Rephrasing the madness and creativity debate: What is the nature of the creativity construct?

Emilie Glazer

Department of Experimental Psychology, University of Oxford, South Parks Road, Oxford OX1 3DW, United Kingdom

Abstract

This paper aims to reframe the debates about the association between creativity and mental illness. For centuries the link between the two has been debated, yet research has largely ignored the underlying nature of creativity in this context. The full understanding of the creativity construct, however, is essential to completely grasp its relationship with psychopathology. Three possible models for the creativity construct are proposed: the existence of different kinds of creativity each associated with specific types of psychopathology, creativity operating as a continuum, and creativity as a single entity. Support for each model is examined among the current literature. It is concluded that all three models are viable possibilities for the conceptualization of the creativity construct, each offering ample predictions and hypotheses for future research.

1. Introduction

The knowledge of a link between creativity and madness has persisted throughout history. Socrates and Plato were both aware of the association, while over the past century questions of creativity and madness have entered the world of scientific research, fueling debates about the nature of this association. Despite its sceptics, it is now generally accepted that the link is empirically grounded. The debate has instead shifted to determining exactly which types of psychosis, either schizophrenia or affective disorder, are connected to creativity. Underlying these questions are intrinsic disagreements within psychiatry research. One of the most controversial subjects is whether affective disorder and schizophrenia are inherently distinct, or the alternative products of the same underlying aetiology. An additional key question that remains unexplored within the current literature is the definition of creativity itself.

Most research assumes that creativity is a single construct. But creativity can be conceived in different ways. Paralleling dimensional conceptualizations of psychosis, the creativity construct could extend along a continuum; or it could exist in different distinct and independent forms. Each conceptualization of creativity will lead to specific implications for its association with psychopathology. Identifying the underlying nature of creativity is thus necessary. In this paper, three possible conceptualizations of the creativity construct are proposed, the support for each being assessed from current theories and research. Part I will set out the background for these models, reviewing the consensuses and debates within the literature about the different psychopathologies and their association to creative ability. Part II will then propose three models for the conceptualization of the creativity construct. Finally Part III will establish their compatibility in evolutionary psychology accounts, revealing the role of creativity in the evolution of human nature.

2. Part I: current state of the field

2.1. Psychoses: categorical versus dimensional perspectives

The classification of the different psychoses carries important implications for the association of mental illness with creativity (Claridge, 1998). Views on the distinction between the two major psychoses, affective disorder and schizophrenia, provide the parameters for any research using these concepts, thereby constraining investigations on the link between psychopathology and creativity.

Kraepelin (1919) first formally described and distinguished the psychopathologies dementia praecox and manic-depression. Later, the latter term was called bipolar disorder, while Bleuler (1911/1950) renamed dementia praecox as the ‘schizophrenias’, the plural noting the definition’s inclusion of a spectrum of psychopathologies. Schizophrenia is now described as a disorder, recognized by a specific combination of positive and negative symptoms instead of a single neurobiology. It is more pervasive than affective disorder, and has a wide spectrum of impairments of mental functions affecting the individual’s perception, language, thought, emotion and motivational capacities. It has a chronic course with recurring psychotic episodes. Bipolar disorder on the
other hand are alternative episodes of mania and depression. During each, psychotic symptoms can occur, with periods of seeming normality between each state.

The Kraepelinian distinction between affective disorder and schizophrenia is still a common assumption, reflected in their official listing as different illnesses in both ICD-10 and DSM-IV manuals. However, the Eintheitpsychose, or unitary psychosis theory (a theory which has varied in popularity throughout history), and a mounting body of evidence failing to detect statistical significance between the two forms of psychosis at a symptoms level (Kendell, 1991), provide a strong argument for the opposite dimensional perspective: viz that both affective disorder and schizophrenia are only superficially distinct, in reality rising from a single form of insanity.

Crow (1986, 1991) provides an interpretation of this perspective, suggesting a dimensional model of psychosis ranging from normality through to affective disorder with schizophrenia at the extreme. Similarly, other researchers have proposed a continuum extending from normality to borderline states, ending at the full-blown manifestation of a particular psychosis. Stemming from personality psychology, a third influential interpretation proposes that the interaction of the personality variables, extraversion–introversion (E), neuroticism (N), and psychoticism (P), accounts for the existence of different kinds of psychoses along such a dimensional model (Eysenck, 1952, 1992).

2.2. Creativity and madness

The association between madness and creativity was first scientifically addressed by Lombroso’s (1885) ‘The Men of Genius’. Although many of the book’s ideas are inherently flawed, Lombroso insightfully acknowledged an empirical relationship between creativity and a predisposition to mental illness. Psychobiographical studies in the latter half of the 20th century began to directly test this contention. For example, Jamison (1993) revealed the rate of mood disorders, suicide and institutionalization to be twenty times that of the normal population at the time in a sample of major British and Irish poets between 1705 and 1805. These studies demonstrate the greater prevalence of psychosis among the eminent creators of the past compared to the general population, suggesting an empirical link between madness and creativity.

Along with these retrospective historical analyses, studies examining living eminent creative individuals and conversely psychiatric patients have also been conducted. This research confirmed the association, propelling the field into a new debate. Questions of the reality of the link between creativity and madness were replaced with studies investigating which forms of madness are associated with creativity. During most of the 20th century the association was thought to lie in the schizophrenic spectrum. More recently researchers have argued that creativity is instead linked to affective, particularly bipolar, disorders. Representing these opposing perspectives, Jamison (1993) claims that creativity is only associated with affective disorders while Sass (2001) refutes this narrow view and argues for a more systems approach, acknowledging the contribution of culture and societal norms to the controversy.

Despite these debates most theorists, such as Claridge, Pryor, and Watkins (1998), for example, agree that it is not the full-blown illness itself, but the milder forms of psychosis at the root of the association between creativity and madness. The underlying cognitive styles and personality traits linked with mild psychopathology enhance creative ability; in their severe form they are debilitating. Studies have determined a correlation between creativity and the milder ends of the schizotypy scale (e.g. the schizotypal personality) or the bipolar spectrum (e.g. hypomanic or cyclothymic traits). Schuldberg, French, Stone, and Heberle (1988) for instance demonstrated a positive correlation between undergraduate students with positive schizotypy and creativity test performances. Consistent with such dimensional perspectives, Eysenck (1993) proposed one of the most influential theories in the field. He claimed that his psychoticism (P) personality dimension is directly related to creativity, the association being mediated by high divergent thinking and low inhibition, governed by raised levels of nervous system dopamine.

Studies have also examined the heritable nature of the association between creativity and madness, proposing that a genetic component underlies the association. If an empirical link between creativity and mental illness can be attributed to genetics, normal relatives of the mentally ill may carry similar psychotic traits, only in milder forms. The presence of the underlying cognitive style associated with these may thereby predispose and enhance creative ability. Karlsson (1970) supported this contention, finding that first degree relatives of psychiatric patients, admitted to a hospital in Iceland between 1851 and 1940, were twice more likely than the normal population to work in creative professional fields. Along with similar studies, these results have further cemented the conviction within the field of an empirical link between mental illness and creativity.

Finally, researchers have pondered the causal relationship between creativity and mental illness. Does psychopathology directly lead to creativity? Or is it the reverse effect? There are a number of causal possibilities, all of which have been shown to prevail in certain individuals and at particular times. Richards and Kinney (2000) posited five scenarios: psychopathology either directly or indirectly leading to creativity, creativity either directly or indirectly projecting onto psychopathology, or a third external factor affecting the relationship, such as a family liability for mental disorder. Ludwig (1995) also tackled the question, suggesting four possibilities: psychopathology causing either a decrease or an increase in creativity, and creativity potentially issuing in an enhancement or assuagement of the psychopathological symptoms suffered by an individual. However it is conceived, the relationship between creativity and psychopathology is complex, differing among the individuals in question, the nature of the illness and the environmental factors involved.

2.3. Research limitations

Although current research provides convincing evidence for a link between creativity and madness, many studies are biased by the individuals who conduct them, and by the sources from which the samples are obtained. Biographical investigations for instance are limited by their retrospective methodology. Researchers draw references from autobiographies and historiographies, both unreliable sources often tainted by authors’ biases. Studies where researchers assess the level of creativity and mental illness in participant samples are also flawed. For example, Andreassen’s (1987) interviews were conducted by herself, the ratings of her sample neither independent nor controlled. Jamison (1989), herself had neither controls nor attempts at differential diagnosis in her investigation of psychopathology in her sample of British playwrights and poets.

Limitations also exist in the distinct fields of creativity and psychiatric research. As reviewed, current measures for classifying disorders are still unreliable and controversial. The fact that the DSM and ICD manuals only represent the current psychiatric consensus reflects the inconclusive state of agreement about mental illness classification. Debates also inhabit creativity research, most impor-
دریافت فوری متن کامل مقاله

امکان دانلود نسخه تمام متن مقالات انگلیسی
امکان دانلود نسخه ترجمه شده مقالات
پذیرش سفارش ترجمه تخصصی
امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
امکان دانلود رایگان ۲ صفحه اول هر مقاله
امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
دانلود فوری مقاله پس از پرداخت آنلاین
پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات