

When the Self Splits:
Advanced EMDR for Shame, Dissociation, and Fractured Identity
Video Course

Lisa Hayes, MSW, LISW-S

Video Course
CPD hours: 6



Online video access remains available for 1 year or 3 years from the date you receive the video course, depending on the ticket type.

When clients carry the imprint of complex developmental trauma, **every intervention becomes a minefield. Shame erupts and halts processing. Dissociation fractures sessions into silence or absence.** If I push, I risk shattering them. If I stop, I collude with silence. The very adaptations that once protected survival now interrupt healing, destabilize attachment, and leave clinicians suspended between impossible choices.

In the therapy room, these clients don't arrive as single stories—**they survive as libraries where each book is locked in a separate room.** Sometimes the trauma hides behind functioning. Or perfect recall delivered without emotion. Or composed descriptions that sound like someone else's medical chart.

These are the clients who challenge everything we thought we knew about trauma processing—regardless of which therapeutic modality we use. They arrive with histories of complex childhood trauma, attachment injuries, and nervous systems that learned early that safety meant disappearing. Whether you work with EMDR, somatic approaches, psychodynamic therapy, or other trauma modalities, you've likely encountered this clinical dilemma.

Lisa Hayes has spent over a decade supporting clinicians in navigating the complexities of identity fragmentation. This isn't another generic dissociation workshop or basic parts work training. It's the rare guidance therapists wish they had in the room when standard protocols crumble.

If you're thinking "I already know EMDR" or "Not another dissociation training," here's what makes this different: **Lisa shows you why bilateral stimulation can fail with fragmentation—and how to adapt it.** Why shame-based clients often struggle with traditional resourcing—and what works instead. Why parts work alone isn't enough when attachment injuries are driving the split.

This training synthesizes insights from trauma research—van der Kolk's embodied trauma work, Siegel's interpersonal neurobiology, Porges' polyvagal insights—into immediately applicable interventions.

The Shame Compass: When Protection Becomes Prison



What happens when the developing nervous system learns that connection equals threat?

Drawing on research from van der Kolk, Siegel, and Porges, Lisa explores how early relational trauma rewires the brain's capacity for integration. We'll examine the neurobiological underpinnings of dissociation—not as pathology, but as an elegant survival response that becomes problematic when safety never comes.

But here's what makes this session different: **Lisa teaches you to read shame as a compass, not an obstacle.** When clients shut down, dissociate, or suddenly shift into different states, shame is often the warning system firing. Understanding this transforms how you respond in the moment.

Key clinical frameworks:

- **The Shame-Trauma Cycle:** how childhood invalidation creates shame-based defensive structures that persist into adulthood—and why traditional trauma processing can trigger them (Brown, 2007; Herman, 1997)
- **Intersectional Trauma Responses:** how identity, culture, and systemic oppression shape both dissociative presentations and therapeutic access (Crenshaw)
- **Attachment Injury Templates:** how early relational wounds create internal working models for all future connections—including with therapists (Bowlby, Johnson & Greenman, 2006)
- **Recognizing Covert Dissociation:** clinical markers that don't look like "spacing out"—hypervigilance, emotional numbing, somatic disconnection, and the high-functioning split

The Bilateral Switchboard: Advanced Adaptations for Fragmented Systems

"In Maya's session, I started bilateral stimulation. Suddenly the protective teenager slammed the brakes. The little one began sobbing. The adult part vanished entirely. How do you keep EMDR moving when the room fractures into three?"

This is where most training ends—and where real clinical mastery begins.

Standard protocols assume a cohesive self, ready for bilateral stimulation. But what happens when parts of the client can't tolerate processing, when shame triggers dissociation mid-session, or when different ages emerge during desensitization? Lisa doesn't just teach modifications—she teaches moment-to-moment clinical decision-making.

System Maps: Turning Fragmentation Into Clinical Roadmap. Lisa demonstrates her approach to internal system mapping—not just identifying parts, but understanding their relationships, protective functions, and processing capacity. You'll learn how to collaboratively create visual maps that guide therapeutic intervention.

Advanced bilateral stimulation adaptations include:

- **Speed and intensity modifications** when standard BLS triggers dissociation, shame, or system conflict
- **Developmental state considerations** for when child parts, teenager parts, or protective adult parts are present
- **Cultural and somatic factors:** how marginalized identities and embodied trauma responses require different BLS approaches
- **Alternative grounding techniques:** for non-EMDR therapists, equivalent interventions that work across modalities

About the Speaker



Lisa doesn't just teach techniques—she teaches clinical decision-making. When do you slow down bilateral stimulation versus stop entirely? How do you distinguish between healthy dissociation and trauma-based fragmentation? When is it safe to process trauma with an unstable internal system?

As an EMDRIA-approved consultant and Director of EMDR Training for BIPOC Clinicians, Lisa bridges research-informed theory with moment-to-moment clinical judgment. **Her approach integrates interpersonal neurobiology (Siegel, 2012), polyvagal theory (Porges, 2011), and attachment research (Bowlby, Ainsworth) with immediate practical applications.**

An international presenter, known for her ability to make complex trauma theory accessible, Lisa has trained thousands of clinicians to navigate the intersection of EMDR, complex trauma, dissociation, and attachment-based healing. Her commitment to anti-oppressive practice means she addresses how cultural identity, systemic oppression, and marginalization intersect with dissociative presentations—considerations often missing from mainstream trauma training.

What You'll Gain

This training synthesizes EMDR, IFS, somatic approaches, and attachment-based therapies into a cohesive clinical approach. Whether you're an EMDR practitioner wanting to work more effectively with dissociation, or a parts-work therapist curious about trauma processing, you'll leave with immediately applicable skills.

You'll walk away with:

- **Differential diagnosis tools** to distinguish trauma-based dissociation from ADHD, autism, or anxiety presentations
- **Research-backed interventions:** evidence-based modifications to standard protocols, grounded in trauma and attachment research
- **Internal system assessment skills:** mapping parts, evaluating co-consciousness, and determining readiness for processing
- **Shame-informed adaptations:** using shame as information rather than obstacle
- **Cultural trauma considerations:** adapting trauma work for clients with intersectional identities
- **Clinical decision trees:** when to modify, slow down, or pause processing

The Clinical Reality: When Fragmentation Was Survival

Traditional trauma training often assumes that clients arrive with cohesive narratives and a stable sense of self. But clients with complex childhood trauma rarely have the luxury of linear healing. Their recovery requires therapists who understand that dissociation isn't resistance—it's intelligence.

This is advanced clinical work that requires both skill and heart. It asks us to sit with complexity, to track multiple internal voices, and to pace our interventions according to what the most vulnerable parts can tolerate.

For Clinicians Who Want to Go Deeper

This training is designed for all trauma therapists working with complex developmental trauma, childhood abuse, attachment injuries, and dissociative presentations—regardless of modality.

For clients whose survival once meant splitting apart, healing begins when every part is welcomed. These two evenings will equip you to adjust your clinical practice to embrace the complexities of dissociation, shame, and complex trauma — and create a safer invitation for healing.



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