

# [Study on sybil isabel dorsett’s case of the dissociative identity disorder](https://assignbuster.com/study-on-sybil-isabel-dorsetts-case-of-the-dissociative-identity-disorder/)

Sybil Isabel Dorsett is perhaps the most famous case of Dissociative Identity Disorder (DID). Dissociative Identity Disorder is the presence of two or more distinct identities or personality states. Each identities has its own relatively enduring pattern of perceiving, relating to, and thinking about the environment and self (Smith, 1999). This case appears in a book by Flora R. Schreiber and was later made into a film (Sybil). Sybil seems to have experienced 16 separate personalities, two of whom were male. These personalities were created because of the horrific child abuse her psychotic mother inflicted upon her, along with the failure of her father to rescue her from it. Each personality embodied feelings and emotions that the real Sybil could not cope with. The waking Sybil was deprived of all these emotions, and was therefore a rather drab figure. She was unaware of her other personas and while they were in control of her body, she suffered blackouts and did not remember the episodes. The intervention of Dr. Cornelia Wilbur, a psychoanalyst, helped her to become aware of these personalities. As stated above, Sybil developed a Dissociative Identity Disorder. However, many of her personalities were created during therapy. After watching the movie and analyzing her developmental history, I can say that she was able to face her fears and better her life because of therapy. In this paper, I will talk about Sybil’s developmental history, her different personalities, and how Carl Jung’s theory (the personal unconscious) fit into her situation.

In her situation, the young Sybil suffered physical and psychological distress from the abuse of her beloved mother. From birth, Sybil did not experience the bonds that exist between a mother and a child. Her mother made her believe that she was the most horrible child. This misconception was well coded with the abuse and rejection that she experienced. Sybil was the only child born to her biological mother and father, and was able to acquire a loving relationship with her grandmother, who also lived in their middle class one family house in Wisconsin. Due to the authoritative manners of Sybil’s mother, her grandmother did not associate with her own daughter.

While growing up as a child (around the age of 3 – 5), Sybil experienced many distress. Her abusive mother treated her like a lower class citizen. By her own interpretations, she used the worst forms of punishment on Sybil. In other families, a child running through their home or asking polite questions is quite acceptable. Sybil’s mother believed that such behavior was rude and unacceptable. The physical cruelties that Sybil suffered were crucial. The types of abuse Sybil endured included: being hung up (both hands tied to a chain) to the roof of an old barn, being stuffed in an old chest, and being laid on the kitchen table (with a piece of wood tied to her legs and hung up from the kitchen light). Her mother also gave her a black eye, which was never reported to anybody (due to the fact that Sybil was not yet attending school). Her mother (who was a pathological liar) told her father that one of the neighbors had done it. Not by surprise, this little girl was lied to and about many times. One time, her mother tricked her by telling her that she was taking her to see her best friend. Instead, the mother took her to the doctor’s office to get her tonsils taken out. Afterwards, Sybil plead to the doctor to take her home with him. Unfortunately, the misleading ways of her parents caused Sybil to experience the fear of not trusting people. Throughout the years of abuse (childhood and adolescent), both Sybil’s mother and grandmother passed away by natural cause. After, her father remarried, and Sybil moved out on her own. Throughout her life, Sybil had to deal with painful repressed memories from her childhood abuse. Unfortunately, the memories of her childhood (when onset) caused her to develop a Dissociative Identity Disorder.

In Sybil’s case, there were sixteen different personalities, including herself or the “ waking” Sybil. That’s a lot of people to share a life with. Victoria Antoinette, or Vicky, was a confident, self-assured personality who was a thirteen years old child from Paris. Peggy Lou and Peggy Ann Baldwin, were both 9-year-old personalities, and were often seen together. Peggy Lou was often mad about something, and Peggy Ann was often afraid (Vicky said Peggy Ann was more tact than Peggy Lou). Marcia Lynn Dorsett (sometimes Marcia Lynn Baldwin) was an artistic and usually suicidal personality. Ruth was the youngest personality and she was only two.

Vanessa Gail Dorsett was a personality who was Marcia’s best friend. They shared similar interests such as travelling, theatre going, concerts, visiting places of historical interest and buying choice books. They were usually in control of Sybil at the same time. Vanessa was musically inclined and played the piano. Mary Lucinda Saunders Dorsett was a grandmotherly personality, and she took her name from Sybil’s late-grandmother. Marjorie was another personality who was a tease. She usually referred to Sybil as “ you-know-who”. The most interesting thing about Marjorie was that like most of the other personalities, she never seemed to be or have been depressed. Mike and Sid were the only 2 male personalities. They were both carpenters and built all kinds of stuff. Nancy Lou Ann was a personality who was interested in politics and had a fear of Roman Catholics. Sybil Ann was a personality who was extremely listless and pale. Clara was very religious and wasn’t too fond of Sybil. The Blonde was a personality who didn’t have a real name, and she seemed to be perpetually eighteen years old. The waking Sybil was depleted, had a bad self-image, and feared purple and green. All 16 personalities had separate ideas, backgrounds, and personal appearances.

Vicky came into existence when Sybil was 16 years old. At that time, it was Vicky’s responsibility to maintain Sybil’s poise, confidence, and her capacity to negotiate the world. Her observing, recording, and remembering skills gave her the foundations for establishing a continuity of memory, which was the key deficit in Sybil’s miserable existence. Vicky saw life as whole, making her the most well rounded personality of them all.

Vicky’s personality seemed to have a better sense of control when she made her appearances. While Peggy Lou seemed to instantly appear when Sybil faced any kind of anger invoking situation, Vicky seemed to drift in and out, making her own decisions about when she was needed. This passivity seems to be reflected in a later comment made by Sybil about how she didn’t leave Vicky behind, but when she couldn’t do something, Vicky did it for her.

At the age of 23, the expectation was built upon the fact that some personalities, especially Vicky, had to be in control and know what was going on because the waking Sybil was no longer aware of all her movements. Until Sybil entered therapy, she was not conscious of the events occurring during her blank moments. Vicky was able to bring the whole story together because she witnessed Sybil’s life from an early age. At the age of 28, Sybil was introduced to Dr. Cornelia Wilbur by a hospital after she slit her wrist and almost killed herself in a hospital in New York. Vicky’s poise and confidence made Dr. Wilbur wonder whether it should be Vicky that all the other personalities should be integrated rather than Sybil. This can be explained in terms of threshold values. Thus when Vicky is brought out, the neural connections involved in maintaining these aspects of Sybil’s personality (in her consciousness). These connections are weaker and have a lower threshold value meaning they are less resistant to disruption caused by trauma, and likely the first to break. However, this view implies that all the personalities have independent units in the brain that can be switched on and off from Sybil’s consciousness.

Under hypnosis a part of the individual becomes dissociated, and acts as an overseer to the events that take place. They remain in touch with the reality of the situation, but remain out of awareness of the hypnotized subject (Zastrow, Ashman, 2001). In Sybil’s case, Vicky represents this hidden observer, and logically explains why she is the first to appear.

An angry personality appears to be one of the most common in Dissociative Identity Disorder patients (Pikunas, Albrecht, 1998). Peggy was created by one of Sybil’s earliest dissociations in order to cope with the anger that Sybil felt towards her mother but was never able to express (around the age of 29). Dr. Wilbur identified that there were two levels of denial towards the mother displayed by the personalities. The first was to deny the feelings of hatred for her, and the second was to deny that she was even related (Sybil, 1976). The second level is what Vicky opted for, and went as far as creating herself a large and loving family, who lived abroad and were coming for her. When Sybil could finally accept and express hatred for her mother, it was only then that Vicky could begin to accept that Sybil’s parents were her own (later splitting into Peggy Lou who was angry and Peggy Ann who was afraid). The importance of Peggy Lou can be seen in the fact that she took over for two years of Sybil’s life when things were too overwhelming and she could not cope with life (remember that Peggy Lou was the one who kept her arithmetic skills to herself so that Sybil struggled back at school as her waking self).

Marcia was highly creative, her paintings showed a great variety of colors compared to other alter egos and she was confident that her writing and painting were superior to that of the other alter egos (with the exception of Vanessa and Vicky). Marcia would like to turn her talents to cash but becomes frustrated when prevented by the others, mainly Sybil. Marcia was desperate to be loved but was stuck in the past and depressed as a result of never being loved by her mother (Schreiber, 1973). Although she was mischievous and can be light-hearted she was basically a pessimist, somber and brooding. Marcia was also extremely emotional and appears to live in extremes. She had the greatest need of all the alter egos for a loving mother, however this was equal by her guilt from having wished her mother dead (this guilt resulted in her depression and suicidal tendencies). Marcia relieves Sybil of her need and hate for her mother. Marcia was religious, though resented the prohibitions of it. She saw religion as depriving her of the opportunity to grow up freely. She felt trapped by talk of the end of the world, though believed that a better life would follow. Carl Jung very well explains Sybil’s Dissociative Identity Disorder.

Carl Gustav Jung was one of the best known members of the group that formed the core of the early psychoanalytic movement. These followers and students of Sigmund Freud believed that the Jungian theory is experience driven. This approach keeps one foot in the world of outer events and the other in the inner realm of fantasies, dreams, and symbols (Zastrow, Ashman page 104). In a major work “ Psychological Types” Dr. Jung (1921), dealt with the relationship between the conscious and unconscious as well as divided personality types into extrovert and introvert. He later made a distinction between the personal unconscious which is the repressed feelings and thoughts developed during an individual’s life and the unfolded life possibilities and much more. Further, the collective unconscious is inherited feelings, thoughts, instincts and memories shared by all humanity (class notes).

Jung taught that the psyche consists of various systems including the personal unconscious with its complexes, and a collective unconscious with its archetypes. Jung’s theory of a personal unconscious is quite similar to Freud’s creation of a region containing a person’s repressed, forgotten or ignored experiences. However, Jung considered the personal unconscious to be a superficial layer of the unconscious (Samuels, page 88). In Sybil’s case, she was stuck in the stage the personal unconscious. She did not bring into reality the painful memories that her mother inflicted upon her. Jung discussed the mother’s complex by explaining that: “ The nucleus is derived in part form racial experiences with mothers, and in part from the child’s experiences with the mother. Therefore, the ideas, feelings, and memories relating to the mother are attracted to the child and formed a complex. The stronger the force emanating from the nucleus, the more experience it will pull to itself”(Jung 1954). As Jung mentioned, children’s thoughts, feelings and actions will be guided by the conception of the mother. The things she says and what she feels may mean a great deal to the child and her image will be uppermost in the mind of her child. A complex may seize control of the personality and utilize the psyche for it’s own end.

Within the personal unconscious is what he called feeling toned complexes. He said that they constitute the personal and private side of psychic life. These are feelings and perceptions organized around significant persons or events in one’s life. Jung believed that there was a deeper and more significant layer of the unconscious, which he called the collective unconscious. He believed that this layer is innate, unconscious, and generally universal. Jung saw the collective unconscious as the foundational structure of personality on which the personal unconscious and ego are built. He believed that the foundations of personality are ancestral and universal.

A primary aim of Jungian psychotherapy/analysis is to establish an ongoing relationship between consciousness (ego) and the unconscious, versus what is happening in the unconscious and what is taking place in day-to-day life. Jungian theory understands the psyche as containing a drive toward balance and wholeness, differentiating and incorporating the various elements of the personal unconscious and establishing access to the collective unconscious. Jung called this the process of individuation (Peterson, 1996). In psychotherapy this unconscious material gradually manifests itself symbolically in dreams, in products of active imagination, and in the transference/countertransference relationship between therapist and patient.

Most lost memories are lost because they were never elaborately encoded. Perception is mostly a filtering and defragmenting process. Our interests and needs effect perception, but most of what is available to us as potential sense data will never be processed, and most of what is processed will be forgotten. As shown in Sybil’s situation, information was blocked (forgotten) in order to stop her from being reminded of unpleasant things. We can assume that Sybil forgot the memories because she did not perceive closely in the first place or she did not encode the experiences either in the parietal lobes of her cortical surface (for short-term of working memory) or in her prefrontal lobe (for long-term memory). As I mentioned, Sybil repressed her memories in order not to deal with the pain that she went through as a child. Sybil used a defense mechanism (repression) that was very destructive to herself. The essence of my argument is that Sybil Developed a Dissociative Identity Disorder. The help of Dr. Wilbur gave her a helping hand to face her fears. The support of families and friends are very important to those who suffer from Dissociative Identity Disorder.