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Dissociative Identity Disorder

I don't require the use of a wheelchair.

I have use of my legs and arms.

I have my sight.

I can hear.

I am not physically challenged as a result of genetics or an accident.

Some would say I'm mentally challenged. I like to think of myself as a 'victim turned survivor challenged.'

Dissociative Identity Disorder (DID), formerly dubbed Multiple Personality Disorder by the Diagnostic and Statistical Manual of Mental Disorders, occurs as a result of prolonged emotional, physical and sexual abuse usually started in infancy. This, further administered by means of starvation, sleep deprivation, drug use and other fear driven actions terrorize the child into submission, especially if the abusers are family members.

My perpetrators were my mother, father, brothers, aunts and uncles.

I trusted them.

They betrayed me.

The child is isolated from outside contact, and relying on these family dynamics, leave the child utterly isolated with no real feelings of safety or independent identity.

A young child can survive in a phenomenal way. She can learn to split off parts of her mind into separate compartments where each can take control of the child's body and mind, without the knowledge of the original child or even other split off parts.

Over the years of continued abuse, the child could go on to create essentially tens or hundreds of these split off parts (called alters); each one performing the task they were

created for. For example, one alter could hold all the anger for the system (the system represents the whole collection of alters); another alter could remain and act like a five year old; one alter could be an eleven year old promiscuous pre teen. This means these alters could do things that the original child has no knowledge of since the other alter was occupying the body at that time. In most cases, alters are both male and female and it is common to have alters that are younger and/or older than the body (of the original child).

When she reaches adulthood without psychological intervention, the adult child becomes aware that something is amiss in her being. Suddenly, there are voices, confusion and lost time. Friends say she acted or behaved in a manner she doesn't remember because it was another alter performing. She leaves to go to destination 'A' only to find herself at destination 'B' sometimes days or weeks later. Again, another alter or set of alters were present for that time. She hears conversations between alters in her head and thinks she is crazy.

During this time, I spent the majority of every month in and out of hospitals, treatment centers for alcohol and drug abuse, detox centers and admissions to the local psychiatric ward.

In past years, DID has had stigmas attached to it from the Hollywood versions of movies such as Sybil and The Three Faces of Eve. Although, there has been no debate surrounding the authenticity of these types of productions, the presentation of the dynamics of DID are very different.

The action of dramatic switching is atypical. Most people with DID do what they can to hide. People don't know the switch from one alter to another is very subtle and can often times even confuse their therapists. I've lost track of the number of times my doctors have asked: "Whom am I talking to now?" It is through the subtle changes that I was experiencing when I found therapy. And in therapy I felt my first stirrings of freedom. I learned about my disorder and how to work with my alters. I learned they, including myself, had jobs to do, whether it was to hold the anger for the system (encompassing all the alters), or to hold the sexual feelings and the shame and guilt that arose from it. In the

therapeutic environment we learned to communicate our needs and wants and most importantly, to trust all of ourselves, after all, we had survived when so many didn't.

For those victims turned survivors, most have been misdiagnosed at some point in their adult life and labeled PMS, Schizophrenic, Borderline Personality, Manic Depressive and so forth until the final ruling that fits their life is acknowledged – a diagnosis of Dissociative Identity Disorder.

I can't say this would have been my first choice on how to live my life. But I can say it has never been dull. It is both exciting and terrifying to learn about yourself and all your complexities. For me, I live each day as it comes and learn to love those inside me, who saved me over 40 years ago.

It is for them that I celebrate life, but this time – on our terms.

