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FACT SHEET

FOR CLINICAL
AND NON-CLINICAL
PROFESSIONALS
WHO WORK WITH
YOUNG PEOPLE

DISSOCIATION AND TRAUMA IN YOUNG PEOPLE

Dissociation is when there is a disruption in the usual way we piece together and connect to the different parts of our world. It can refer to a broad range of complex experiences, so it can be helpful to think of dissociation as on a spectrum or continuum. At one end there is a dissociative experience, such as daydreaming, that everyone experiences, which is common and healthy. At the other end is a highly intense, and often distressing, dissociative experience, which may involve completely disconnecting with reality or even one's own identity. This fact sheet focuses on supporting young people, their families and carers to understand what dissociation is, and how it can relate to traumatic experiences.



WHAT KINDS OF EXPERIENCES ARE ASSOCIATED WITH INTENSE DISSOCIATION?

There are many life experiences that may be associated with intense dissociation, such as psychological trauma, substance use, head injuries and/or experiencing intense emotions like overwhelming fear or anger.(1) Dissociation may also be experienced in relation to a number of mental health diagnoses. Regardless of the context, experiencing a loss of connection or continuity in the way we experience our sensory and/or inner world can be confusing and distressing.



EXAMPLE OF DISSOCIATION

When something extremely stressful happens, one reaction that people can have is dissociation. For example, Alex has planned to go skydiving for the first time, and is extremely nervous beforehand. Alex's heart rate is very high, their thoughts are jumbled and hands are trembling. As the plane takes off Alex feels short of breath and the world seems to spin a little bit. Just before the jump, Alex feels as though what is happening is not real and their limbs feel wobbly and distant. Alex is in a haze as they begin falling, and is unable to concentrate on what is happening.

These altered perceptions of the body and the outside world are signs of dissociation. Since dissociation can be one of the ways that we protect ourselves during times of perceived threat,(2, 3) it is not unusual to dissociate whilst skydiving.(4) In this example, Alex is dissociating during an overwhelming event, which is called peri-traumatic dissociation.(2, 5)

WHAT IS THE RELATIONSHIP BETWEEN TRAUMA AND DISSOCIATION?

Dissociation can occur in response to traumatic events, and/or in response to prolonged exposure to trauma (for example, trauma that occurs in the context of people's relationships). Dissociation can affect memory, sense of identity, the way the world is perceived and the connection to the physical body.⁽³⁾ These effects can be felt both during and following exposure to trauma. Dissociation functions as a coping mechanism developed by the body to manage and protect against overwhelming emotions and distress.⁽⁶⁾ This can be a completely natural reaction to traumatic experiences, and can be helpful as a way of coping at the time. However, dissociation can become problematic when it happens often and/or intensely in situations where it is unhelpful, causing distress and negatively impacting on a young person's life. Some examples of how this can affect an individual include: not being able to concentrate at school/work, having difficulty learning or remembering and feeling disconnected from personal relationships with others.

DISSOCIATION AND DEVELOPMENT

Dissociative experiences are more common among children than adults. Early in life, it can be unconsciously learned as a way of protecting oneself during times of distress, physical and/or emotional abuse, frightening situations and/or neglect.⁽⁷⁾ This is particularly likely to happen if a child has been exposed to prolonged or repeated trauma, or to overwhelming events. Prolonged exposure to trauma may lead a child to use dissociation as a coping mechanism in many situations, and to continue to do so as they grow up.⁽⁸⁾ If dissociation occurs often during childhood, it can impact the development of a child's sense of self and their ability to regulate emotions and stress.^(2, 9) This can have negative implications for young people later in life. As the child matures they may still dissociate whenever exposed to an experience that triggers distressing emotions.

TRIGGERS AND DISSOCIATION

Sometimes a person might not realise that the dissociation they are experiencing is linked to traumatic experiences from their past, since the dissociative experience is not occurring at the same time as the overwhelming experiences. This is important to understand, as dissociation does not always have to occur in the presence of traumatic events.

Triggers for dissociation may be non-threatening to other individuals, however for specific reasons they may generate negative feelings and/or memories in young people with lived experience of trauma. These negative feelings and/or memories can trigger dissociation, as the person

automatically moves to defend themselves. Understanding personal triggers for dissociation can greatly help the young person and their loved ones to understand the reasons why they dissociate and how to manage triggers in the future. If dissociation is negatively impacting your wellbeing, it is important to know that recovery and prevention of future episodes is possible with the right support.

WHAT ARE THE DIFFERENT TYPES OF DISSOCIATION EXPERIENCED BY YOUNG PEOPLE?

Since the term dissociation describes a varied spectrum of experiences, it is important to understand that no two people will experience dissociation in the same way. The intensity, length and range of symptoms of problematic dissociation are different for each individual. Sometimes a young person's experiences of problematic dissociation may not fit into a specific diagnosis. However, it is important to realise that these experiences can still impact on a young person's wellbeing and ability to participate in daily life. Young people may experience one, or more commonly, a combination of the experiences described below.⁽¹⁰⁾

DEREALISATION

Derealisation refers to the sensation of feeling as though the surrounding world isn't real. People have described feeling as though the world and the people around them seem two dimensional, fake and/or lifeless.⁽¹¹⁾ People may feel distant from the world, like they are watching events occurring around them as if those events are in a movie or at a distance from them.

DEPERSONALISATION

Depersonalisation involves an altered sense of a person's own body, thoughts, behaviours and/or sense of self.⁽¹²⁾ People have reported feeling emotionally numb, feeling as though they are floating, disconnected from sensations in the body and/or being an observer of their own body. People may also perceive their body differently, such as seeing their hands get bigger and smaller or feeling as though their legs are wobbly and far away.⁽¹⁾

MEMORY

When a young person is experiencing dissociation, they may not be able to pay attention to what is happening around them. Therefore, they may not be able to remember some or all of the things that occurred during that time. This can lead to a young person looking back at a certain period of time and not being able to recall any details of the events that took place.

IDENTITY ALTERATION

This type of dissociation can cause a young person to feel unsure of who they are or what their identity is. A young person might feel very different to other parts of themselves, and might find themselves behaving or thinking very differently to the way they have done in the past. Individuals may or may not be aware of this altered sense of their identity.

SOMATIZATION

The relationship between dissociation and our bodies is very complex. Sometimes young people may experience physical complaints, such as stomach issues or chronic pain, which cannot be explained by any identifiable problem with the body.⁽¹³⁾ These physical symptoms may be linked to psychological distress.

WHAT ARE DISSOCIATIVE DISORDERS?

People can experience symptoms of dissociation without this being in the context of a dissociative disorder, or warranting a diagnosis. However, there are a number of dissociative disorders, involving intense experiences on the dissociative spectrum that can impact a young person's ability to function in day-to-day life.

DEPERSONALISATION/ DEREALISATION DISORDER*

Depersonalisation/derealisation disorder involves feelings of unreality. A person may feel detached from their own body, sensations, and emotions. The world around them may feel unreal, and the people living within it seem lifeless and fake. Their perception of the world may become distorted, such as objects appearing smaller or bigger than they actually are. These sensations can significantly impact a young person's social, emotional and mental wellbeing. Usually, individuals realise that their perceptions of the world and themselves are not real. Approximately two per cent of people report experiencing this disorder in their lifetime.

DISSOCIATIVE IDENTITY DISORDER*

Dissociative identity disorder is usually linked to traumatic events in childhood, such as prolonged or ongoing abuse. It is estimated that 1.5 per cent of people have experienced dissociative identity disorder in the past 12 months. In this disorder, people experience the existence of two or more distinct personalities, each with their own way of thinking and remembering. Large gaps in memory about daily life and past experiences are common. This diagnosis used to be called multiple personality disorder.

DISSOCIATIVE AMNESIA*

Dissociative amnesia involves memory loss of events or personal information that we would not usually forget. Individuals may forget whole periods of time, usually when traumatic events were occurring, or specific fragments of these events. Sometimes individuals may forget who they are, or important parts of their life history. Specific facts about certain people or places may also be forgotten. Approximately 1.8 per cent of people report experiencing dissociative amnesia at some point in the past 12 months.

*Adapted from the Diagnostic and Statistical Manual of Mental Disorders 5th Edition (DSM-IV)⁽¹²⁾

WHAT CAN SOMEONE DO IF THEY ARE EXPERIENCING DISSOCIATION?

Problematic dissociative experiences can be confusing, and often hard to describe. Sometimes, it can be difficult to understand what is happening and why, which makes seeking support a very important step. If you think dissociation may be negatively impacting your life it is important that you find someone you feel comfortable talking to, such as a family member, friend or school counsellor. Some young people may feel more comfortable seeking help from a mental health professional. A good place to start is with your GP, or by contacting a [headspace](#) centre. If you are feeling distressed about your dissociative experiences, there are a number of useful things you can learn to do 'in the moment', to help you feel more in control and connected to yourself and/or reality. A health professional or counsellor can support you to finding the best strategies for managing your dissociative experiences.

[Mind](#) has helpful resources with detailed information about dissociation and coping strategies that you may wish to discuss with a mental health professional. [Eheadspace](#) also offers confidential, free support from mental health professionals for young people and their families via webchat, email, or phone call.

A number of helplines are also available:

- [Kids Helpline](#) (1800 551 800) provides confidential counselling for young people aged 5-25 years
- [Blue Knot Helpline](#) (1300 657 380) provides information and short-term counselling for survivors of childhood sexual abuse.
- [1800RESPECT](#) (1800 737 732) provides over-the-phone support for survivors of sexual assault, domestic and family abuse.

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