Jim morrison



Case Studyon Jim Morrison AbnormalPsychologyMount Vernon Nazarene University By: Michael Moyer Tuesday, December 6, 2011 In the following pages, I chose Jim Morrison a rock singer from the 1960 and 1970's band called the Doors; I am going use him as a case study example. Jim had abnormality and I will explain this in detail in the case study. I will also give you a comprehensive clinical background on Jim Morrison. In addition to the background, I am give you a look at his symptoms at the time of onset, severity, exactly what hispersonalitydisorder caused him to experience.

After that, I will provide you with a 5-axis diagnosis of him including a GAF score. Later, in the case study I will give you behavioral explanation from a B. F. Skinner approach and explain how Jim developed his abnormality according to his theory. In the closing pages, of the case study I will provide a treatment plan with methods I chose to use. In addition, why I feel this would help him and the obstacles I encounter in my treatment with Jim Morrison and ending, with my prognosis. James Douglas Morrison and his number one alias is Mr.

Mojo Risin anagram of his name Jim Morrison and common nickname The Lizard King was born December 8, 1943 Melbourne, Florida, United States and Died on July 3, 1971at the young age of 27 in Paris, France. He died from a suspected heroin overdose and years of severe alcohol and drug dependence, which climaxed to his death in and no autopsy was performed on his body after death, and his exact cause of his death is still unknown. Jim Morrison is buried in the Pere Lachaise Cemetery in Paris, one of the city's most visited tourist attractions (Riordan; Prochnicky, 1991).

Jim Morrisonfamilyandchildhoodyears, before he became a legend. He was born to his parents Rear Admiral George Stephen Morrison and Clara Morrison. He also had a sister, Anne, who was born in 1947; and a brother, Andrew. He was of Irish and Scottish descent. He had an I. Q. of 149 he had high intellect and that was his key to writing great songs and poems however no drive to use hiseducation for higher learning. His parents never pked him and he lived what was quasi-military way of disciplining. His parents always dressed him down or has a military drill nstructor would talk down to his recruits and break down any line of defense to infer his total control and his father would tell him what he had done wrong over and over again, until reducing him to tears, however he learned to hold back his tears. Moreover, he developed a great sense of hate for his parents especially his father. He never had any true friends beside the band and his wife Pamela; they were the only people that did not run from his outburst and wild and coursed behavior that stemmed from his drug and alcohol abuse (Hopkins, 1992).

His onsets of substance abuse develop early, because of his hatred of his father and swore never to do anything his father wanted. His periods of drinking started slow, however his drugging was at severity level quickly. He smoked pot and tripped on acid during college years claimed it helps him see the world more clearly. On the other hand, Jim was falling to the grips of borderline personality disorder for example, he was aware that he is slipping into despair, and voiced his concern that he did not know who he was.

According to the authors, he stop eating and went on a sleep deprivation and taking large amount of acid, because he thought he was a shaman and was

doing what young Indian braves, did to find there selves in trance of unconscious and learn who he was because everyone else did not know him. (Riordan; Prochnicky, 1991). However, his relationships were blurred and quickly lost excitement for the people he performed for and he started to use large capacity of drugs, and this still was not enough to quiet the demons anymore.

He developed an self-damaging impulsiveness personality and had thoughts ofsuicidefor example he would climb tall building tripping on many different psychedelic drugs and walking on the edge with no fear of falling. In addition, his nights of sexual experiences and using drugs with many his different women played а in mood swings and part intenseanxietyordepressionthat would last for days and weeks, because he never took the time to detox and come down from the drugs.

Moreover, his chronic feelings of emptiness became more dreadful and his first line of defense of alcohol had ceased to numb the pain of emptiness. His thoughts of getting drunk, high, death, and working on hispoetryconsumed his daily life. When he serve his probation requirements he played games with the psychiatrist, playing him with a stream of intellectual and philosophical nonsense, and then ending the sessions shortly when he became bored. In addition, he reacted to sychotherapy with distain and scorn, but he ached deep in his absorbent self-core and harbored an ambiguous, unconscious hope that something or someone might have pulled him up from the void and helped him stop living on the edge and testing the bounds of reality. It was around 1970 when Jimi Hendricks and two weeks later Janis Joplin died of overdosed caused by an injection of heroin. Janis's

death bothered him, his death anxiety that Irvin Yalom, wrote about caused him to have his lingering thoughts about death more impulsive, and his behavior became more wreck less.

He would come to perform so drunk and high he could barely finish a concert with going to jail or assaulting someone. He also started to ruin family andfriendshipgatherings with being late or so rude to his friends they all left. Furthermore, he had troubles keeping up with recording session and personal tasks. My five Axis diagnosis with Gaf score, examples, and reason why I felt Jim Morrison needed treatment. Axis 1: Alcohol Dependence, with Physiological Dependence 303. 90, Substance-Induced Mood Disorder (Opioid, Cocaine, Cannabis, and hallucinogen intoxication 292. 9) with Mixed Features, and (X) With onset during intoxication According to the DSM IV-TR: he meets the criteria in Axis I in these ways: * His recurrent substance uses and resulting in afailureto fulfill major roles for example never on time for concerts, studio times, and gatherings * His recurrent substance uses that in most of his situations ended in him or someone suffering from physically hazardous for example, himdrunk driving, climbing up to the top of tall buildings, and walking on the edge not worried about death, being rude to friends and alwayscheatingon his wife. His recurrent substance-related legal problems for example him being arrested on several occasions before or during a concert, at partying, gathering with friends and fans. * He continued his substance uses despite having persistent or recurrent social or interpersonal problems caused or intensified by the effects of the substance for example, instability in interpersonal relationships, family, co-workers, and personal relationships. He has indicated by evidence of tolerance or

symptoms of withdrawal for example, he never entered the studio without a bottle of liquor, spends his days in bars that surround his motel, sleeping and partying with many different women including his wife. * Clinically significant maladaptive behavioral or psychological changes that developed during, or shortly after, alcohol ngestion for example, his lewd and lascivious behavior, drunk driving, interference with flight of an aircraft, and sexual aggressive behavior, his mixed periods of mania and depression, and ending with long periods of anxiety that lead to make him feel more empty inside. (These previous symptoms are not due to a general medical condition) Axis 2: Borderline Personality Disorder 301. 83

According to the DSM IV-TR, he meets the criteria for Borderline Personality Disorder in these ways: * Jim show frantic efforts to avoid real or imagined abandonment caused by his father not accepting him as child and as adult. * He had a pattern of unstable and intense interpersonal relationships with his family and friends and alternating between extremes of idealization and devaluation, with his mood swings cause by his drug and alcohol use. Shifting and unpredictable moods and recurrent suicidal behaviors, gestures, or threats, like climbing tall building and walking on the edge extremely intoxicated. * A poor control of impulses and emotions beginning in early adulthood and evident in a variety of contexts, where his mood would leave him with chronic feelings of emptiness and was confused who he was. * He had an unstable self-image and self-injuring with reckless drinking and drugging with many different sexual partners. Axis 3: None

Axis 4: Problem with Primary Support Groups (his entire friend able him in his actions), (Disruption of family by separation as a military family) and (his

father inconsistent behavior between treating his children as recruits and exercising little parental authority) Problems Related to Interactions with the Legal System/Crime Jim was (arrested at least ten times on such charges as drunk driving, lewd and lascivious behavior, battery, and driving without a license), (harassing media law enforcement officers), and (his Arrest and litigation record left him with and unpredictable future) Axis 5: GAF= 38 current however he moves up and down the scale with his mood swings (30-40).

I rated him this way because his behavior is considerably influenced by delusions, hallucination, or severe impairment with his family, friends, job, judgment, and mood. In most days caused by his depression, drug, alcohol use, and his personality disorder hindered him from recovery. Now, I am going to explain how Jim developed his abnormality with a Freudian approach on id, ego, and super ego. In addition, explain some of Freud defense mechanisms that rescued Jim on a daily basis. I believeFreud would of said that his id and ego are mixed up and causing his motivating behavior to be twisted by him being raised in a military control family that moved from state to state and not giving him time to find himself.

In addition, Freud's psychoanalytic approach would help to explain his behavior, motivation, and borderline personality disorder. For example, he was a highly education with a IQ of 149, however, his father controlled his life by wanting him to join the Navy and follow his footsteps, and Jim wanting to go to film school and write movies. Freud would say he is struck in spitting out (rejection) mode of functioning, because everything his father made him do, he rejected it and did his own thing as child and as an adult (Fiest; Feist,

2009). Freud identified three components of personality structure: the id, the ego, and the superego. He would have thought Jim behavior was due to the result of interactions between these three components.

His id is the primitive, instinctive component of personality and operates according to the pleasure principle. For example, he ruled by the pleasure principle which set his personalities in motion to meet all satisfy instinctual needs and led to his drugging and alcoholism. In addition, he would say his id never matured and his actions are controlled by some unconscious behavior to be like a Shaman and live his life in acid induced trance looking for his way. His id is entirely centered on his needs and wants like sex, drugs, alcohol, and writing poetry. This drove him to fulfill all his desires at the cost of many relationships, friendship, and his life.

The ego was his decision-making component of his personality and it operated according to his reality principle in which he rarely seen, because of the high amounts of drugs and alcohol in his system. His conflict caused his ego and the lines between his unconscious and reality to be distorted. Freud also would say he struggled with reality principle and the tight bond he developed after he witness a car crash in the desert. There in desert was truckload of American Indians were scatter across the ground bleeding to death and he swore the Indian Shaman's soul jumped into his soul. This event is what led to his identity crises and his desire to consume large amount of acid to see his path of life, in a many different visions and trances (Riordan; Prochnicky, 1991).

If Jim were still alive, I would use close quarters and secure measure for substance-abuse treatment with detoxification as the first step, to help eliminate all the substances from Jim's body and protect him from himself and others enabler's. Followed by Freud Psychodynamic Therapy and we would try free association to get him talking about all his emotions, thoughts, and any images coming to mind (Comer, 2011). I would sign Jim into long-term inpatient treatment program combined with antidepressant, anti-anxiety, and a comprehensive substance treatment program that would help him describe hisdreamsin "therapist interpretation sessions, with the three interpretations phenomena techniques' resistance, transference, and dreams" (Comer, pg. 59, 2011).

If previous treatment measure did not work, because he reacted to psychotherapy with distain and scorn as he did in probation force treatment, I would try Marsha Lineman's "Dialectical Behavior Therapy" approach (Comer, pg. 528, 2011). In this treatment, I would be helping him to cope with his disorder. In addition, this approach will teach him to take control of his life, their emotions, and himself through self-knowledge, emotion regulation, and cognitive restructuring (Comer, 2011). One other problem we might have is he like getting high, sees no issues with it, and believes it a spiritual tradition to get high and test limits of life for his sick pleasure. I hope with the previous treatments or his continue drug use he see a vision of himself recovering and changes his ways and follows my direction to brings him to better place in life.

Jim's prognosis would depend on how willing he was to address these difficult issues. The life Jim had created for he is very demanding person. The drugs, alcohol, and sex go together with being a stage performer with borderline personality disorder. I would have made it clear that he is not being forced

into treatment and is free to leave at any time, but it is highly recommended that he stay. Only Jim could have made that decision. In closing, I would have hoped to see Jim recovered and see him go after his first dream of writing poetry and films. One other important hope would have seen him rebuild his relationship with his father. REFERENCES Association, A. P.; DiagnosticAnd Statistical Manual Of Mental Disorders, Dsm-Iv-Tr. (Fourth edition ed., Vol. Text revision). Washington, DC: American Psychiatric Pub Inc., 2000. Comer, C. J. Abnormal psychology. (7 ed.). New York, NY: Worth Publishers, 2011. Feist, J., Feist, G. J. Theories of personality. (7 ed.). New York, NY: McGraw-Hill Humanities/Social Sciences/Languages, 2009. Hopkins, Jerry. The Lizard King: The Essential Jim Morrison. New York, Fireside, 1992. Hopkins, Jerry and Sugarman, Danny. No One Here Gets Out Alive. New York, Warner Books, 1995. Riordan, J., Prochnicky, J. Break on through, the life, and death of Jim Morrison. New York, NY: HarperCollins, 1994.