



Alexithymia – Imagination – Creativity

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ABSTRACT

The study was aimed at examining the relationships between alexithymia, imagination functioning and the level of creativity. Contrary to previously conducted studies, a behavioural method of measuring imagination efficacy was used (neutral and emotional versions of the Mental Rotation Test). The level of creativity was assessed with the use of the Urban–Jellen test and Creative Visualisation Task. The NEO-FFI was also administered. It was hypothesized that individuals with high alexithymia scores would show a reduced imagery ability as well as low creativity level. In a sample of 136 participants, alexithymics were found to be significantly less creative than non-alexithymics. However, no differences in imagination efficacy were found with regard to alexithymia. The results are discussed in the context of personality impact on cognitive tasks performance, also shedding new light on alexithymia correlates.

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1. Introduction

The term alexithymia (“no words for feelings”) was introduced by *Sifneos (1973, 1996)*, who coined it on the basis of clinical observations conducted on a group of psychosomatic patients. A specific pattern of difficulties emerged, including inappropriate affective responses, problems distinguishing emotions from bodily sensations, denying their very existence, shallow and primitive personality, a lack of sensitivity and chaotic relationships with other people. The most profound was the inability to find appropriate words to describe one’s affective states – a feature that gave the construct its name. Alexithymia has been closely related to a high incidence of psychosomatic illnesses and was thought to be a major risk factor. Therefore, psychologists’ efforts concentrated mainly on finding a suitable method of therapy, but it was soon discovered that all of them offered only a limited success (*Sifneos, 1996*).

After many years of studies, an understanding of the alexithymia concept has evolved. It is now considered to be a multifaceted personality trait, normally distributed in the general population (e.g. *Salminen, Saarijärvi, Äärelä, Toikka, & Kauhanen, 1999*) with stable in time degree (e.g. *Martinez-Sanchez, Ato-Garcia, & Ortiz-Soria, 2003*). A number of studies have also successfully linked this construct to other basic personality dimensions. *Pandey and Mandal (1996)* reported that alexithymia correlates positively with neuroticism ($r = 0.56$) and negatively with extraversion (sociabil-

ity; $r = -0.30$). In turn, *Zimmermann, Rossier, de Stadelhofen, and Gaillard (2005)* revealed positive associations again with neuroticism (the strongest correlation with vulnerability; $r = 0.49–0.50$, depending on the alexithymia measurement method), negative with extraversion (the strongest correlation with assertiveness; $r = -0.32–0.39$), openness (fantasy subscale; $r = -0.21–0.22$) and conscientiousness (competence and self-discipline subscales; $r = -0.21$). A similar pattern of results was also obtained by *Luminet, Bagby, Wagner, Taylor, and Parker (1999)*. This data corroborate the expected partial overlap between personality dimensions, proving the new conceptualization of alexithymia to be quite reasonable.

With the acceptance of alexithymia as a trait, the construct is now seen as a continuum, with approximately 13% of individuals in the general population being highly alexithymic (epidemiological studies; e.g. *Salminen et al., 1999*). Nevertheless, the level of alexithymia is significantly higher in a number of clinical groups, including substance abusers (e.g. *Uzun, 2003*). Moreover, the construct is now thought to comprise two distinct types of correlates. The affective component of alexithymia includes difficulties in identifying and verbalizing feelings as well as a reduced ability to disentangle emotional experience from physiology, whereas the cognitive component comprises of a reduced fantasy life, lack of daydreaming and a concrete, externally oriented style of thinking.

The affective correlates of alexithymia, being more distinctive and profound, have caught the attention of researchers for a long time. Thus, this component is now quite well understood while the cognitive has been somewhat neglected. Nevertheless, a number of researches have been targeted on the most cognitive correlate of the syndrome – the paucity of fantasy life and a

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dysfunctional imagination. This deficit was the first of all alexithymia correlates to be formally described, in the early sixties, later being incorporated into Sifneos' concept (Bagby, Taylor, & Parker, 1997). Results obtained from conducted studies support the hypothesis of alexithymics being unable to evoke or/and maintain mental images. Friedlander, Lumley, Farchione, and Doyal (1997) discovered subjective differences with regard to alexithymia when autogenic relaxation was administered to the participants. Individuals with high scores of alexithymia reported less involvement and poorer imagery during the procedure. A similar result was obtained by Trajdos-Giejdasz (2004) – alexithymics were unable to visualize their own emotional states, something which proved to be rather easy for non-alexithymics. Using the Vividness of Visual Imagery Questionnaire (VVIQ), Campos, Chiva, and Moreau (2000) found that people scoring high on alexithymia scales also have high scores in VVIQ, indicating low imaging capacity, low intensity and less vivid images. Alexithymics were also proved to have not only constricted conscious imagery, but also a dysfunction of nocturnal dreams (Lumley & Bazydło, 2000). People with alexithymia syndrome often experience dull, concrete and uninteresting dreams or claim not to have any at all. Assuming that night dreams are mentally formed and manipulated in a similar manner to daydreams, this result indirectly supports the imagination deficit hypothesis. Additionally, it also suggests that this deficiency might be deeply rooted, manifesting itself even at an unconscious, uncontrollable level. Indeed, an fMRI study conducted by Mantani, Okamoto, Shirao, Okada, and Yamawaki (2005) revealed that reduced vividness and emotional intensity of imagined scenes are accompanied by significantly reduced activation in the posterior cingulate cortex (PCC), an area associated with both memory and emotion processing. These results show that alexithymics' imagination disturbance may have a solid, neurobiological basis.

Overall, it seems that the imagination deficiency hypothesis in alexithymics has been empirically supported. Nonetheless, a number of important issues concerning research cited above must be acknowledged. First, most of the studies used questionnaires and self-description methods to estimate a participant's performance during the imagery task. These measures are subjective, thus vulnerable to many biases (e.g. a response tendency or an inclination to present oneself in a good or a bad light). Second, only a few researches included baseline or neutral conditions in an imagery task, concentrating solely on evoking affect-loaded mental images. Unfortunately, a task constructed in such a manner makes a decision on the deficit's severity or range practically impossible (i.e. it cannot be determined whether poor performance is a result of a general imagination dysfunction or a specific dysfunction limited to affective material only). Third, most of the studies were conducted on general population samples, generating relative alexithymia scores. Taken together, these important issues make inferences and generalizations about obtained results limited and questionable.

The concept of creativity can be linked to both alexithymia and imagination, in terms of some shared features and correlates. Although the relationship between alexithymia and creativity level has not been extensively studied, a pool of empirical data indirectly suggests that such an association may exist. First, an alexithymic personality seems to be diametrically opposed to that which can be labelled a creative personality. Alexithymics tend to be very concrete, hyperlogical and mentally rigid: showing a strong preference for routine and stability. On the other hand, according to Barron and Harrington (1981), creative individuals favour novel, complex stimuli and can be broadly described as having flexible, easily adjustable minds. Alexithymia also correlates significantly but negatively with the Big Five openness trait, a variable that consistently shows a positive relationship to creativity (Wolfradt & Pretz, 2001). Secondly, some researchers suggested

that an efficient, rich imagination is necessary for creative processes to occur (Finke, Ward, & Smith, 1992), with some even claiming that differing degrees of imagery ability reflect differing creativity abilities (see LeBoutillier & Marks, 2003). As stated above, alexithymic individuals seem to have profound difficulties with visualization, experience less vivid mental images and show a tendency to avoid fantasizing. Finally, many studies stress the importance of affect and emotion during creative process (Kolańczyk, Jankowska, Pawłowska-Fusiara, & Sterczyński, 2004). Alexithymics cannot take creative advantage of their own various affective phenomena due to their inability to experience, identify and label such experiences. Bearing these factors in mind, it is reasonable to assume that the cognitive and personality characteristics of alexithymia syndrome have a negative impact on creative performance.

In light of all above, we expected previously reported imagination dysfunction in alexithymics to be confirmed in our study, with the use of objective, behavioural method. The local character of alexithymic imagination shortage was also assumed: the deficit was supposed to be limited to emotional material only. Finally, we hypothesized that the structure of an alexithymic personality, as well as the lack of imaginative ability, will be linked to poor creative performance.

2. Method

2.1. Participants

Hundred and thirty six volunteers took part in the study. The participants were recruited from two distinct populations in order to differentiate alexithymia scores in the whole sample: recovering alcoholics, certified by their therapists as having no cognitive impairment ($N = 68$; mean abstinence period was 19 months with 45 participants below 6 months) and non-drinking adults ($N = 68$). Table 1 provides descriptive statistics for age, gender and level of education regarding both groups.

2.2. Materials

2.2.1. Personality questionnaires

The Bermond-Vorst ALEX-40 questionnaire in the Polish adaptation by Maruszewski and Ściagała (1998) was used to assess alexithymia levels. The inventory consists of five subscales, labelled: verbalizing ("I find it difficult to verbally express my feelings"), emotionalizing ("When friends around me argue violently, I become emotional"), identifying ("When I am distressed, I know whether I am afraid or sad or angry"), fantasizing ("Before I fall asleep, I make up all kinds of events, encounters and conversations") and analyzing ("I hardly ever go into my emotions"). The overall questionnaire score indicates the general alexithymia level – low scores characterize alexithymic participants.

Table 1
Descriptive statistics for participants' age, gender and level of education

		Recovering alcoholics	Non-drinking adults
Age	Mean	44.22	39.60
	SD	10.19	9.91
Gender	Female	16	16
	Male	52	52
Level of education	Elementary	7	5
	Vocational	25	27
	Secondary	21	21
	University	15	15
		68	68

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