating disorders. These are all ways to distance someone from their emotions.
- Fight part: aims to establish control through emotions like anger, mistrust, and devaluation of others, including therapists. The fight response is the only strategy linked with violent and aggressive behaviors toward oneself and others.



Key Points

- The theory of structural dissociation dictates that trauma causes the physical split of the brain to also become psychological.
- Chronic trauma leads to the development of various defensive subparts, each driven by distinct responses.
- Each defensive part adopts a unique strategy, ranging from avoidance and submission to fight-or-flight behaviors.



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