Dissociative Identity Disorder IN FILM

Anya Lossman



Dissociative Identity Disorder (DID) is a major **mental health condition** referring to a person with 2 or more identities.

It is more commonly referred to as Multiple or Split Personality Disorder.

Dissociative Identity Disorder



Variety of mental, emotional, and physical effects.



Reach

DID affects approximately
II5 million people
worldwide.



Diagnosis

35% of DID patients were diagnosed with Schizophrenia.

"Film portrayals that are incorrect and stigmatizing can contribute to the public's unfavorable opinion of mentally ill individuals."

Valerie Sampson

ACADEMIC CONVERSATION

"The Butler(s) DID It Dissociative Identity
Disorder in Cinema"

Peter Byrne

Kent Institute of Medical and Health Sciences

"DID on Kevin Wendell Crumb Characters in Split Movie"

C. Nuraeni and T. Silaban

Universitas Bina Sarana Informatika

GAP IN THE RESEARCH

Current research covers...

- Individual films
- Treatment
- Root causes

No work has been done comparatively or historically.



Research Question

How accurate are the portrayals of Dissociative Identity Disorder in films released between 1950 and 2022 as compared to relative and historical knowledge of the associated symptoms?

Hypothesis

The portrayals of Dissociative Identity
Disorder will focus primarily on the
existence of multiple identities and fail
to represent other symptoms.

Films from early decades (50s, 60s, and 70s), would be less accurate to clinical knowledge.

METHODOLOGY

16 films released between 1950 and 2022 analyzed for portrayals of DID symptoms and compared to case studies.

CREATION OF METHODS

"Dementia in the Movies: The Clinical Picture"

Debby Gerritsen

Qualitative and quantitative analysis of symptomatic portrayals





PREPARATIONS (OI



Foundational research and creation of documents

TIME PERIOD SELECTION

GOLDEN AGE OF HOLLYWOOD

1915 - 1960s

Experimentation to enhance film.

MENTAL HEALTH STIGMATIZATION

Portrayal of mental health problems in film.

FILM SELECTION PROCESS

OI

RESEARCH

Searches on IMDb to find all films tagged with DID.

(02)

NARROWING

Selection by availability, classification, and features.

O3

ORGANIZATION

Ordering films by decade and earnings.

04

FINAL SELECTION

Selecting final films and creating watch order.



The Three Faces of Eve (1957)



Lizzie (1957)



Psycho (1960)



David and Lisa (1962)



Footprints on the Moon (1975)



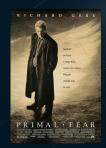
Sybil (1976)



Dressed to Kill (1980)



10 to Midnight (1983)



Primal Fear (1996)



Fight Club (1999)



Me, Myself & Irene (2000)



Secret Window (2004)



Shutter Island (2010)



Split (2016)



Spider-Man: No Way Home (2021)



Moon Knight (2022)

COMPLETE SYMPTOM LIST

Dissociative Identity Disorder Master Symptom List

Mental and Emotional Symptoms

- 1. Memory loss of important people, events, or trauma (especially of childhood)
- 2. Disorientation of people and things
- 3. Delusions
- 4. Blurred sense of identity
- 5. Existence of two or more distinct identities
 - a. Changes in behavior, memory, thoughts, handwriting, or preferences
 - b. Feel as though there are voices trying to control one's head
- 6. Flashbacks or sudden return of memories
- 7. Sense of detachment of self and emotions
- 8. Significant stress or problems in social and professional life, or other
- 9. Inability to cope with emotional and professional stress
- 10. Out-of-body experiences
 - a. Loss of control
 - b. Feel as though they are an observer of themself
- c. Change in feel of body (small child, opposite gender, change in figure)
- 11. Behavioral or functional variation (hyper-efficiency to sloth or incompetence)
- 12. Hallucinations
 - a. Hearing voices
 - b. Sensory experiences
- 13. Mental health problems
 - a. Depression
 - i. Feeling of sadness, tearfulness, emptiness, or hopelessness
 - ii. Angry outbursts, irritability, or frustration
 - iii. Loss of interest in one's normal activities
 - v. Tiredness or lack of energy
 - v. Changes in appetite or weight
 - Slowed thinking, speaking, or body movements
 - vii. Feelings of worthlessness or guilt (fixation on failures, self-blame)
 - viii. Trouble thinking, concentrating, making decisions, or with memory
 - b. Anxiety, panic attacks, phobias

- i. Nervous, restless, or tense
- ii. Sense of impending danger, panic, or doom
- iii. Increased heart rate
- iv. Hyperventilation
- v. Sweating
- vi. Trembling
- vii. Feeling weak or tired
- viii. Trouble concentrating or thinking
- ix. Gastrointestinal (GI) problems
- x. Difficulty controlling worry
- xi. Urge to avoid anxiety-triggering activities, places, interactions, etc.
- xii. Hot flashes or chills
- xiii. Choking sensation
- xiv. Pain or tightness in chest
- xv. Sensation of butterflies in stomach
- xvi. Nausea
- xvii. Feeling faint
- xviii. Numbness or pins and needles
- xix. Dry m
- xx. Need to go to the restroom
- xxi. Ringing in ears
- xxii. Confusion or disorientation
- c. Suicidal thoughts or self harm
 - i. A person talks about any of the following:
 - 1. Killing themselves
 - 2. Hopelessness
 - 3. Having no reason to live
 - 4. Being a burden
 - 5. Feeling trapped
 - 6. Unbearable pain
 - ii. Looking for ways to end their lives

- iii. Withdrawing from activities
- iv. Isolation from family or friends
- v. Visiting or calling people to say goodbye
- vi. Giving away prized possessions
- vii. Aggression or fatigue

Physical Symptoms

- 14. Drug and alcohol abuse or misuse
- 15. Development of eating disorders
- 16. Sudden or severe headaches and body pains
- 17. Sleep disturbances
 - a. Insomnia
 - b. Sleep walking
 - c. Irregular sleep patterns



ANALYSIS

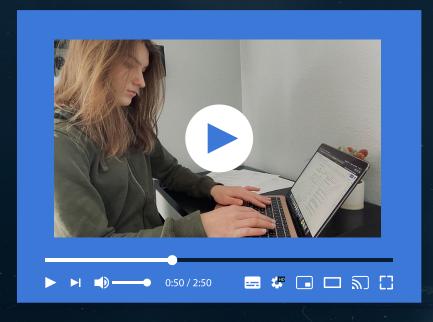
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Film viewing and data collection

DOCUMENTATION AND ANALYSIS

David and Lisa (1962)

| Symptom | Time Stamp | Notes |
|---|------------|-------|
| Memory loss of important people, events, or trauma (especially of childhood) | | |
| Disorientation of people and things | | |
| Delusions | | |
| Blurred sense of identity | | |
| Existence of two or more distinct identities | | |
| Flashbacks or sudden return of memories | | |
| Sense of detachment of self and emotions | | |
| Significant stress or problems in social and professional life, or other | | |
| Inability to cope with emotional and professional stress | | |
| Out-of-body experiences | | |
| Behavioral or functional variation (hyper-efficiency to sloth or incompetence) | | |
| Hallucinations | | |
| Mental health problems | | |
| Drug and alcohol abuse or misuse | | |
| Development of eating disorders | | |
| Sudden or severe headaches and body pains | | |
| Sleep disturbances | | |



David and Lisa (1962)

| Symptom | Time Stamp | Notes |
|---|------------|--|
| Memory loss of important people, events, or trauma (especially of childhood) | 00:33:00 | Muriel tries to touch David even though Lisa was told not explicitly not to. |
| | 00:37:56 | Lisa insists there is ice and snow outside, even though the staff member says she looked out the window earlier and there was neither. |
| | 00:55:25 | Lisa forgets her last name and its spelling. |
| Disorientation of people and things | | |
| Delusions | | |
| Blurred sense of identity | 00:44:58 | Lisa begins her interaction with David by asking who he sees, referring to herself. |
| Existence of two or more distinct identities | 00:10:18 | Lisa sits down and falls quiet immediately after her erratic behavior. |
| | 00:15:00 | Lisa experiences dissociation. Her personality shifts from loud and child-like to quiet and artistic. The staff member then refers to her as Muriel. |
| | 00:31:32 | Lisa is yelling and rhyming when she suddenly goes quiet. Muriel tries to touch David even though he told Lisa distinctly not to. |
| | 01:22:27 | She signs a piece of artwork with Muriel and Lisa, demonstrated a connection between the names, then signed Me. |
| Flashbacks or sudden return of memories | | |
| Sense of detachment of self and emotions | | |
| Significant stress or problems in social and professional life, or other | 01:26:58 | Lisa tries to take a newspaper without paying and gets violently upset when the seller tried to take it back. |
| Inability to cope with emotional and professional stress | 01:17:28 | Lisa is unsure of talking to David if he doesn't rhyme. His regular speaking upset her. |
| | 01:27:44 | Lisa runs to the museum and tries to break through the doors to get to the statue, but fails, and sleeps on the front steps. |
| Out-of-body experiences | | |
| Behavioral or functional variation (hyper-efficiency to sloth or incompetence) | 00:58:53 | Lisa sits quietly, then has a violent outburst. |
| Hallucinations | | |
| Mental health problems | | |
| Drug and alcohol abuse or misuse | | |
| Development of eating disorders | | |
| Sudden or severe headaches and body pains | | |
| Sleep disturbances | 00:45:49 | Lisa lies awake at night and stares at her own hand before caressing her head and neck. |
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DATA COLLECTION

MEMORY LOSS: 3

BLURRED SENSE OF IDENTITY: 1

EXISTENCE OF 2+ IDENTITES: 4

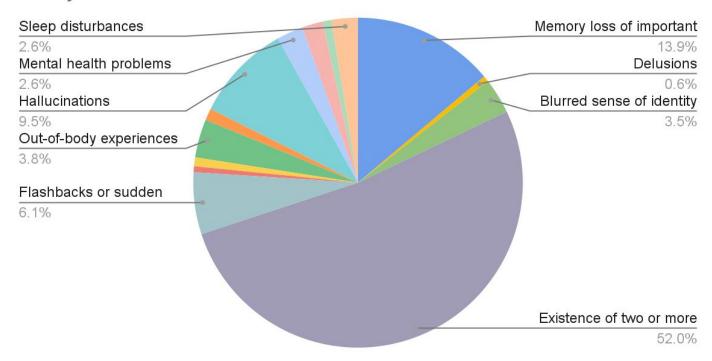
SIGNIFICANT STRESS: 1

INABILITY TO COPE WITH STRESS: 2

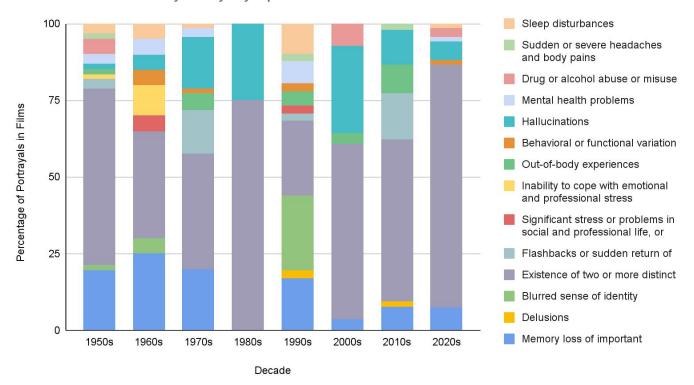
SLEEP DISTURBANCES: 1

| Symptoms | Final Averages |
|--|----------------|
| Memory loss of important people, events, or trauma (especially of childhood) | 48 |
| Disorientation of people and things | 0 |
| Delusions | 2 |
| Blurred sense of identity | 12 |
| Existence of two or more distinct identities | 180 |
| Flashbacks or sudden return of memories | 21 |
| Sense of detachement of self and emotions | 0 |
| Significant stress or problems in social and professional life, or other | 2 |
| Inability to cope with emotional and professional stress | 3 |
| Out-of-body experiences | 13 |
| Behavioral or functional variation | 4 |
| Hallucinations | 33 |
| Mental health problems | 9 |
| Drug or alcohol abuse or misuse | 7 |
| Development of eating disorders | 0 |
| Sudden or severe headaches and body pains | 3 |
| Sleep disturbances | 9 |
| Symptoms in Film | 346 |

Symptoms as Percentages of Total Portrayals through Film Analysis



Distribution of Portrayals by Symptoms of Each Decade





COMPARISON (03)

Film analysis data compared to real case findings

CASE STUDIES

OI

RESEARCH

Searches on medical databases.

(02)

SELECTION

Selection by top results.

(03)

ORGANIZATION

Symptoms written in chart by decade.

04

COMPARISON

Comparing data from analysis and case studies.

PROCESS

A CASE STUDY OF A MULTIPLE PERSONALITY

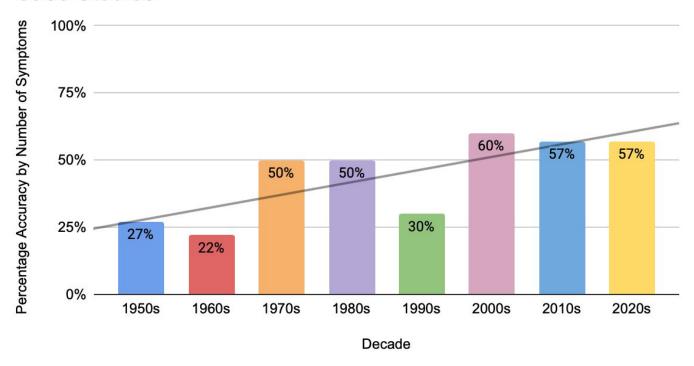
V. K. ALEXANDER

Union Christian College, Alwaye, South India1

OOSAN, a young Indian girl, aged 15 years, was brought to me by her father in May, 1952, with the complaint that Soosan would go away from home without any warning and that she was possessed with two evil spirits. One of the evil spirits was that of a young man who had committed suicide in her neighborhood, whose name was Kotchu. His suicide happened when Soosan was three years old. The other spirit was that of a grand aunt of hers, who died years before the birth of Soosan. Soosan had complete amnesia for her running away from home and for her secondary personalities. The change of personality would occur once or twice a week. The secondary personalities were so welldeveloped and complete in themselves, that when Soosan was two and one-half years old. Soosan was usually calm and quiet. She took regular part in household duties except when her personalities changed. Then she would become mischievous and use abusive language. Her father comes from a middle class family.

The method of therapy to help Soosan was twofold. First, Goddard's study (4) gave me a working hypothesis. Later I became familiar with the work of Prince (5). I wanted to know which part of Soosan's personality was dissociated. The best method, I thought, was to study the nature and behavior of the secondary personalities which were well-developed. Second, since she had a strong amnesia for these secondary personalities, I felt that it would be wise to help her build the dissociated

Percentage Accuracy of Cinematic Portrayals Compared to Case Studies



CONCLUSIONS



Hypothesis

The existence of multiple identities would be portrayed disproportionately higher than other symptoms

52%

Of all portrayals were the existence of multiple identities





Supported

The findings support my hypothesis, as this symptom was portrayed disproporitonately to that of others.

LIMITATIONS



IMPLICATIONS

RESEARCH

FURTHER STUDIES

SEPARATION

OF FACT AND NARRATIVE



UNDERSTANDING

MENTAL ILLNESS

STANDARDS

IN THE FILM INDUSTRY

\$42.5 BILLION

The Hollywood Reporter, 2019

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THANK YOU. QUESTIONS?

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