INPLASY

# Metacognitive Treatment Goals for Dissociative Experiences: A Protocol for Systematic Review

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**ADMINISTRATIVE INFORMATION**

**Support -** No support.

**Review Stage at time of this submission -** The review has not yet started.

**Conflicts of interest -** None declared.

**INPLASY registration number:** INPLASY202680018

**Amendments -** This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 3 August 2026 and was last updated on 3 August 2026.

## INTRODUCTION

**Review question / Objective** To identify the current state of research on what treatment to address metacognition, as defined below, should look like for those experiences dissociation distinct from the recommendations from other psychiatric conditions.

**Rationale** The purpose of this review is to highlight any metacognitive deficits found within those suffering from dissociative disorders. Metacognition is understood to be a variety of mental capacities that assist us in becoming aware of our perspective, the perspectives of others, and how affect informs said perspectives. There is already considerable research on the metacognitive deficits in posttraumatic stress symptomatology (see the works of Peter Fonagy), but not as much is known for dissociative experiences.
The rationale for this review comes from Pedone et al.'s (2025) "Metacognition and dissociation as mediators between childhood trauma and psychiatric symptoms" in which higher levels of dissociation in childhood trauma mediated later onset of psychiatric comorbidity. Metacognition also served as a mediator, though it was not as strong as dissociation. Furthermore, a lack of metacognition has been proposed as the mechanism behind the development of somatic concerns in dissociative disorders (Figueira and Madeira, 2019).

**Condition being studied** The intent is to garner insights into the lived experience of metacognitive deficits in dissociative experiences via analyzing current researcher's findings.

## METHODS

**Search strategy** Boolean searches will be conducted between the following keywords: dissociation x metacognition; dissociation x metacognitive task(s); dissociation x metacognitive deficit(s); dissociation x metacognitive goal(s); dissociative x metacognition; dissociative x metacognitive task(s); dissociative x metacognitive

deficit(s); dissociative x metacognitive goal(s); dissociative experience(s) x metacognition; dissociative experience(s) x metacognitive task(s); dissociative experience(s) x metacognitive deficit(s); dissociative experience(s) x metacognitive goal(s); dissociative disorder(s) x metacognition; dissociative disorder(s) x metacognitive task(s); dissociative disorder(s) x metacognitive deficit(s); dissociative disorder(s) x metacognitive goal(s)
The databases that will be included are: PsycINFO, PubMed, JSTOR, CINAHL, dissertation databases, and grey literature repositories.

**Participant or population** Individuals diagnosed with dissociative experiences will be analyzed.

**Intervention** Not applicable.

**Comparator** Not applicable.

**Study designs to be included** Quantitative and qualitative.

**Eligibility criteria** Eligibility criteria are studies that include those with dissociative experiences. Given that posttraumatic symptomatology has a high comorbidity rate, individuals that are diagnosed/attest to both conditions will be considered. Closer reading will be done to distinguish the insights relative to posttraumatic versus dissociative symptomatology.

**Information sources** Electronic databases, contact with authors, dissertations, and grey literature.

**Main outcome(s)** The main outcomes of this review will be to provide clinical recommendations that add nuance to dissociative disorder treatment, moving beyond dichotomous understandings of connection v. disconnection and instead towards identifying the meaningful mental life of those with dissociative experiences. The intended outcome will add depth to the phenomenological experience.

**Additional outcome(s)** The findings of this review could inform current approaches to mentalization-based treatment and other approaches that aim to treat personality and complex psychiatric conditions.

**Data management** Data will be stored on RefWorks.

**Quality assessment / Risk of bias analysis** This review follows the PRISMA format to clearly communicate the steps involved and allow for easy reproducibility. A consortium of other researchers will be used as needed to reduce the risk of bias.

**Strategy of data synthesis** 1. Boolean searches uploaded to RefWorks
2. Duplicates removed
3. Initial screening based on titles to remove unrelated data
4. Secondary screening based on abstract to determine fit
5. Tertiary screening, as needed, based on full text to determine fit
6. Data synthesized for qualitative themes.

**Subgroup analysis** Idiographic treatment effects will be analyzed if relevant and there is shared treatment approaches (psychological assessments).

**Sensitivity analysis** Idiographic treatment effects will be analyzed if relevant and there is shared treatment approaches (psychological assessments).

**Language restriction** If there are non-English sources identified, I will seek to contact the authors for any English translations available.

**Country(ies) involved** United States.

**Keywords** dissociation; dissociative; dissociative experience(s); dissociative disorder; metacognition; metacognitive task(s); metacognitive deficit(s); metacognitive goal(s).

**Contributions of each author**
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