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**The problematic portrayal of Dissociative Identity Disorder in Literature and Cinema: An exploration of Margaret Atwood's *Alias Grace*, Robert L. Stevenson's *Strange Case of Dr Jekyll and Mr Hyde*, and M. Night Shyamalan's *Split*.**

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## **ABSTRACT**

Diving into literary works and film productions in Hollywood we can explore the negative connotations and misconstrued ideas about people who suffer from DID (Dissociative Identity Disorder). From rapists to serial murderers, the representation of people with mental disorders in general, whether they are inclined by drug abuse like in *The strange case of Dr. Jekyll and Mr. Hyde* (1886) or as a consequence of child abuse, possibly linked to *Alias Grace* (1996) and the cinematic adaptation of *Split* (2016). Therefore, we can confidently say that such people are not only being misinterpreted but also sentenced to live with the fear of being feared.

In this piece of work, we will be exploring how dissociative identity disorder can be interpreted within its representation in literature and cinema. By doing so, we will be untangling and debunking the misconception and huge stigma that has been created around this very complex mental disorder.

Key words: Dissociative Identity Disorder, *The strange case of Dr. Jekyll and Mr. Hyde*, *Alias Grace*, *Split*, stigma.

## **RESUMEN**

En el intento de adentrarnos en piezas literarias y en producciones cinematográficas de Hollywood, exploraremos las claras connotaciones negativas que se han construido alrededor de personas con trastornos mentales, más específicamente con Trastorno de identidad disociativo. Desde violadores, hasta asesinos en serie, la representación de personas con trastornos mentales en general, haya sido causado por el abuso de drogas como en *El extraño caso de Dr. Jekyll y Mr. Hyde* (1886) o por la razón más notoria por la que aparece, el abuso infantil, posiblemente asociado a *Alias Grace* (1996) y la adaptación cinematográfica *Múltiple* (2016). Siendo no solo malinterpretados sino que también están siendo sentenciados a vivir con el temor a ser temidos.

En este trabajo examinaremos como el trastorno de identidad disociativo es interpretado en su representación en la literatura y el cine, y mediante el cual iremos desmontando la construcción errónea y el estigma alrededor de un trastorno mental tan complejo.

Palabras clave: Trastorno disociativo de identidad, *El extraño caso de Dr. Jekyll y Mr. Hyde*, *Alias Grace*, *Múltiple*, estigma.

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## 1. INTRODUCTION

As shown many times in literature and cinema, mental disorders seem to be on-trend for the public eye, more specifically Dissociative Identity Disorder, which we will be exploring quite thoroughly in this piece of work. There seem to be two approaches to the representation of this psychopathy in the entertainment industry.

On the one hand, we may find films like *Sybil* or *Frankie and Alice* that seem to have a somewhat accurate and respectful portrayal of the psychopathy. In such films, the main character is not defined by the illness, therapy seems to improve their quality of life if well oriented, and, does not create a distorted representation of the disorder for the sake of entertainment. On the other hand, we may also find literary pieces like *The Strange Case of Dr. Jekyll and Mr. Hyde*, *Primal Fear* or *Alias Grace* where the representation of the disorder has a clear criminalising portrayal of the person with the psychopathy. In addition to literary works, we can also find films like *Identity*, *Split*, or *Psycho* that, similarly to the literary works mentioned, do not only misinterpret the outcomes of such disorder but, it also creates a stigma around people who suffer from it.

In this piece of work, we will be exploring the main aspects portrayed in the literary works of Margaret Atwood, *Alias Grace*, Robert L. Stevenson, *Strange Case of Dr Jekyll and Mr Hyde*, and the film adaptation by M. Night Shyamalan, *Split*. We will attempt to compare such representations in the fictional pieces of entertainment with not only data from psychiatric specialists but also to real-life accounts from people who have been diagnosed with Dissociative Identity Disorder. By explaining such dichotomies between fiction and real life, we will strive to prove how this misconstrued representation of Dissociative Identity Disorder creates stigma and fear towards people who have developed the disorder.

*The Strange Case of Dr Jekyll and Mr Hyde* is the first novella from Scottish writer Robert Louis Stevenson published in 1886. While living in Bournemouth for three years, he suffered from an intermittent illness; nevertheless, those years were quite fruitful with the creation of his famous novel *Kidnapped* and, the novella we will be discussing *The Strange case of Dr Jekyll and Mr Hyde*. In this novella, Stevenson portrays his notion of the human condition, the duality of all humans. To depict such a complex concept, Stevenson jumps into some aspects of the mental health domain, creating a duality of identity in one body, cohabiting the good and evil side. As we have mentioned, we will be entangling some aspects of the novella that withstand real-life cases of people with DID to point out how the concepts formed in fictionalised literature can hurt the perception of them.

*Alias Grace* is a historical novel published in 1996 by Canadian author Margaret Atwood, winner of the *Giller Prize* in Canada for this novel in particular. Atwood's piece of work is, according to *Encyclopaedia Britannica*, considered as a fictionalised account of a real-life Canadian girl who was convicted of two murders during 1843 in a hugely sensationalised case. In the story, Atwood attempts to blend historical facts about Grace's accounts on the story and aspects of fiction in order to create an entertaining and engaging story about her case. In Grace's portrayal in the novel, she has reportedly been possessed by a ghost, and it is such ghost that claims to have committed the murders, using Grace's body as the perpetrator. As it may be interpreted, ghost possessions could be a fictionalising tool of a mental disorder such as DID or Borderline Personality Disorder, for instance. In this piece of work, we will untangle the connection between the character of Grace and our attempted diagnosis of her suffering from DID. Furthermore, just like in Stevenson's work, Grace's depiction as a murderer who has no control over her actions, and the fact that it seems as if she is mentally ill; appears to be highly stigmatising to not only the DID community but the mental health community in general.

Finally, we will be exploring the character of Kevin Wendell Crumb, the main character in Shyamalan's film *Split*. This film released in 2016 was inspired by a real-life person with DID named William Stanley Milligan who committed several crimes but could not recall on any of it. Apparently while being on trial, he was diagnosed with the psychopathy and reportedly inhabited 24 other identities in him. In this film based on the crimes committed by Milligan we can also find a high fictionalisation of the main character Kevin, due that as the film explores, the 24th identity has extraordinary strength and power over the others. As we have mentioned, and this science fiction film is no exception, the exaggeration and criminalisation of people with Dissociative Identity Disorder seem to misinform the general public on what people with the disorder are really like. Conclusively, it creates unrest amongst the population. On the one hand, for the people who believe the representation they are shown, instead of informing themselves and therefore, develop a fear of DID patients and consider them as dangerous. And on the other hand, for the ones diagnosed with DID, who did not only endure tremendous trauma in their past but are currently also being forced to deal with the misjudgement and fear towards them.



## **2. DISSOCIATIVE IDENTITY DISORDER OR MULTIPLE PERSONALITY DISORDER**

### **2.1 What is it?**

According to the Handbook of Dissociation (1996), Dissociative Identity Disorder (DID) or Multiple Personality Disorder (MPD) as it was known until 1994, "is a complex, chronic, post-traumatic dissociative psychopathology" (Kluft, 1987a; Loewenstein, 1991) "characterised by disturbances of memory and identity" (Nemiah, 1980).

It is distinguished from other disorders because of the coexistence of several identities within an individual body, in most cases, this coexistence of such identities tends to be alternated depending on how the subject is feeling. In consequence, the person or host identity suffers from episodes of not only memory disruption but also frank amnesia, or both.

As it is introduced in this handbook, "It almost invariably emerges as the sequela of overwhelming childhood experiences" (Putnam, Guroff, Silberman, Barban, & Post, 1986; Spiegel, 1984, 1991). Furthermore, "its childhood form is often rather simple and its traumatic antecedents frequently can be documented with facility"(e.g., Faganand & McMahan, 1984; Kluft, 1984a, 1985a; Hornstein & Putnam, 1992; Coons, 1994).

However, it appears that in some adult cases, secondary autonomy of the defence of altering formation and function, the development of additional complexity, and a reworking of childhood experiences occur during adolescence. Under this metamorphosis, the adult form often becomes rather intricate in its structure. "Adult patients' given histories demonstrate the interplay of historical events, fantasy, confabulation, post-event information, and the impact of many non-traumatic exogenous influences" (Kluft, 1995).

### **2.2. The origins of DID**

Several years since DID was recognised among a long list of mental disorders, attempting to trace the origins and causes of the appearance of such particular psychopathy is still to this day a controversial topic to consider. There are two different approaches to the resurgence of this disorder. The first one, introduced by Gleaves (1996) was called the PostTraumatic Model, PTM for short, where it focuses on the traumatic effect of abuse on children. In other words, this approach considers the primary cause of Dissociative Identity Disorder the huge traumatic impact in a child's mind, creating the alter personalities as a coping mechanism. As

Ross (1997), a proponent of the PTM, argued, “MPD is a little girl imagining that the abuse is happening to someone else” (p. 59).

Furthermore, according to a study made in several Psychology universities across the UK, it was recorded that out of their 5 participants, all reported a range of childhood abuses. As the authors of the study interpreted, such trauma influenced the participants’ perception of environments as adults and enhanced their threat and danger awareness.

On the other hand, we can find the second approach to its origins. Proposed by Spanos (1994) and called the SocioCognitive Model, SCM for short. According to this approach, DID is understood as a “syndrome that consists of rule-governed and goal-directed experiences and displays of multiple role enactments that have been created, legitimised, and maintained by social reinforcement.”. Therefore, Spanos’s approach bases itself on iatrogenic and cultural factors that influence the person, considering that their surroundings might be a direct influence on how the person decides to create alters to fit into different roles of their life within society.

However, none of the two approaches could be unanimously debunked and considered inviable since both have well-founded methodologies.

Nevertheless, whether we can or cannot confirm the existence of childhood trauma in the fictional cases we will be exploring; we will be basing our analysis on the Post Traumatic Model. Bearing in mind that DID is an alternative to Bipolar Disorder and is commonly complementary to the presence of PTSD. Furthermore, as we will explore, most of the accounts of people who have had a DID diagnosis, have strong statements of severe or repeated childhood trauma, whether they have worked it out in therapy or because of the written data of their lives like, diaries or letters to friends.

### **2.3. How is it diagnosed?**

The DSM-IV-TR (Diagnostic and Statistical Manual of Mental Disorders, 4th Edition) (APA,2000) provides the following diagnostic criteria for DID:

A) The presence of two or more distinct identities or personality states ( each with its own relatively enduring pattern of perceiving, relating to and thinking about the environment and self).

B) At least two of these identities or personality states recurrently take control of the person's behaviour.

C) Inability to recall important personal information that is too extensive to be explained by ordinary forgetfulness.

D) The disturbance is not due to the direct physiological effects of a substance (e.g., blackouts or chaotic behaviour during Alcohol Intoxication) or a general medical condition (e.g., complex partial seizures). Note: in children, the symptoms are not attributable to imaginary playmates or other fantasy play. (p. 529)

We should bear in mind that the criterion stated before has several conflictive areas, specifically in sections A and B. Firstly, for the clinician to know about the alter personalities or identities, he or she will have to witness the switching to these other distinct personalities in first hand.

On the other hand, we can also find that statement B might also be conflictive in the diagnosis process. When reunited with the patient, if the clinician does not get to witness such switching several times and determines that there are more than two of these alters, the patient would leave without a diagnosis. Considering these two conflicting statements in the diagnosing criteria for DID, we need to keep in mind that it is still under development. In fact, in 2012 there was a revisited version of it where there was a reconsideration on the fact that the clinician did not need to witness such dissociation happening in first hand. In this newly revisited criteria, it becomes a severely important matter the subjects' adequate self-report about their situation and therefore, their description and perception of their disrupted identity.

It should also be considered the fact that if a patient does not comply with all of the requirements of this criterion, the clinician will not be able to diagnose the patient with Dissociative identity disorder. However, according to the DSM-IV, such a patient would instead be diagnosed with DDNOS, Dissociative Disorder Not Otherwise Specified( APA 2000, 300.15). This model accommodates those patients who suffer from a dissociative disorder but do not comply with all of the symptoms stated in the DID criteria. Such patients, depending on the specificities of their diagnosis and symptoms, may also be treated mostly like DID diagnosed patients due to its high level of similarity.

In the book *Jekyll on Trial: Multiple personality disorder and criminal law*, the authors Elyn R. Saks and Stephen H. Behnke attempt to entangle the concepts within the diverse personalities or identities related to not only Jekyll but also people with Dissociative Identity Disorder, formerly known as Multiple personality disorder. In this untangling of the

concept of several personalities or identities, arises the question of whether these alternate states could be recognised as personalities within one complex persona or they are identities themselves, according to the philosophical criteria of what is considered the sense of personhood. Daniel Dennett (1976) identified six themes that are prominent in the philosophical discussion of personhood. According to Dennett, to consider a person, she/he should: 1) be rational, 2) be the subject of intentional predicates, 3) be the recipient of a certain stance or attitude (moral object), 4) have the capacity to reciprocate when such a stance is taken (moral subject or agent), 5) use language and 6) have a special kind of consciousness, perhaps self-consciousness. Considering Dennett's approach to what a person is recognised to be, the direct relation from a person to the inhabiting of a body gets somehow lost. As it is explained during the book, imagining that an intelligent being from another planet complies with all of the requisites even though it might be incorporeal would still have to be considered a person under Dennett's criteria. In this sense, if we keep in mind such a principle when distinguishing from the alters within a body, the alter identities would, therefore, be considered as individual identities, consequently, different people.

Furthermore, it is also true that Dennett's criteria might become a little problematic and, as it is common, some approaches do not support or go against it. Mental professionals seem to be at a debate to consider whether the alters could be regarded as separate identities. For instance, Putnam (1989) states that whatever an alter personality is, it is not a "separate" person, while Colin Ross (1990) sets in his list of 12 cognitive errors about MPD the idea that alter personalities are distinct people. Furthermore, some professionals seem to dismiss alters even as personalities.

However, on this debate Braude (1991) considers that all of the other authors seemed to be very clear that alter personalities are not separate persons but, instead, their definitions of alters and person certainly sounded as if they were, in fact, the same. Furthermore, as Braude points out, in addition to a sense of uniqueness, alters, identify their fellow identities as separate people. Exemplifying such statement with a quote of a patient explaining how alters have their own point of view and access to their thoughts. However, they only have partial access to other alters thoughts; hence they consider themselves as different people.

#### **2.4. The Connection between Schizophrenia and Dissociative Identity Disorder**

As Elizabeth F. Howell very well analyses in her book, *Understanding and treating dissociative identity disorder: a relational approach*, R. P. Kluft presented a landmark study where he found that patients with DID endorsed 8 of the 11 Schneiderian (Schneider, 1959, as cited in Kluft, 1987a) first-rank symptoms that had been considered indicative of schizophrenia. These symptoms were voices arguing, voices commenting on one's action, influences playing on the body, thought withdrawal, thought insertion, impulses and made feelings. Kluft observed that while it is no longer generally accepted that first-rank symptoms are diagnostic of schizophrenia, they are in fact characteristic of DID. He further specified that the hallucinated voices and the made actions were due to the activities of an alternate identity. In connection with these interconnected symptoms between both disorders, we find that Ross (1989) and Putnam (1997), also observed that dissociative disturbances have often been misunderstood for schizophrenia.

As Howell states, a considerably substantial amount of the symptoms usually associated with schizophrenia are somewhat quite characteristic of DID. Consequently making the diagnosis and, therefore, the misdiagnosis and misunderstanding of some patients a frequent problem. As Kluft attempts to explain, the hidden reasons and potential creators of such hallucinations and distorted personality traits are generally a result of the existence of alters and in itself, the cohabiting of identities in that patient's psyche. In other words, as Kluft mentions, it can be considered that the reason why DID and Schizophrenia have such similar traits are due to the impact of the alter personalities on the functioning of the brain. Where the influence of such secondary voices of the alter identities seem to create a similar reaction on the mind and body of the patient to the commonly known symptoms of schizophrenia.

### **3. THE CASE OF GRACE MARKS**

#### **3.1. Is Grace a murderer by free will or is there something mysterious about her connection to the murders and her knowledge of them?**

When talking to Grace, Dr Simon Jordan realises that there seems to be an apparent limitation to Grace's knowledge about the murders. When the Dr. attempted to get some more information from Grace, she would reinforce the fact that there are some voids in her memory and that she cannot remember the exact moments of the murders of Mr. Kinnear and Nancy, the housekeeper. In this scenario, Grace looks as if she suffers from some level of amnesia, specifically about particular moments of her life, therefore, the presumption that she is innocent of the murders appears to be in her favour. It is also true that considering she was enrolled in a psychiatric facility, it might also be the possibility that there is more to it than plain amnesia about the happenings. Even more so, there might be the possibility that she is lying to create the story of her innocence. As Spanos (1994) and other proponents of the Socio-Cognitive Model of DID have mentioned, "in rare cases certain individuals may feign DID to avoid culpability for criminal actions or to obtain attention."

As a means to evaluate Grace's reaction, we can find that when she is being questioned about the day of the murders, she seems to genuinely not remember anything at all; acting confused and even a little anxious about her lack of knowledge.

On the other hand, as Atwood very intelligently portrays it, when Grace is in her cell the day before agreeing to tell the doctor about the details she remembers of the murders, she seems to express herself differently. For instance, Grace starts talking to herself, imagining as if she was asking the doctor if he wanted to know the real truth, seeming to be a lot more confident than she has been portrayed before, even expressing herself a lot more directly. Perhaps, we could interpret her change in character, either as a symbolism of her taking responsibility of her actions and owning the fact that she murdered those people, or because she has mentally changed into a somewhat different identity. In this manner, Atwood creates an antithesis in her persona. On the one hand, Grace could be pretending not to remember and has been acting innocent as a defence mechanism to prove her innocence. And, on the other hand, she could have also been telling the truth and could not remember the aspects of the murders. Possibly, because as we suspect, she has developed a mental disorder and part of her knowledge is conditioned by the amnesiac walls created in her memory, and in the case of such psychopathy to be DID, in-between identities.

In relation to the so-called amnesiac walls, we can find that in traumatic situations, the brain can develop amnesia in specific areas of its memory storage. According to Walker (2015) in her study of memory and trauma, "memory" is not only made up of historical memory and material documentation but, it also contains the complex qualities of "repression, silence, ellipsis, elaboration and fantasy".

Concerning her approach, the human mind, and more specifically memory, is a very complexly designed system that does not merely work in storing "memories". It also has the role to process aspects that have happened in someone's life and therefore, decide how to deal with such information. To relate such a concept of information memory to Grace Marks, we could interpret that perhaps, the possible development of DID due to having been through traumatic experiences in the past, may have made her processing of information be affected. For instance, on specific days such as when the murders happened or when her trauma first started in her younger life, her unconscious may have decided to omit these pieces in order to protect her and made the information rest stored in other aspects of Grace's psyche, in her alter identity Mary Whitney.

Finally, by the end of the story, we get to experience and therefore "prove" the theory that the person talking in that cell was certainly not Grace. As we find out when Grace is under hypnosis, as it seems to be that, deep in Grace's unconscious inhabits the personality of her beloved yet deceased friend Mary Whitney. Concerning Mary's ghost having possessed Grace's body, we could find a link between the supernatural and chaos. As Esther Saxey (2009) puts it,

"The supernatural element does not, in either novel, allow the maid's desires to be enacted in any straightforward way, but this does not prove the two are not associated; the chaos caused by the ghost and the monster suggests the increased force of a desire that has been repressed or displaced and which now resurfaces." (p. 59).

In other words, what could be interpreted according to Esther Saxey is that Margaret Atwood uses the element of the supernatural, commonly used in gothic novels, to display the repressed desires of a character. Consequently, Mary's ghost would not act as a direct catalyst for Grace's liberation of desires but instead, it would be a cause of chaos in Grace's mind and life. Therefore, it would make Grace's feelings of anger and despise towards her superiors less repressed and in consequence, she acted according to what she truly felt.

Furthermore, according to Isa Gucciardi, there seems to exist a clear connection between the concept of spirit possession and Dissociative Identity Disorder, stating that “one of the ways multiplicity has been most commonly understood is by shamanic practitioners who view the phenomenon as a type of soul loss or spirit possession”. Concerning this link to Shamans, Michael Harner (1990), reports in *The Way of the Shaman* that

“it has been understood in almost all pre-industrial societies that a person’s physical illness or erratic behaviour often has its roots in the loss of an essential part of oneself. The illness can sometimes be aggravated by the subsequent use of that lost life energy by non-corporal spirits. This loss can be compounded by the fact that trauma, which is often the triggering event for soul loss, can also allow the entry of spirits into a person’s psychic space. - It is generally recognized that soul loss takes place due to some kind of mental, physical or spiritual trauma. It is the Shaman’s duty to find the lost soul parts and restore them to the individual. He then performs the specific type of healing, such as dispossession or extraction, which will supplant the occupying spirits which might be present.”

In other words, in cultures that believe in the power and journey of Shamans, have come to understand the multiplicity of the self as spirit possession. Where such spirit, controls and takes over the person affected from time to time, and it is the role of the Shaman to help the person process and get rid of the spirit.

Considering this concept, we can see how the representation made by Atwood bases itself on real-life interpretations of identity disorders. On the other hand, we can also detect how the portrayal of such identity, whether we consider it a ghost or an alter identity depicts a somewhat vengeful persona. Furthermore, focusing on the consideration that Grace's multiplicity is due to DID, we could attempt to state that Atwood's portrayal of Mary's dangerous drive could be a negative connotation towards people who suffer from Dissociative Identity Disorder. Bearing in mind that in her representation, they could not only see themselves reflected in her but also the rest of the public could relate them to this mischievous actions from an alter persona.

### **3.2. Connection of Grace with DID**

Considering the character of Grace Marks in Atwood’s work, we could link the information we have gathered about her life and the symptoms of dissociative identity disorder. Firstly, we should consider the fact that Grace only seems to have one alter personality. As we have



seen in the introductory explanation on DID, according to the DSM-5 criteria, for a patient to be diagnosed with Dissociative Identity Disorder, there should be at least two or more alter personalities within a body. Taking this criterion, into consideration, we could simply establish Grace outside the spectrum of DID and therefore, possibly being catalogued within the Dissociative Disorder Not Otherwise Specified category. This disorder is very similar to DID at heart but, it has more flexible understandings of some aspects, like the number of personalities or the different levels of dissociation each person experiences. After all, it could be the case that Mary as a personality is the only one that we are allowed to experience. Whether it might be because she is a very strong alter in Grace's mind, or because the other alters simply live internally as protectors and have never come to the surface. According to the DSM-5 about dissociative disorders, we can find symptoms like hallucinations, amnesia, blurred sense of identity, etc.

If we focus on the symptom considered as hallucination, we can attempt to find representation within Grace's persona. For instance, when Grace finds her friend, Mary, terribly injured by the intervention she went through, Grace seems to be hopeful and predict, that Mary will eventually recover. Considering the severity of Mary's wounds, it could be considered as a childish and delusional reaction towards the situation. Furthermore, in the morning, when Mary seemed to have passed away, Grace attempts to talk to her and even seems to not only feel her presence but hears her voice as if Mary's ghost had not left the room yet. In this sense, as we have mentioned, the moments of apparent delusion and vivid imagination from Grace seems to be the clear link to the symptoms of any dissociative disorder.

Soon after, Grace seems to link such beliefs to an Irish myth she was told growing up about letting a window open so that the soul of the deceased could be free. According to this interpretation, that might be the reason why Mary's ghost seems to haunt Grace and even get into her psyche and act for her because she inhabited her body instead of running free.

Concerning the presence of a ghost in the story, it is not strange to see that in reality, people who have been diagnosed with DID considered the ghost possession theory before researching their symptoms. Furthermore, taking into consideration the account of a system called the Redwoods who have become activists on supporting and empowering people with DID, stated that before considering the existence of a mental disorder entailing multiplicity of selves, he suspected for some time to have been possessed by ghosts. Moreover, after reading several accounts of people who suffer from DID or Schizoaffective disorders, it has become

clear that people suffering from such delusional states have considered being possessed by a ghost before contemplating the development and existence of a mental disorder.

According to the article about autobiographical memory specificity by psychology researchers Huntjens, Wessel, Hermans, and Van Minnen (2014) found out that, people with DID struggle to access specific memories from their past, which can influence present-day solution finding and emotional regulation. In other words, people who suffer from DID tend to have a hard time remembering specific moments of their past. Consequently, in connection to Grace's statements of her knowledge of the murders, these memories may have been subconsciously omitted from her consciousness due to the development of amnesiac walls. Thus, such memories may lie in a different section of her brain, more specifically, in a variant identity, perhaps in her alter named after Mary Whitney.

Taking a look at the character created by Atwood, her characteristics and the connection we have found to symptoms and typical behaviours from people with DID, we could confidently say that Grace is illustrated as not a mentally healthy person. Consequently, as we are attempting to prove, the characterisation of Grace could be interpreted in two ways by the reader, she would either be a criminal who strives to escape justice or a mentally ill person who is genuinely not aware of her implication. In any of the two interpretations of Grace's character, we can find how the fictionalisation of her being "crazy" or naturally evil, is a very damaging image due that the depiction of the mentally ill person is still considered as highly dangerous.

### **3.3. Hypnosis as a variation to a neurological exam.**

As the novel illustrates, hypnosis is utilised as a peculiar and uncommon manner of neurological examination. At the beginning of the usage of such procedure, like Sigmund Freud attempted to explore, the use of hypnosis is a manner of exploring the unconscious of the human mind. It is necessary to keep in mind that the character who performs this activity is an old friend of Grace, and as most readers suspect he is not an experienced hypnotist. Nonetheless, to explain and somehow make sense of the situation happening right after, we are forced to believe that such activity is fruitful in Grace's unconscious and therefore, as a reader the focus shifts from whether the hypnotist is actually a hypnotist, to a sudden revelation of the truth about the murders.

In the psychology world, there is a lot of controversy about not only the real existence of Dissociative identity disorder but also around the connection and effects that hypnosis has on patients with this disorder. Firstly, we can find that from the nineteenth century, some

psychologists like Binet (1896), or Ellenberger (1970), claimed that when using hypnosis to treat a patient with DID, there tend to be iatrogenic effects. That is to say that it becomes an induced manner of treatment, where the doctors seem to promote the creation and existence of new personalities onto the patients. On the contrary, we can find articles like the one from Colin A. Ross M. D. and G. Ron Norton (1989), where they attempt to debunk the iatrogenic theory of hypnosis. This study shows that the use of hypnosis on patients with DID has no such effects on the existence or creation of various identities. Also, it has mainly proven to be useful to explore the unconscious and the hidden trauma from the patients. In the study, they analysed data from 57 different patients with MPD concerning hypnosis. Firstly, it analysed data from 19 patients who had been hypnotised before and after their diagnosis. And on the other hand, investigated 38 patients who had never been hypnotised before. The results showed no difference regarding either the diagnostic criteria or the number of identities from the patients; proving that hypnosis does not have iatrogenic effects on the patients.

As we have explored in the articles that study the relationship between hypnosis and DID, we can detect how the representation of hypnosis in Margaret Atwood's novel is appropriately accurate. Considering the fact that the character of Jerome, Grace's friend and hypnotist, manages to reveal the hidden personality of Mary within Grace's psyche could be easily backed up by psychoanalysts of several eras. In this aspect, what hypnosis unveils is the reality of Grace's mental state, the existence of an alter personality and therefore, the possibility of a mental disorder yet to study at the time. Furthermore, we should mention the main reason why Grace is put under hypnosis, mostly because she is still being judged for the murders she claims not to have committed. As it is portrayed in the novel, the fact that she is proven by the hypnosis to be mentally "unstable" shows that people who suffer from a mental disorder should be treated and understood within their mental health spectrum. As a consequence, people like the character of Grace should not be held accountable for the alters' actions, and therefore, not considered as criminals because of their mental state.

## **4. THE CASE OF DR. HENRY JEKYLL**

### **4.1. How could we relate the case of Dr Jekyll and consequently Mr. Hyde to DID?**

The story of Dr. Jekyll and Mr. Hyde has been portrayed several times in cinema and theatre due to its variety of interpretations. In some cases, the story was illustrated as an exploration of the duality of mind, in others, as we have considered, it depicted the multiplicity of Jekyll's psyche or even more so, the possibility that Dr. Henry Jekyll had developed Dissociative Identity Disorder. Bearing in mind this approach, we should consider the fact that Jekyll and his switching portrayal seems to be highly demonising, not to mention the evil doings of his alter ego, Mr. Hyde. Considering Jekyll ends up struggling with the increasing power and control of his alter personality Mr. Hyde, we could relate such struggle with the triggering stages towards switching that some people with DID experience daily. At first, we are introduced to Hyde's existence as Jekyll's friend, only to find out later on that they seem to have a much closer relationship than we, as readers, expected.

Furthermore, in the novella, we can find a fragment named as Henry Jekyll's full statement of the case. In such fragment, he said, "If each, I told myself, could but be housed in separate identities, life would be relieved of all that was unbearable; The unjust delivered from the aspirations might go his way, and remorse of his more upright twin; and the just could walk steadfastly and securely on his upward path, doing the good things in which he found his pleasure, and no longer exposed to disgrace and penitence by the hands of this extraneous evil." (p.75). In other words, Stevenson attempted to create this separation of this duality into two separate identities so that one should not have to bear the misdeeds of the other. Considering this very quote, we could draw a link between the concept that Stevenson is creating through this separation and duality of oneself and the resurgence and major reason why DID develops in the first place. This reason is to keep the host identity safe from the atrocities of life, considering that such things happen to another person. As described in a recorded interview on youtube, people with the disorder understand the splitting into more than one identity as a coping mechanism for the trauma experienced in childhood. As a consequence of the protection of these other identities, the host identity can function normally within society.

Moreover, we could interpret Hyde as a so-called persecutor personality, an alter who has held all the trauma and tends to be all tortured and dark, therefore, he hurts his surroundings when he is fronting or in control of the body. Taking into consideration the accounts of 12 murderers who were diagnosed with DID during the trial, it seems to be the case that the persecutor alter or alters, tend to be the most aggressive and violent of the

system, and in those specific cases, the persecutors seem to be the perpetrators of the crimes. However, we should also consider that people who suffer from DID and are under treatment have also explained their experiences. In a recorded youtube video, they pointed out that, in the vast majority of cases, the persecutor alters tended to be intensely depressed and severely dangerous towards the system and the alters within it. As a consequence, such alters create issues of self-harm to the body and psychological abuse towards other identities within the system but cannot recall them ever doing anything to external people, because as they mention, they do not tend to front in public.

Therefore, we could consider that such alters, seem not to be dangerous to the outside world but to the internal one instead. As depicted in Stevenson's novella, Dr. Henry Jekyll employing the intake of substances promotes the resurgence of a dark and dangerous persecutor alter, Mr. Hyde. As we are attempting to present, this representation of persecutor identities as possible perils to society displays a stigma around people with the disorder who are working through its symptoms. Moreover, by only considering the dangerous and visually entertaining cases as the norm, literature and cinema are spreading a perhaps unintended message of warning towards the rest of the population about the dangers of bearing several identities when in reality, only rare cases with the disorder become dangerous.

#### **4.2. Can drug abuse be a catalyst for the appearance of DID?**

Considering Stevenson's work *The strange case of Dr. Jekyll and Mr. Hyde*, we can find how the physician Dr. Henry Jekyll seems to be experimenting with a drug and through its process, becomes addicted to it. We can interpret such addiction when Jekyll tells his friend Utterson, "to put your good heart at rest, I will tell you one thing: the moment I choose, I can be rid of Mr. Hyde" (p. 40).

As Daniel L. Wright (1994) sees it, "Jekyll's erroneous but stubborn conviction that he can be rid of Mr. Hyde is but one prominent sign that he who is controlled by his addiction, regrettably, is one wrongly convinced that he is in control of it". In other words, as Wright interprets it, the fact that Jekyll claims to be able to stop Hyde from appearing, therefore, stop taking the drug, is in itself the portrayal of his actual lack of control over his addiction to the drug, and consequently, the apparition of Hyde. In an attempt to explore how drug addiction is related to this duplicity of mind, and therefore, the surfacing of Mr. Hyde, we will be comparing the impact of drug use or abuse in people who have a schizophrenia diagnosis.

As we have explored in section 2.4, according to the *Diagnostic and Statistical Manual of Mental Disorders, fifth edition* (DSM-5), the symptoms for schizophrenia and DID have several aspects in common. As mentioned, they range from hallucinations to delusions, or disorganised thinking, for instance, these are elements considered as psychotic that are often experienced by people diagnosed with DID, even though DID is not considered a psychotic disorder itself. According to these commonalities, we could draw some similarities between the impact drug abuse can have in people who have developed schizophrenia and in connection to our literary work with the development of DID in Henry Jekyll's character.

According to research done by William R. Breakey, Ellen Goodell, Patrick C. Lorenz, and Paul R. McHugh (1974), where they believed there is a relationship between drug use and the appearance of schizophrenia, they attempted to investigate it through several accounts. As they mention, the notion that there might be an impact on the development of a mental disorder due to drug intake can be interpreted onto a variety of psychiatric disorders, not only on schizophrenia. Such investigation consisted of 46 participants who were diagnosed with Schizophrenia and compared it with 46 so-called controls, consisting of people with no acknowledged mental disorder. As their research explored, within the 46 participants with schizophrenia, 14 had never taken any drugs, 26 had used drugs before the onset of their symptoms, 3 used drugs after the symptoms, and the last 3 could not specify whether they had used before or after the psychiatric symptoms. As the analysis of the data collected from these numbers, on average, the number of participants who had taken drugs was more elevated in the psychiatric group than in the other one. Moreover, the variety of drugs used by the psychiatric group was also more extent and, therefore, had been more exposed to the drug environment from earlier in their lives. As stated in the study, in most cases, psychiatrists have been unable to demonstrate whether the drug use precipitated the illness or whether it was a symptom of the disorder. However, researchers found that even though it is still a common question whether drug abuse can precipitate a psychiatric disorder such as schizophrenia, it helped find out that the more drugs the patients seemed to have tried, the earlier psychiatric symptoms appeared. In other words, the conclusion of this study showed that the use or abuse of drugs acted as a precipitant to the resurgence of schizophrenia symptoms earlier in life. As opposed to people who were diagnosed with schizophrenia but had never tried drugs, that tended to develop symptoms significantly later in life.

Concerning the results from this study and the connection drawn between Schizophrenia and DID we are bearing in mind. We could interpret that as it is shown in the novella by Stevenson, drug abuse or addiction may be a precipitating factor towards the development of mental disorder symptoms, in this specific case, the apparition of Jekyll's alternate identity Mr. Hyde. Which as we are interpreting, it is a symptom of Dissociative Identity Disorder; not considering drug use as a cause for the resurgence of the mental disorder but as a catalyst to its symptoms and states instead. Consequently, we could state that the representation of drug use being a catalyst of the resurgence of a mental disorder seems to be appropriately based on reality. On the other hand, as we are attempting to untangle, the depiction of a threatening alternate identity that resurges due to drugs creates a stigma and fear towards people with the psychopathy. Also, it seems to depict a misconstrued idea that people with mental disorders are heavy users of drugs and are consequently dangerously addicted.

#### **4.3. Dr Jekyll's awareness of the existence of a dual identity and its exploration**

As mentioned in Stevenson's novella, Henry Jekyll says,

“With every day and from both sides of my intelligence, the moral and intellectual, I thus drew steadily to that truth by whose partial discovery I have been doomed to such dreadful shipwreck: the man is not truly one, but truly two.” (p.74).

As we can interpret, he seems to be aware of the duality of the human being, whether it is a metaphor for the good and the evil side of people or the actual suspicion that there was more than one personality within him. Later he states,

"[...] that I learned to recognise the thorough and primitive duality of man; [...] if I could rightly be said to be either, it was only because I was radically both.”(p.74).

Strictly speaking, Jekyll sees both of his personalities as the combination that creates the complexity of himself. He considers that the fact that he could never be just one of them is because he cannot escape from the other.

Furthermore, Jekyll warns the reader that his two-dimensional vision of humankind would probably be overthrown by future investigations. As he mentions, “others will outstrip me on the same lines” (p.74) and, he even dares to predict that in the end, the "man", referring to humans, will eventually be recognised as a heap of various, divergent and independent personalities. The story itself develops, as we know, around the atrocities that a terrible man by the name of Edward Hyde commits, and his apparent friendship with the

prestigious gentleman Dr. Henry Jekyll, when in reality they were, in fact, the same "person". In this sense, what Stevenson attempted to portray was that such duality was complementary and in itself beneficial for Henry as the host of the body because he was not directly related to the crimes Hyde committed.

Concerning this separation of identity within the persona, we should consider the concept of the "good man", depicted by Dr. Henry Jekyll, who as we can evaluate, was repressing a substantial amount of who he was in order to function within society. On the other hand, we can find the character of Mr. Edward Hyde, depicted as a criminal and someone who is guided by Freud's "pleasure principle" and consecutively, the "death drive" principle. He seems to be highly egotistical and will solely do the things he finds amusing and for his pleasure.

As Nietzsche presents in his essays on the genealogy of morality, there seems to be "pleasure of having the right to exercise power over the powerless without a thought, the pleasure '*de faire le mal pour le plaisir de le faire*'" (p. 64-65), in itself, attempts to explain the pleasure of doing evil for the pleasure of doing it. In this sense, we could interpret Nietzsche's perspective to be very much Hyde's driving force of existence. As readers, many people can take away from this duality of character that the aspects that one represses are the ones exploited in the other's persona. As it could be understood, Stevenson's intention was precisely to criticise this repression of the Victorian era and attempted to portray this double wickedness to show that presumably good people were in fact, and in the shadows of the night, evil.

By portraying this awareness of the conflicted and split mind in humankind, Stevenson brought to life one of the possibly first-ever recognised portrayals of Dissociative Identity Disorder. In his depiction of a character who within himself inhabits a different and dangerous persona to their surroundings, is in itself, creating a pattern of understanding. Therefore, setting a norm for the interpretation of people with similar characteristics to Jekyll, creating a preconception that people with several identities should be feared and contained, as they might potentially be murderous just like Jekyll's alter persona.



## **5. THE STRANGE CASE OF WHY LITERATURE AND CINEMA INSIST ON CRIMINALISING MENTAL DISORDERS**

### **5.1. Introduction to The Unbreakable Trilogy, Split.**

According to IMDb, The Unbreakable trilogy, also known as the Eastrail 177 Trilogy, is an American superhero thriller and psychological horror film series. The films were written, produced, and directed by M. Night Shyamalan. The trilogy consists of Unbreakable (2000), Split (2016), and Glass (2019).

In the film, we find Kevin Wendell Crumb, a man with Dissociative Identity Disorder who, as his alter identity Dennis, kidnaps three teenage girls for an unknown reason. During their kidnapping, one of the girls, Casey, tries to manipulate the most innocent personalities in order to escape, but the stronger ones seem to counteract her attempts. At the same time, Kevin visits his psychiatrist several times, where they attempt to unravel the existence of his 23 identities and the possible resurgence of a fascinating yet dangerous 24th that could put in peril not only Kevin's surroundings but also his persona.

As the creator, producer and director of the film mentioned in an interview, the portrayal of Dissociative Identity Disorder is very shocking and provocative, but also very moving because it makes the audience feel a lot of empathy for James McAvoy's character. At the same time, he stated that he had the intention of creating the character/persona of Kevin and his most scary identity, the Beast as a villain, creating a film dedicated to the anti-hero to give more intake of the story behind him.

### **5.2. The Assumption that having several personalities 'must' mean there is a chaotic and evil one in them.**

When attempting to understand how it is that this assumption is that common, we should consider the existing concept within the disorder of DID. While exploring people who have this disorder, psychiatrists have encountered some personalities which seem to be less "innocent" than others. Such identity or identities are called persecutors, to understand the role of this or these personalities we need to keep in mind that the existence of DID, as we have mentioned, is a coping mechanism for people who suffered trauma in early stages of their lives.

According to a study made on 12 murderers who were later diagnosed with DID, it was found to sustain Gleaves' Post Traumatic Model, according to which all of the participants had been through atrocious states of abuse during childhood. This study was made to gather objective documentation of cases with DID. To consider such information gathered objective, the study focused the data and evidence on relatives' and friends' accounts and written documentation of such happenings, in some of their letters and personal diaries. Also, the authors of this study who have been treating people with DID for years have concluded that “most patients with DID do not commit murder. On the other hand, most patients with the disorder do have aggressive, protector personality states.” (D. O. Lewis, C. A. Yeager, Y. Swica, J. H. Pincus, and M. Lewis, 1997). Conclusively, they found that relatively few commit violent crimes, reflecting in part, the fact that most recognised cases of dissociative identity disorder occur in women, and women as a group are far less threatening than men.

Moreover, Loewenstein and Putnam (1990) reported that similar percentages of men and women among their subjects with Multiple personality disorder had “homicidal alters”, 35% of men against 32% of women. However, similarly to what the study on 12 murderers also stated, the percentage of men who reportedly committed murder was considerably more elevated than in women (19% of men and only 7% of women).

As a consequence, we can interpret such percentages as enriching and enlightening information. As Lowenstein and Putnam specified, the proportion of people with DID who have reportedly committed a crime such as murder is unquestionably low. Considering this information, it seems necessary to mention that it appears to be an unfair assumption for all the people who suffer from this or any other mental disorder. To be considered dangerous or even more so a potential murderer when studies like the previous one have shown that the amount of people with DID who are potentially threatening towards others is remarkably scant.

Furthermore, for people who live in a somewhat different reality, having their surroundings consider them as threats to society mainly because of the portrayal of the disorder in literature and cinema, seems to create certain anxiety and even more so repression on their beings. As we are mentioning, works of fiction seem to be highly appealed by DID and its connection to criminality. It is also true that these works of fiction become the only piece of information or input of the disorder for the general public and, as a consequence, it becomes the common perception towards people with mental disorders, as psychotic dangerous beings who are troubled.

### **5.3. The case of Kevin Wendell Crumb**

The portrayal of Kevin Wendell Crumb, the main character in the film *Split*, was based on the life of William Stanley Milligan, a real-life criminal during the seventies, whom after a thorough investigation was diagnosed with acute schizophrenia and DID. Reportedly, he inhabited 24 other personalities within him and, Billy's identity had not been outside for several years. As far as what has been shared about him and his alters, two of Billy's alters, Arthur and Ragen decided which identities were allowed to come out during the investigations and trial. Among them, only ten had permission to contact the outside world and, the other fourteen were "banned" from fronting, considering them as the "Undesirables". Furthermore, as far as the investigations showed, only four of the alternate identities were admittedly the perpetrators of crimes like robbery or rape. In consequence, it left an amount of twenty of his alters to be considered as harmless and with the mere purpose of supporting Billy through rough times.

Very similarly is the character of Kevin, being considered the host or original identity, in him live an amount of 23 alter identities and a 24th one that seems to be extraordinarily dangerous and ready to come to the surface. However, in the film are only directly presented 8 of them, just as in Billy's trial, not all of the identities have a public voice.

In the case of Kevin, he does not seem to be the one perpetrating the crimes either. Instead, it is his alter Dennis who kidnaps three teenagers. It seems necessary to point out two problematising aspects concerning the accuracy of the representation of the disorder. As we have mentioned, when a person develops DID, it generally appears as a form of escapism from past traumas, and it is true that in the development of the film, Kevin's childhood trauma is given importance. Later on, in adulthood, the switching or dissociating towards an alternate identity generally happens due to situations of stress or anxiety. However, in the film, we can find how there is no portrayal of the switching or dissociating stages, and the change in between identities seems arbitrary with no surrounding context. On the other hand, the second problematising aspect is the fact that all eight alters shown in the film seem to work and cooperate towards the same purpose, keeping these girls safe for the 24th identity, the Beast. However, in reality, as we can detect in Billy's case itself, alternate personas cannot recall or have any memory of the crimes the others committed.

Additionally, and as we are debating throughout this paper, in connection to Shyamalan's representation of such a story, we should also consider the harmful connotations it will build towards people with DID. For instance, we should keep in mind that the film *Split* is inspired by the story of a real person who, suffering from this disorder,

committed several crimes. But it is also true that the story is hugely fictionalised and not entirely accurate. As we have mentioned, all eight identities portrayed seem to have a dark and evil side, even the child alter, Hedwig, who knowingly goes along with something he knows is not good. Therefore, the portrayal of an exceptional case of DID and its high level of fictionalisation for entertaining purposes transforms the conception of people with the disorder into severely dangerous people.

#### **5.4. The account of an individual with DID**

Encina Severa is a 30-year-old American woman who was diagnosed with Dissociative Identity Disorder at the age of 22. As she mentions in a Youtube interview, she is aware of having suffered from abuse when she was a child. Similarly to many other cases of DID, as a child, Encina created these alternate identities to protect herself from those awful experiences and hurtful memories. Therefore, as an adult, when she speaks about such abuse as Encina, the host identity, she knows she suffered it but cannot necessarily remember any details of it happening.

When she grew older, when she started to get in relationships, she found herself in similar circumstances, where her partner was somewhat abusive. In those cases, she explains how the alters tended to take control over her a lot more often than when she is in a happy and pleasant situation. According to other instances made by people who suffer from the same disorder, people with DID tend to be victims and, unknowingly, go back to patterns that are believed to have originated such mental disorder in the first place.

In comparison with the representation of DID in cinemas, we can detect how the character of Kevin in the cinematic adaptation *Split*, is portrayed as a villain along with several of his alters, which would not necessarily match with Encina's description of self-victimisation. Also, we can detect how Kevin's switching does not seem to be related to any given situation of stress that triggers the switch to a different alter. In this sense, according to the film representation of someone who has Dissociative Identity Disorder, the switching is random and arbitrary and, there is no apparent connection between the fronting of such alters in situations and the trauma that caused them to exist in the first place.

As it is shown by the film, there is a link between Kevin's psychopathy and the abuse suffered during childhood. Furthermore, whenever he switches into the alter of a nine-year-

old boy named Hedwig, he seems to connect the most with Casey, one of the kidnapped girls whom we end up discovering had also suffered from abuse when she was a child.

As we are exploring the representation of Kevin's split identity is not entirely fictionalised because it is similar to the account of a real-life patient of DID. On the other hand, there seem to be inconsistencies like the switching between alters or the fact that most of them seem to be dangerous perpetrators instead of victims. This concept and representation directly collide with the account of someone who lives with the disorder like Encina Severa. Moreover, she stated during her interview that the main reason why she is so outspoken and public about her psychopathy is to debunk and inform the general public who believe the misrepresentation of the disorder in the entertainment industry.

## **CONCLUSION**

To conclude, as this investigation started theorising, we had the suspicion that literature and cinema seem to problematise and therefore portray as criminals people who suffer very complex mental disorders. For instance, as we have seen, Margaret Atwood's story about Grace Marks, despite being based on a real-life woman, it seems to depict a very dark and distorted idea about how someone with a mental disorder who is "possessed" by another identity, starts committing crimes as serious as murder. On the other hand, we find Stevenson's *Strange Case of Dr. Jekyll and Mr. Hyde*, that as many have interpreted is, again, a representation of Dissociative Identity Disorder, as it is narrated, the alternate persona that resurges due to drugs is depicted as dangerous and evil, similarly to the Ghost of Mary Whitney.

And finally, in the second film of the *Unbreakable* saga where there is no need to interpret the fact that the main character suffers from DID because it is mentioned and specified by the therapist in the story. In this particular portrayal, the main character who suffers from DID is depicted very prominently as a disturbed evil persona who hurts others due to his mischievous and wicked alters who have terrible plans.

As we previously theorised and have managed to prove in this piece of work by several psychology articles and accounts of people with the psychopathy, people who suffer from this disorder are very rarely the villain in anybody's story and are not only people who have endured terrible things in their past but are still struggling with the consequences of such

things. Therefore, making them the victim in most situations and not the perpetrator of terrible things like the ones that they endured in the past.

As Dr. Stephen Marmer, a psychiatrist and senior clinical faculty member in UCLA's Department of Psychiatry mentions, "Filmmakers are in the business of making a dramatic story and drama requires caricature and exaggeration, but it does give a wrong impression as to what (DID) is all about." In other words, filmmakers purposely misinterpret DID to make it more appealing to the public. Additionally, as we have seen in the two literary works of Atwood and Stevenson, the case is significantly similar, where fiction overthrows psychology facts and exaggerates the outcomes of the disorder for entertaining purposes, stigmatising and depicting DID as a violent and dangerously oriented mental disorder.

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