Follow these guidelines when completing each component of the assignment. Contact your course faculty if you have questions.

General instructions:

Dissociative and somatic symptom and related disorders are complex mental health problems that are often associated with trauma. These conditions can create diagnostic and therapeutic challenges. Afflicted individuals may not be aware of their condition and may not seek psychiatric care. Stigma and biases, both in society and in providers, may also hinder treatment.

Include the following sections:

I. Application of Course Knowledge

a. Explain how trauma is related to the development of dissociative and somatic symptom and related disorders.
b. Describe how clients with dissociative disorders are represented in the media. What role does media portrayal play in the public's perceptions of these disorders? What role does media portrayal play in mental health providers' perceptions of these disorders?
c. Discuss at least two (2) potential personal or professional biases providers may need to address to effectively diagnose and treat clients with dissociative and somatic symptom and related disorders.
d. Describe two (2) or more treatment challenges associated with treating clients with dissociative and somatic symptom and related disorders.

Answer

Trauma is strongly connected to the development of both dissociative disorders and somatic symptom and related disorders. Many individuals with these conditions have experienced trauma, especially early in life, such as abuse, neglect, or ongoing stress (Hamer et al., 2024). When someone experiences overwhelming trauma, the brain may use dissociation as a coping mechanism to protect itself. This can involve disconnecting from thoughts, memories, or even one's sense of identity (Hamer et al., 2024). Over time, this can develop into dissociative disorders such as dissociative identity disorder or dissociative amnesia (Kikuchi et al., 2024). Research shows that dissociation is closely linked to trauma-related conditions, especially complex post-traumatic stress disorder (PTSD), further supporting that these symptoms develop as a response to trauma (Hamer et al., 2024; Ross et al., 2024). In somatic symptom disorders, trauma is often expressed physically instead of emotionally. Individuals may experience real physical symptoms like pain or fatigue without a clear medical cause. Trauma can affect how the body processes stress, leading to increased sensitivity to physical symptoms and ongoing distress (Lay et al., 2025). Overall, both types of disorders are best understood through a trauma-informed perspective.

The way dissociative disorders are portrayed in the media is often inaccurate and exaggerated, which plays a big role in how people understand these conditions. Movies and TV shows commonly show individuals with dissociative identity disorder as violent or dangerous, with extreme personality changes (Boysen, 2024). In reality, most individuals with dissociative disorders are not violent, and these portrayals can create fear and misunderstanding. This contributes to stigma and may make individuals feel embarrassed or afraid to seek help (Boysen, 2024). Media portrayals can also affect healthcare providers. If providers are not properly educated, they may develop misconceptions or skepticism about dissociative disorders. Research shows that dissociative disorders are still widely misunderstood and sometimes questioned even in clinical settings, which can impact diagnosis and treatment (Boysen, 2024). Because of this,