# Nina Sayers: A Psychological Case Study of Schizophrenia and OCD

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# Character Overview – Nina Sayers

- Main character in Black Swan (2010), directed by Darren Aronofsky
- Dedicated ballet dancer at a prestigious New York ballet company
- Lives with a controlling mother, a former ballerina
- Cast as the Swan Queen in Swan Lake – must portray both the innocent White Swan and the seductive Black Swan
- High expectations and pressure trigger mental health decline

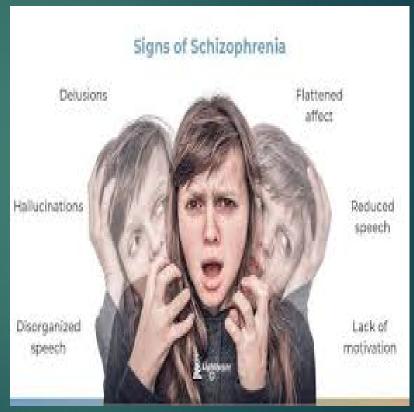


#### **Sociocultural Context**

- Ballet culture emphasizes perfection, control, and endurance
- Highly competitive and appearance-focused environment
- Mother-daughter enmeshment restricts Nina's autonomy and emotional growth
- Isolated from peers; lacks healthy support systems
- Sexual repression and fear of failure influence her sense of identity

## Symptomology – Schizophrenia

- Delusions: believes others (e.g., Lily) are trying to replace her
- Visual hallucinations: selftransformation into the Black Swan
- Auditory hallucinations: hears voices or imagined sounds
- Disorganized thoughts: blurring of fantasy and reality (Goff, 2021).
- Paranoia and social withdrawal



#### Symptomology – Obsessive-Compulsive Disorder (OCD)

- ▶ Obsessions: fear of imperfection, contamination, failure
- Compulsions: skin-picking, nail-biting, rehearsing routines repeatedly
- Perfectionism: obsessive pursuit of an ideal performance (Taylor et al., 2023).
- ► Ritualistic behavior: strict eating, grooming, and practice patterns
- High anxiety when routines are disrupted

### Dual Diagnosis – Schizophrenia and OCD

- Co-occurrence is rare but possible (Singh et al., 2023).
- OCD may precede psychosis in some individuals
- Nina's compulsions likely developed before full psychotic symptoms
- Symptom overlap can complicate diagnosis and treatment planning
- Both disorders severely impair functioning and self-perception

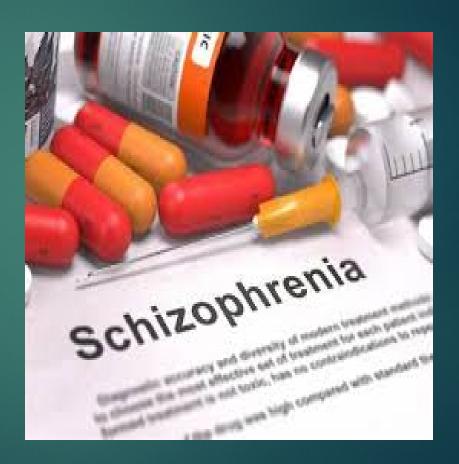


#### Causes and Contributing Factors

- Biological: genetic predisposition, possible neurochemical imbalance
- Psychological: childhood trauma, repression, identity confusion (Taylor et al., 2023).
- Environmental: high-stress career, emotionally abusive home
- Social: isolation, peer competition, lack of emotional outlets
- Internalized pressure for perfection and control

# Treatment Options – Schizophrenia

- Antipsychotic medication (e.g., risperidone, olanzapine)
- Cognitive Behavioral Therapy for Psychosis (CBTp)
- Family therapy and psychoeducation
- Supportive housing or structured routines
- Crisis intervention and relapse prevention plans

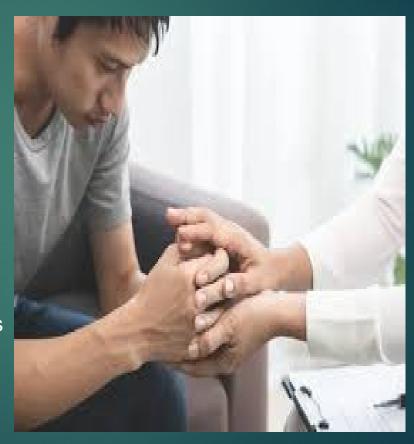


#### **Treatment Options – OCD**

- Selective Serotonin Reuptake Inhibitors (SSRIs) such as fluoxetine
- Cognitive Behavioral Therapy with Exposure and Response Prevention (ERP) (Singh et al., 2023).
- Mindfulness-based therapies to reduce compulsive urges
- Habit-reversal training for self-injurious behavior
- Lifestyle interventions: sleep, exercise, social reintegration

### Proposed Treatment Plan for Nina

- Integrated approach addressing both disorders
- Psychiatric evaluation and medication for psychotic symptoms (Singh et al., 2023).
- ► ERP-focused CBT for obsessive-compulsive behaviors
- Family-based therapy to reduce toxic dependency
- Art/dance therapy to process trauma and rebuild identity
- Inpatient treatment during the acute crisis phase



### Prognosis and Ethical Considerations

- Schizophrenia: long-term management, variable outcomes
- OCD: more treatable, especially with therapy and meds
- Early intervention is critical for both
- Ethical care: informed consent, autonomy, confidentiality
- Trauma-informed practice essential in recovery

#### References

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