Literally Trauma means ‘injury’

1. an **horrific event** causes injury (physical – emotional)
2. injury causes pain
3. pain causes physically and psychologically suffering
4. psychologically suffering can cause psychologically-injury
5. psychologically-injury can cause pathological emotions and pathological somatic responses
6. a mental illness
7. a mental health diagnose caused by trauma

Now we have cause and outcome A – Z
A mental health diagnose by the suffering of a psychologically-Trauma

An emotional personality (**ANP system**) part (**EP**) gets ‘**injured**’
Psychologically-Trauma & Dissociation

THE ANP - EP SYSTEM

**The Self states (SS’s - ANP parts):**

The Self states (SS’s) - ANP parts of the ANP-EP handling system:

are parts of our personality which function fully autonomic and are daily life task oriented. These parts of our personality own their own consciousness and self-awareness.

**Ego States (alter states) own consciousness and self-awareness**

Ego-States are personality states which react emotion oriented. They respond to emotional daily live needs or events and provide us with normal and healthy reactions which color our own personality.

But… they also can develop a pathologically behavior such as Borderline-, Narcissistic personality disorder, pathological sociopathic- or psychopathic behavior, etc. - and otherwise described dissociative disorders including switching behavior to other personality states (not DID).

**example:**

You need to clean the house and you instinctively know what to do and how to do it. You know how the vacuum cleaner works or what you have to use to clean the windows etc. To every little task you remember what is needed or what to do at that moment: like cooking, doing your finances, call your friend at his/her birthday, etc.. those are all different self-states (SS’s) which we call smaller Apparently Normal Personality parts of the total personality ANP-EP(‘s) handling system.

**example:**

The need for attention, or personal comfort, or the need to be someone (to be recognized), the need to feel proud of what you do or did, the need of being loved or to give love to another person, the need for sex or erotic responses, the need to express your anger or sadness etc. All those needs are normal human emotions (feelings) which we all carry inside of us. And we also carry all biologically given narcissistic genes or psychopathically genes (we are all able to get triggered to unthinkably or unhealthy behavior). It’s human nature.

**Dissociated Emotional Personality Parts**

own consciousness and self-awareness

A traumatized personality part !!

Like the Self-states those EP’s own their own consciousness and self-awareness

Within the structural dissociation of the personality we call those parts EP’s which cause dissociative behavior. These psychologically traumatized parts of the personality hold a total memory of a traumatic event or a part of a traumatic event – physical and emotional memories which belong to the past. Those parts can be:

1. totally dissociated by the personality (full dissociation)
2. partly dissociated by the personality (partial dissociation)

**example:** (psychologically-traumatized)

Someone who experienced a very severe accident on a particular crossroad, can start to avoid that particular crossroad, or even worse: don’t go nearby a crossroad again. And this (phobic) fear exists without realizing or thinking over the full memory (EP) which caused her/him to develop this pathologically behavior towards crossroads. Or someone who experienced severe traumatic events during a war can develop irritated and avoidant behavior towards lots of things in the present time without realizing his behavior is being influenced by the traumatic events he/she experienced during war and which didn’t process in to his own personality state - the EP’s got stuck in the past. He/she avoids thinking on those traumatic events and develops irritated and or defensive, aggressive behavior under the influence of the EP’s..
THE ANP - EP SYSTEM

Daily life handling-system

The Self states (SS's - ANP parts):

own consciousness and self-awareness

Ego States (alter states):

Pathologically (damaged, sick, unhealthy, etc.) Ego-States can cause switching behavior, because they are very vulnerable to the influences of pathologically genes and or biologically given vulnerability. But they also can be controlled or influenced by traumatized EP parts such as most commonly seen within OSDD. Traumatizing experiences and or Childhood neglect can contribute to development of a Borderline Personality Disorder + Dissociative symptoms. Those pathologically Dissociative Ego-States can express itself also by switching behavior to different personality states. That is also the reason why so many people get wrongly diagnosed with a dissociative Identity disorder and the other way around, or misdiagnose with another mental disorder such as Schizophrenia.

If a person suffers a PTSD or CPTSD or a Dissociative Disorder like OSDD The self-states we call smaller ANP 'parts' which belong to the total personality (1 ANP-EP handling system). Those Self-state parts¹ (ANP parts) are vulnerable to the influence of Ego-States² and or EP parts³

SD

If an SS (self-sate) or ES (ego-state) gets triggered by 'recognition' - a particular daily life subject or event - the EP that holds a memory of the traumatic experience influences the behavior of the SS and or ES. On such a moment the ANP-EP system - which we call a handling system - gets in to personality state with pathologically behavior (not healthy behavior). The biologically stability of the whole personality will also play a very big role towards 'how this behavior will express itself' (switching behavior ANP and EP state). The cause of that particular behavior on such a moment gets triggered by the influence of an EP. 1 ANP system under the influence of EP('s), primary and secondary structural dissociation.

Personality and Identity:

Above we gave a summary of a normal to a pathologically Personality and the different personality states. Everything above can develop itself without suffering a DID. The expression of the total of our personality-states plus our biologically and biographically presentation will give form to our own Identity.

To understand the development of a Dissociative Identity Disorder we need some knowledge about the 4 head emotions of humanity.

1 The 4 head emotions of every human being

| 1 | Joy, (Pleasure, laughter, sex, etc.) |
| 2 | Fear (defense, Freeze, etc.) |
| 3 | Ager (defense, physical attack, etc.) |
| 4 | Sadness (tears, loneliness, mourning, etc.) |

1 ANP system under the influence of EP('s), primary and secondary structural dissociation.
The Dissociative Identity Disorder

A tertiary structural dissociation of the personality
Someone who suffers a Dissociative Identity Disorder developed in a very early stage of life two and sometimes even three of those ANP-EP’s handling systems. Each of those handling systems own their own distinct behavior, knowledge and memories. This causes also a lack of recognition of one’s own autobiographically memories. The switching between those ANP-EP’s systems can occur very suble but also very recognizable if you know the total personality for a longer time. DID is a poly-symptomatic condition which is characterized by a hidden presentation.

In case of a Dissociative Identity Disorder the ANP parts (self-states) also function task oriented within each main ANP-EP’s handling. But beside that the main ANP-EP’s handling systems functions also head emotion oriented. So here we also need to have knowledge about the four head emotion of humanity which within DID form the base to develop a pathologically survival mechanism such as a Dissociative Identity Disorder is.

DID Research has shown us that the development of a DID starts during the very early stage of life.
Hypothetically to the explanation of “why could such a very young child develop more than one ‘handling system’:
We are all born with biological determinants and four autonomic emotional handling/respond systems (the 4 head emotions). Emotional handling systems which immediately after birth are able to react by instinct or reflex. If a baby feels distress caused by hunger it starts to cry. If you have eye contact with a baby which has already its vision and you slap your hands the baby gets cared (you will see the reflex) caused by the loud noise even though its sees you slapping your hands, etc.. The baby is not yet able to mentalize hearing with vision, it’s not yet enough developed to do so (recognition). The emotionally systems pleasure/fun and fear are not yet enough integrated to function as proper team players.

If something disrupted this proses (like repeating Trauma — see part I pnt 1) an infant needs to activate by instinct repeatedly a (survival) reflex which causes that the autonomic functioning emotions can’t synthesize prober with one and other on a natural given way to learn prober functioning as team players. This can lead to the development of a DID cause by Trauma.