

BY: A MODEL

Case Study of the Film Sybil

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Everyone loves a good story, and nobody knows this better than Hollywood. However, like all good storytellers, movie directors have realized that you may have to bend the truth in order to entertain the masses. This is even easier to do when a movie covers a mysterious topic, like Dissociative Identity Disorder. Perceptions of this mental disorder vary in the media, from the psychotic Norman Bates and his "Mother" personality in the horror film *Psycho*, the comedian Jim Cary starring as a state trooper with multiple personalities in the comedy *Me*, *Myself*, *and Irene*, or the many "alter egos" created by musicians such as Beyoncé, Eminem, and Nicki Minaj to add a twist to their performances (Muller, 2013). The 1976 film *Sybil* however paints a different picture of the disorder.

In the movie *Sybil*, we learn of the story of a woman named Sybil Dorsett. After a nervous breakdown, she begins seeing a psychiatrist named Dr. Wilbur, who discovers Sybil has multiple personalities. The movie then focuses on the therapy Dr. Wilbur gives Sybil to reconcile her personalities and to finally face the abuse she suffered as a child (Petrie, 1976).

Dissociative Identity Disorder (DID), according to the National Alliance on Mental Illness, is a "dissociative disorder involving a disturbance of identity in which two or more separate and distinct personality states (or identities) control the individual's behavior at different times," (NAMI, 2000). Often caused by severe trauma or abuse in childhood, the person learns to cope by mentally escaping from the trauma and pretending in a way that it actually happened to someone else. When done repeatedly, the dissociations can develop their own personalities and can take control of the main personality when a stressor is presented (Grohol, 2013). In the film, Sybil was shown to have suffered almost torture-like physical, emotional, psychological, and sexual abuse from her mother (Petrie, 1976). Some researchers think that people with a family

history of dissociative mental illness are more likely to develop the disorder (Cleveland Clinic, 2012). This idea was supported in the film by the discovery that Sybil's abusive mother was diagnosed as having paranoid schizophrenia and was institutionalized for a brief period (Petrie, 1976).

According to NAMI (2000), most sufferers of the disease aren't aware that they have it until they seek some sort of professional help. When the alternate identities take over, the person usually isn't aware and often shows amnesia and/or confusion as to where they are, what time it is, or why a strange situation happened (NAMI, 2000). This was true in Sybil's case, as she was not aware how she got into the water after her episode in front of her students in the beginning of the movie. She also complained to Dr. Wilbur during her first visit that she often blacked out and woke up days later in strange places, as well as not being able to remember 2-3 years of her childhood. Dr. Wilbur was only made aware of the disorder when one of Sybil's personalities, Vicky, called her to warn her that Sybil was going to commit suicide. When she arrived at Sybil's hotel room, she discovered two more personalities: the suicidal Marcia and the young, terrified Peggy (Petrie, 1976).

These three alternate personalities share Sybil's mind with many other personalities; all of them are young children, and all but two are girls. The alternate personalities represent different emotions, personality traits, memories, and stages of Sybil's life. Vicky, a French-American girl, represents Sybil's confidence and intelligence and serves almost like a guardian and nurturer to the other personalities. Vanessa holds Sybil's repressed musical and artistic talents and is flirtatious. Marcia is a severely depressed girl with suicidal tendencies. Mary, another young girl, behaves like an old woman and represents the love and warmth of Sybil's grandmother. Mike and Sid, the two boys, are Sybil's masculine side. Ruthie is revealed to be the

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baby that Sybil regresses to when she hears the voice of Mama (a personality that behaves like Sybil's mother) played back on Dr. Wilbur's tape recorder. Peggy, the last personality, is a preschool age girl who still believes she lives in Sybil's hometown in Wisconsin. She holds the memories of Sybil's abuse as well as her fear and anger towards her mother. She also has destructive and self-harming tendencies (Petrie, 1976).

Why so many different identities? According to NAMI (2002), the average number of personalities is around ten, but there could be as many as 100 (NAMI, 2000). It is also normal for the personalities to have different mannerisms and character traits (Cleveland Clinic, 2012). For example, Vicky appears to be more cultured than Sybil and doesn't wear glasses. Peggy also shows differences from Sybil by having the same vocabulary and speech patterns as a six year old. Sybil also demonstrates haphephobia, the fear of being touched, while Peggy is comforted by cuddling with Dr. Wilbur (Petrie, 1976).

Even though the personalities act like completely different people possessing the same body, it is important to remember that in reality they are all just manifestations of the same person. Bethany Brand, Ph.D., a psychology professor, refers to the personalities as states of mind (Tartakovsky, 2011). Because the personality dissociates from any change in their state of mind, it feels like any event that occurs during the new state of mind happened to someone else (the personality). The main personality is then unable to remember what happened during the change of mental state (Tartakovsky, 2011). This seemed to occur in the movie with Vanessa being a very talented piano player and artist, while Sybil denied ever knowing how to play the piano or being artistic. Later in a flashback, we learn that Sybil did in fact know how to play the piano and was enthusiastic about art as a child (Petrie, 1976).

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Sybil's therapy with Dr. Wilbur was, for the most part, close to a normal psychotherapy session with a DID sufferer (although maybe a little more dramatic). NAMI (2000) and the Cleveland Clinic (2012) both agree that the therapist needs to analyze and understand the different personalities, try to correct any violent or self-harming tendencies, help the patient process and express traumatic memories, and begin to integrate the different personalities into one main personality (NAMI, 2000, Cleveland Clinic, 2012). The therapy's rate of proceeding was accurate, as DID psychotherapy is usually a long, slow process (Cleveland Clinic, 2012). However, the reconciling of the personalities is not a single short and dramatic event as portrayed at the end of the film. According to Brand, it can take a long time for the patient to assimilate all the different personalities and to be comfortable enough to feel strong emotions without hiding behind a different personality (Tartakovsky, 2011).

Some things also seemed to be left out of Sybil's therapy. Most DID patients are usually prescribed medications to deal with symptoms of the disorder as well as accompanying disorders such as depression and anxiety (Discovery Fit and Health, 2013). Save for the tranquilizer Dr. Wilbur injected Sybil with to calm her mania and anxiety following her suicide attempt, no antidepressants, anxiolytics, or antipsychotics were discussed or shown during her therapy (Petrie, 1976). Therapists also teach their patients healthy coping techniques to deal with stress and painful memories instead of dissociating from the problem (Cleveland Clinic, 2012). Dr. Wilbur instead seemed to focus much of the therapy on finding Sybil's painful memories and integrating Sybil's personalities. No coping strategies seemed to be covered (Petrie, 1976).

In all accounts, *Sybil* was a big step forward in the portrayal of a mental disorder such as Dissociative Identity Disorder. Instead of focusing on the sensationalism of the disorder, the film displays the struggle sufferers of DID—as well as sufferers of all mental illnesses—face just to

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live a normal life. Yet even in the grim storyline, there is hope. At the end of the movie, Sybil confronts and processes the memories of her painful past and begins to integrate with the other personalities. The epilogue says that after many years of therapy, Sybil made a recovery and now is a professor of art at a college (Petrie, 1976). *Sybil* serves as a lesson for all of us that no matter what obstacles in life we face, whether it is abuse, mental illness, or anything, we are strong enough to overcome it.

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References

- Babbin, J. (Producer), & Petrie, D. (Director). (1976). *Sybil* [Motion picture]. United States: Lorimar Productions.
- Cleveland Clinic. (March 29, 2012). Dissociative Identity Disorder (Multiple Personality Disorder). Retrieved from http://my.clevelandclinic.org/disorders/dissociative_disorders/hic_dissociative_identity_disorder_multiple_personality_disorder.aspx
- Discovery Fit and Health Writers. (2013). 5 Myths About Dissociative Identity Disorder. Retrieved from http://health.howstuffworks.com/mental-health/mental-disorders/5-dissociative-identity-disorder-myths.htm
- Muller, R. T., Ph.D., & Garzon, J. (January 19, 2013). The Media and Dissociative Identity Disorder. *The Trauma and Mental Health Report*. Retrieved from http://www.psychologytoday.com/blog/talking-about-trauma/201301/the-media-and-dissociative-identity-disorder
- National Alliance on Mental Illness. (March, 2000). *Dissociative Identity Disorder*. Retrieved from http://www.nami.org/Content/ContentGroups/Helpline1/Dissociative_Identity_Disorder_ (formerly_Multiple_Personality_Disorder).htm
- Grohol, J. M., Psy. D. (October 9, 2013). What is Dissociation? *Psych Central*. Retrieved from http://psychcentral.com/library/dissociation_intro.htm
- Tartakovsky, M., (2011) Dispelling Myths about Dissociative Identity Disorder. *Psych Central*. Retrieved from http://psychcentral.com/lib/dispelling-myths-about-dissociative-identity-disorder/0009785/2
- Myers, D. G. (2012). Psychological Disorders. In K. Feyen (Ed.), *Psychology in Everyday Life* (pp. 326-328). New York, NY: Worth Publishers.

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