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In the book The Catcher in the Rye by J. D. Salinger, the main character, Holden Caulfield, has strange tendencies that could be diagnosed as a mental disorder or multiple disorders. Thinking like a psychiatrist, this book has plenty to dissect. Reading a classic, such as Catcher, can really draw the reader into the story and make them feel like they are a part of that world. Holden Caulfield’s world has a lot going on. In order to properly diagnose Holden, consulting The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) is necessary. This book is the standard by which all disorders are classified in all psychology fields. There are five axises that all disorders are tested on to determine if they are credible or not.

Starting with Axis 1 and working down to Axis 5, this paper will look at certain behaviors Holden exhibits to accurately diagnose his psychological problems. Axis 1 refers to the principle disorder that needs immediate attention, of which Holden displays several. He has academic problems, mood swings, general anxiety, and depression. His academic problems are apparent right from the beginning of the book. “ I forgot to tell you about that. They kicked me out…They gave me frequent warnings to start applying myself – especially around mid-terms…but I didn’t do it. So I got the ax.” (6). This clearly illustrates his lack of motivation towards his schoolwork. His mood swings occur throughout the book such as when he “ horses around” with his school friends and then becomes really serious. Holden would often get really excited about doing something, and then suddenly decide not to do it (i. e.: wanting to call Jane up).

His mood swings also could be a prelude to bipolar disorder, but saying he has bipolar personality disorder is a bit of a stretch. Holden is a very anxious and nervous character. Feeling general anxiety is most apparent when his roommate Stradlater takes his old friend Jane Gallagher out on a date. Here he admits to the readers that he has anxiety, “ I was so damn worried, that’s why. When I really worry about something, I don’t just fool around. I even have to go to the bathroom when I worry about something. Only, I don’t go. I’m too worried to go. I don’t want to interrupt my worrying to go.” (52). Anxiety can typically lead to depression, which seems to be the case in Holden’s story. Shortly after thinking about his roommate taking Jane out he says, “ I felt so lonesome, all of a sudden. I almost wished I was dead.” (62).

When analyzing these characteristics of Holden, I can see traits of these disorders throughout the entire book. Axis 2 refers to any personality disorder that may stem from Axis 1. The main personality disorder that I can observe that Holden has is Obsessive Compulsive Personality Disorder. He exhibits this by compulsively lying to various characters such as the lady on the bus (chapter 8), his old history teacher, Mr. Spencer (chapter 2) and his various waiters. Holden also admits to being a liar in Chapter 3, “ I’m the most terrific liar you ever saw in your life. It’s awful.” (22). One other trait of OCD is obsession with detail, which Holden repeatedly shows through things like remembering how Jane keeps all her kings for checkers in the back row, or remembering small details about his little sister Phoebe. Axis 3 refers to any medical or neurological problems that may be relevant to the patient’s current or past psychiatric problems.

There are no apparent signs from Holden that he has these problems, although it is possible he does and we as readers just don’t know it. Axis 4 refers to psychological stressors that the individual may have faced. The most obvious psychological stressor to Holden is his brother Allie’s death, which occurred about three years before this story takes place. All of his psychological problems most likely stem from this, since it was around the time of Allie’s death that Holden began to show symptoms of these disorders. Finally, Axis 5 refers to the patients level of ability to function, based on a 0-100 scale. Holden Caulfield is at a 51-60 range, which means he has moderate symptoms or moderate difficulty in social, occupational or school functioning. Generally when Holden talks to adults he thinks they are “ phony” and has a hard time conforming to social norms.

His difficulty in functioning “ normally” in social situations is the main reason he would be at that 51-60 range on Axis 5, but he also failed most of his classes at Pencey which hinders his school functioning level. For these reasons Holden would most likely be diagnosed with moderate symptoms. Diagnosing Holden Caulfield is relatively easy to do since he exhibits so many obvious symptoms of psychological disorders. However, his main diagnosis is depression. At least fifty times, somebody or something depresses him, which he usually associates with a sense of isolation: “ It makes you feel so lonesome and depressed.”. He has trouble concentrating when he is depressed and talks “ sort of loudly” when he speaks to his deceased brother. Holden generally hates everything about the adult   
world, “ Well I hate it. Boy do I hate it. But it isn’t just that. It’s everything. I hate living in New York and all. Taxicabs and Madison Avenue buses…” (169). Holden displays signs of significant irritability, which could lead to mania in his future. If we summarize all of Holden Caulfield’s disorders they would be: depression, anxiety, academic underachievement, chemical dependence, ADHD (Attention Deficit/Hyperactivity Disorder), low self-esteem, suicide idealization, mania, grief, and PTSD (Post Traumatic Stress Disorder).