

# Depictions of dissociative identity disorder: kevin wendell crumb

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## Definition of Disorder

One of the characters of the movie trilogy ( *Unbreakable* , *Split* , and *Glass* ) has dissociative identity disorder. He looks rather impressive: his personality split into more than twenty identities. Some of his identities are women wearing women's clothes. A little boy is another his identity. These identities comprise a specific community striving to protect the host identity. The main goal of this paper is to tell about the disorder from this movie trilogy and to describe its nursing process.

In the trilogy, there are three main characters: Kevin Wendell Crumb, David Dunn, and Elijah Price. They all have superpowers. Dunn is almost invincible and has exceptional strength. His Achilles heel is water as he almost drowned in a swimming pool when he was a boy. Elijah Price calls himself " Mr. Glass" as his bones are fragile, and he had a lot of fractures. Price cannot have a normal life because of this illness. Price's physical disability is offset by his outstanding intelligence. Price is fond of comics, and he suggested that there should be his opposite, a man with exceptional physical strength. Price develops the theory on comics under which comics prepare people for an arrival of a superhero.

Kevin Wendell Crumb is the most contradictory character of the film. He is shown in the second and third parts of the trilogy, but film *Split* is devoted to him completely. He has twenty three different personalities: they represent people of different ages, opinions, and even body chemistry. For an example, one of his personalities suffers from diabetes, and she has to inject insulin to maintain her blood sugar. Cholesterol also changes depending on a

personality that “ gains light”, i. e. takes control of Crumb’s body. This episode is shown in *Split* and *Glass* . There is the twenty-fourth personality called the Beast. This personality is a murderer and a savage cannibal obsessed with an idea to kill all people who have not come through unbearable suffering. These people do not deserve to live in his opinion. All personalities, except for the Beast, are called the Horde. Members of the Horde communicate with each other and strive to protect Kevin, the natural owner of the body.

In the last film of the trilogy, *Glass* , Crumb and Dunn enter the final battle as they pursue opposite goals: the former wants to prove his power, and the latter strives to save humanity. In *Glass* , the external organization represented by psychiatrist Ellie Staple strives to embed an idea of the impossibility of existence of superheroes and superhuman powers. After the battle between the Beast and David Dunn, all three characters were killed.

The main goal of the current paper is to study a disorder that can be observed in this movie trilogy. Kevin Wendell Crumb obviously has dissociative identity disorder. Thus, this paper is devoted to this disorder using the example of Kevin Crumb. This disorder is rare among psychological disorders: around 1% of the population exhibit the symptoms of this disorder (“ Dissociative Identity Disorder”, n. d.).

A personality of a person suffering from dissociative identity disorder is split into two or more identities taking control of him from time to time. There is a lack of connection between different personalities within an individual. A person suffering from this disorder does not feel the sense of identity.

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Dissociative identity disorder can be interpreted as a coping tool (“Dissociative Identity Disorder”, n. d.). A person protects himself from dangerous and painful situations through switching to another personality: as a result, the individual avoids pain and pain-related emotions.

Dissociative identity disorder was called multiple personality disorder before 1994 (“Dissociative Identity Disorder”, 2019). It was renamed as the new name facilitates the understanding of this disorder. The phrase “multiple personality disorder” is mainly associated with the emergence and growth of new personalities, and it is not exactly true in case of this disorder.

Dissociative identity disorder refers to the decay and splintering of a host personality. In many countries, dissociative identity disorder is not considered a disorder: it represents a part of specific rituals (Frothingham, 2018).

The actual causes of dissociative identity disorder are still unknown (“Dissociative Identity Disorder”, n. d.). This disorder is probably a psychological reaction of a person to stresses, traumas, and emotional distress. 99% of people exhibiting symptoms of dissociative identity disorder told stories of personal tragedies like maltreatment, emotional neglect, or domestic violence (“Dissociative Identity Disorder”, n. d.). The majority of these people went through traumatic events at the age of six or under. These traumatic events not obligatory include physical or sexual abuse: if parents neglect their child, he is at risk of dissociative identity disorder.

In the studied movies, *Split* and *Glass*, the episodes of Kevin's childhood are shown. A spectator learns that Kevin's father left his family. He did not mean

to leave his wife and son forever, but he died in the train accident. Secondly, Kevin's mother maltreated the boy: she yelled at him and even beat him. Kevin was afraid of his mother. The obsession of the Beast with the sanctity of traumas and severe painful experience is obviously associated with a tough parenting style of Kevin's mother: Kevin was exposed to domestic violence, and he got sure that only people who came through traumatic events deserved to live. The Beast found that Casey Cooke deserved to live as he noticed scars on her body. It was the reason why he released the girl in the second part of the trilogy, *Split*.

### Signs and Symptoms of Disorder

The main consequence of dissociative identity disorder represents its main symptom ("Dissociative Identity Disorder", n. d.). An individual does not look like a whole person. There is no guarantee that a person suffering from this disorder will give the same answer if somebody asks him his name, age, or hobbies several times per day. Every personality has his own characteristics: name, race, gender, age, preferences, beliefs, and so on.

These personalities are not obligatory real people ("Dissociative Identity Disorder", n. d.). Sometimes these identities are animals. In the case of Kevin Crumb, there was no mention of the origin of other personalities, but it seems reasonable that every personality occurs for a certain reason.

Additional identities are usually not mature, but they reflect a certain sense of a host identity.

For an example, Hedwig is a nine-year-old boy. He takes control of Kevin's body as Kevin did not have a happy childhood. This personality is an embodiment of Kevin's desire to perceive the world for what it is. Patricia, another Kevin's personality, is an adult prudent woman. Patricia is like a representative of the will of the Horde, the multitude of Kevin's personalities. She strives to protect Kevin and to achieve recognition by the society. The Beast, the vaguest personality, symbolizes Kevin's fears and pain he was forced to go through. It refers to his natural desire to follow the rule "an eye for an eye and a tooth for a tooth". Mother's maltreatment towards Kevin made him recognize violence as an inseparable part of living. Only people who overcame the same problems have the right to live from the Beast's perspective as it is the only one way to survive.

The process of transition between personalities can take different amount of time: it takes days, minutes, or even seconds in different cases ("Dissociative Identity Disorder", n. d.). A psychiatrist can call different personalities: they can react to an external call. In the second and third parts of the trilogy, *Split* and *Glass*, psychiatrists communicated with separate Kevin's personalities when they needed. Even Casey Cooke learned how to call Kevin; although, he was the weakest personality. However, even psychiatrists cannot control all Kevin's identities.

The identities within an individual have different relationships with people. They may even have the opinion on other personalities (Frothingham, 2018). Every identity has unique physical characteristics: one of Kevin's personalities needs insulin shots. Other personalities may have, for instance,

a limp or poor eyesight. In other words, a body modifies itself for every identity.

The most common symptoms of dissociative identity disorder include dissociative amnesia, dissociative fugue, and blurred identity (Frothingham, 2018). Amnesia typical for this psychological disorder is more than just forgetfulness. Great pieces of memory associated with different people, events, and emotions disappear. People suffering from dissociative identity disorder often forget information associated with traumas they went through. Sometimes they even forget some information about themselves (“Dissociative disorders”, n. d.). Periods of amnesia occur regularly and may last days, weeks, or months. Dissociative amnesia differs from medical amnesia as episodes of dissociative amnesia are usually short, and all memories come back completely.

The symptom of dissociative fugue refers to periods of memory loss associated with the inability to recall a personal identity (Frothingham, 2018). People experiencing a state of dissociative fugue may go to a new location and start a new life as they do not remember where they lived and who they were earlier. The main difference between dissociative amnesia and dissociative fugue is that a person forgets events and other people in the former case and cannot recall anything about himself in the latter case (Frothingham, 2018).

The symptom of blurred identity implies a feeling that somebody else possesses one’s body (Frothingham, 2018). A host identity does not always feel the presence of other personalities (“Dissociative Identity Disorder”, n. <https://assignbuster.com/depictions-of-dissociative-identity-disorder-kevin-wendell-crumb/>

d.). However, when he realizes that he shares his body with other identities, he usually describes this feeling as “ being a passenger in their body rather than the driver” (“ Dissociative Identity Disorder”, n. d.). It means that people suffering from dissociative identity disorder feel themselves locked in their bodies like in a cage. They do not know how to dispose of their own bodies.

In the case of the studied movies, Kevin Crumb realizes the presence of other identities in his body in films *Split* and *Glass* . He knows their names and, moreover, can deliver messages to them. Kevin Crumb does not remember what happens when other identities take control of Kevin’s body: these episodes can be interpreted as dissociative amnesia. Kevin does not exhibit any signs of dissociative fugue: all his identities know where Kevin lives and who he is.

Headache, time loss, trances, and derealization are other symptoms of dissociative identity disorder. The latter symptom is related to the feeling that the external world is unreal (“ Dissociative Identity Disorder, n. d.”). Kevin seems to experience headaches when one personality replaces another. The host personality does not experience time losses: he knows that his life does not stop when other personalities get light. When identities switch, Kevin goes into trance, but the process does not take much time. However, when the Beast takes control of the body, transition between identities takes more time. Kevin obviously experiences derealization: he explores the world through separate identities. That is the reason why Kevin



agreed with arguments of Elijah Price based on the relations of comics so fast in the third part of the trilogy.

### Nursing Assessment

This stage is of great importance for the overall nursing process (Toney-Butler, & Unison-Pace, 2019). Nursing assessment includes collection and analysis of all data relevant to the patient. The nurse has to apply critical thinking skills at this stage in order to make up a suitable plan of care. Information gathered by the nurse should describe physiological, psychological, sociological, and spiritual aspects of an individual. At this stage, a healthcare specialist determines normal and abnormal states of the patient to choose interventions correctly.

The nursing assessment stage is designed for several goals important for the nursing process (Toney-Butler, & Unison-Pace, 2019). The nurse has to maintain documents on main information about the patient like his name, age, possible diagnosis, main complaint, and the source of information. The nurse has to collect information on past medical history. Then the nurse is to find out whether the patient experiences pain. If he does, a healthcare professional is supposed to determine its location and to estimate its severity according to a pain scale. The nurse has to detect patient's allergies and prescribed medications. The nurse should take care of patient's belongings: they can be sent to safe storage or home. The nurse has to inform the patient, his family, and caregivers on their rights, liabilities, and admission and discharge goals. Then the nurse identifies whether mobility aids is required. The nurse has to estimate the patient according to the

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Morse Fall Risk Scale. This scale indicates a risk for the patient's fall ("What Is the Morse Fall Risk Scale", n. d.). The nurse has to carry out psychosocial assessment: at this stage, a healthcare specialist finds out what type of control and monitoring is preferable for the patient. At this stage, the nurse also assesses patient's psychological state: possible signs of depression, agitation, thoughts of suicide, hallucinations, or substance abuse. Then the nurse should perform nutritional analysis of the patient. It includes monitoring of appetite, changes in the weight, and a probable nutritional counseling in the case of a low body mass index. The next stage of nursing assessment pertains to analysis of vitals like body temperature, heart rate, blood pressure, respiratory rate, and oxygen saturation rate. Then the nurse has to get handoff information from other departments if it is available.

At this stage of assessment, the nurse collects data through history, physical examination, and diagnostic tests (Toney-Butler, & Unison-Pace, 2019). The stage of collecting patient's history includes interviews with the patients and analysis of past medical history. At this stage, the nurse identifies whether the patient experiences pain and describes pain with the use of specific signs like restlessness, groaning, vomiting, patching, lowered interest in regular activities, and others.

Then the nurse proceeds with psychosocial assessment (Toney-Butler, & Unison-Pace, 2019). The nurse identifies psychological symptoms and spiritual needs at this stage. A healthcare specialist can apply various strategies to identify even subtle and rare symptoms.

The nurse should be an attentive listener as patient's symptoms can manifest themselves in details. The nurse is recommended to tell appropriate observations to facilitate conversations. The nurse is to be empathetic. In this case, the patient will probably be more honest as he will be sure that the nurse will accept everything he tells. The nurse also can share a humor to support and to cheer the patient up. The nurse is supposed to give hope to the patient as it will increase the effectiveness of treatment and a probability of a good outcome. The nurse should understand the meaning of physical contact for the patient during interviews. Some people have a positive attitude towards it, and the nurse may touch the patient if it represents a source of comfort for him. A healthcare specialist can keep therapeutic silence to monitor any signs of discomfort. The patient should be kept informed about the ongoing course of treatment, its findings, and the necessity of specific tests to reduce his level of anxiety. The nurse has to keep conversations in a clear manner in order to get relevant information on patient's mental health. The nurse should identify the main sources of discomfort for the patient during conversations as they may indicate probable medical conditions. The nurse can achieve self-disclosure of the patient to build up a relationship of trust and respect. The nurse has to confront the patient to discuss contradictions in the patient's history or misconduct. The nurse estimates cultural competency of the patient like his ethnic origin, religious practices, emotional reactions, and others.

The physical examination stage consists of two parts: initial and secondary assessments. The first part includes collection of data on patient's vitals and general parameters like an overall health state, a body habitus, and others.

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The second part of the physical examination implies detailed assessment of different body systems and a mental status. This stage may last different time. Then the nurse decides what tests should be performed on the base of the patient's history and physical examination.

In the case of Kevin Crumb, the most useful part of nurse assessment is psychosocial assessment (“ Psychosocial Assessment: A Nursing Perspective”, 2017). At this stage, the nurse analyzes the psychiatric/psychological history of the patient. In this case, the nurse could acquaint himself/herself with records of Karen Fletcher or Ellie Staple if they are available. Kevin did not take any pills voluntarily, but he could be forced to take antianxiety drugs in the hospital in film *Glass* . Then the nurse assesses previous substance abuse in order to estimate violence risk. This part would be especially important for Kevin as one of Kevin's personalities poses a threat to other people. The nurse has to collect information on all personalities of the patient to assess Kevin's mental state correctly.

The next step of psychosocial assessment is analysis of family history. Kevin's mother could also suffer from some psychological disorder. This circumstance would help to explain Kevin's dissociative identity disorder. Then the nurse analyzes patient's employment and educational history. If the patient has a job, his colleagues and supervisor may tell something about him. If the patient has a college education, the nurse may approach the patient on the base of it. Patient's school history can be useful in the same way as the patient's job is. Maybe patient's classmates or teachers can

say something about him when he was a child. The nurse also should find out whether the patient has legal problems.

Then the nurse analyzes patient's developmental history (" Psychosocial Assessment: A Nursing Perspective", 2017). At this stage, the healthcare specialist would learn about family problems of Kevin like desertion by his father, maltreatment, and domestic violence. The boy faced these problems at a very young age, and, therefore, they could lead to serious consequences.

The following part of psychosocial assessment is spiritual analysis. The nurse identifies the patient's religious affiliation and the role of the religion in his life. In this particular case, the Horde adheres to a specific concept of sanctity that can be associated with some religious ideas.

Then the nurse turns to cultural values of the patient. One of Kevin's identities is fond of fashion. This feature probably has some psychological meaning. Moreover, other Kevin's identities have specific characteristics reflecting their different beliefs and views. This part of analysis is aggravated by the fact that all Kevin's identities are immature (" Dissociative Identity Disorder", n. d.). It means that they represent only fragments of Kevin's initial personality, and it might be difficult to find a connection between views and ideas of these personalities and the development of dissociative identity disorder. This step also includes determining interests of all identities.

The nurse may also look for clues through analysis of the patient's financial position. If the patient is in want of money, his behavior can be probably explained through this need. In the case of Kevin Crumb, the role of money is unclear. Kevin's life is shown in the second part of the trilogy: he lives in big rooms in a basement, and it seems that he can buy everything he needs.

The following part of psychosocial assessment is mental status examination. The nurse assesses a patient's mental status at this stage. Patient's mood, behavior, speech, thought process, impulse control, cognition, attention, memory, visual spatial perception, the executive function, and overall intelligence should be analyzed (" Psychosocial Assessment: A Nursing Perspective", 2017). The nurse should assess a mental status of all Kevin's personalities in order to find out why the host personality split exactly into them. A mental state of each personality represents an important characteristic that helps to identify a personality taking control of a body at this point of time. Thus, thorough psychosocial assessment would help to diagnose Kevin's dissociative identity disorder and to find the probable cause of its emergence.

### Problem Identification

Dissociative identity disorder can be clearly identified at the stage of psychosocial assessment. In films *Split* and *Glass*, identities replace each other rather quickly. The nurse would notice a rapid change of the patient's mental state. The healthcare specialist would talk to different identities to make sure that they represent fragments of Kevin's identity. Then the nurse would find out that one of Kevin's personalities poses a threat to other

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people and take steps to minimize it. The idea of rapid flashes of light applied in film *Glass* turned out to be effective as they cause the change of a personality.

Then the nurse would gather information about Kevin's life. Information on domestic violence and maltreatment on the part of his mother is a possible key explaining the development of Kevin's dissociative identity disorder. This information can also explain the purpose of each separate identity and, what is more important, a propensity of violence of the Beast. The latter represents the most evident reflection of the host personality, Kevin's feelings and fears.

### Goals of Treatment

Treatment of dissociative identity disorder can be painful and prolonged (Tracy, 2015). In some cases, the merger of splintered identities is impossible, and patients just look the way to have a normal life. Sometimes a patient with dissociative identity disorder combines all personalities and gets back to normal. However, not all patients are ready to get rid of other personalities as they help to face problems and pain-related events.

There are several goals of dissociative identity disorder treatment (Tracy, 2015). First of all, personalities of a patient should be combined into one well-functioning personality. As it has been already mentioned, one of the most probable causes of dissociative identity disorder is traumatic events that an individual went through at an early age. Thus, reconciliation with painful memories and emotions should be another goal of treatment.

The emergence of other identities can be interpreted as a coping mechanism. In other words, it is a tool through which a patient reacts to external stimuli. Thus, a healthcare specialist has to rebuild patient's coping mechanisms as he will need to cope with these emotions on his own. The next goal, to restore functionality, is linked to the previous one. The patient will have to live a normal life in all senses: if other identities prevail in the patient's body, the patient can be detached from the reality. The last goal of dissociative identity disorder treatment is to improve patient's relationships with other people. It is the last component of a normal life that patients with this disorder intend to return.

In the case of Kevin Crumb, the goals of reconnecting all identities and restoring control of the body to the host personality seem a difficult task. In the second and third parts of the trilogy, there is no mention of the patient's history: a spectator does not know when dissociative identity disorder emerged and how it developed. However, it is clear that additional personalities capture Kevin's body almost completely. Kevin takes control of the body very rarely, and he probably forgets how to live in the modern world. There is no guarantee that Kevin's psyche can be prepared for the merger of all identities.

### Plan of Care

The long-term dissociative identity disorder treatment consists of the following components: psychotherapy, hypnotherapy, and adjunctive therapy ("What's the recommended treatment plan", n. d.). There is no medication treatment of this disorder. In this case, medications are used to

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treat disorders and symptoms emerged as a result of dissociative identity disorder. The patient may need these therapies throughout his life.

### Nursing Interventions

Nursing intervention plays an important role in treatment of dissociative identity disorder (Baral, 2013). Nurses accompany patients during painful experience and ensure the sense of safety (Varcarolis, 2017, p. 162). As a result, the patient endures procedures better. The nurse has to inform the patients on stress management and the course of treatment. If a patient understands the course of treatment, he will be more likely to cooperate. If the patient is in a crisis, provision of a safe environment is the main goal of the nurse. The nurse also can carry out task-oriented therapy or art therapy to calm the patient down (Varcarolis, 2017, p. 162). The nurse has to accept patient's negative emotions and to encourage him to make independent decisions.

### Outcomes and Evaluations

The assessment of treatment is positive if several conditions are met (Varcarolis, 2017, p. 163). First of all, patient safety is ensured. Secondly, the patient got back to normal. All patient's conflicts have been resolved. The patient knows how to live and to apply new coping mechanisms. The patient knows how to deal with stress. Therapeutic alliances have been established. The patient with dissociative identity disorder may not reconnect all personalities inside him, but if he is ready for a normal life and knows how to

coexist with them and to benefit from their existence, he can live a normal life as well.

## Conclusion

Kevin Wendell Crumb represents a clear example of an individual suffering from severe dissociative identity disorder. The so-called Beast is the main reason why Kevin poses a threat to other people. However, all his identities embody different feelings and fears of Kevin. Of course, the case of Kevin is not common: in many cases, symptoms of this disorder are not so devastating.

Not all cases of dissociative identity disorder can be cured. Even if it is possible, a patient is forced to go for therapy for a long time. Some patients do not want to lose other personalities as they help the patients to go through difficult situations and pain-related experiences.

In this paper, dissociative identity disorder and the corresponding nursing process are described. In case of this disorder, the role of a nurse is significant: it can be seen through the section of nursing interventions. A nurse should establish a relationship of trust with a patient to facilitate his treatment.

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