Art and Mental Illness: An Art Historical Perspective.

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Mental illness has for centuries been closely associated in the popular imagination with exceptional creativity and great works of art. I will argue today that it is important not to be complacent about this association, as it has led to some grave misconceptions about the nature of mental illness. The persistence of such misconceptions in the media demonstrates that there is a pressing need for ongoing analysis and debate about appropriate and ethical ways in which to discuss, exhibit and interpret the art work of people who experience mental illness. Coming from an art historical perspective, I hope to suggest ways to make progress in this debate. For the purpose of today’s talk, in speaking of ‘art’, I will be referring not only to those works judged to provide evidence of exceptional creativity but rather any created visual product in any medium. Mental illness will be defined as clinically significant, psychological syndromes associated with distress, disability or freedom.

Recent developments in the management of mental health in Victoria have brought the experience of mental illness to the attention of the broader population. The gradual shift from concentrated care in hospitals to a more decentralized model of community-based care, the efforts of community leaders who have spoken publicly on the issue, and advocacy by mental health community groups have all raised public awareness about the prevalence of mental illness and the needs of those who experience the often debilitating effects of such illness.

The removal of social stigma associated with mental illness is central to the improvement of mental health outcomes, as it stigma that prevents people from identifying mental illness and seeking appropriate medical care. It is estimated that in the USA, for example, two-thirds of people who require treatment for a mental illness don’t seek help, either because of a lack of understanding of the symptoms or because of the stigma associated with the illness and its treatments. A strategy designed to raise awareness, and to promote positive attitudes can lead to a destigmatization of mental illness, enabling people who experience mental illness to receive appropriate care for their condition. A recent report ‘Addressing Stigma: Increasing Public Understanding of Mental Illness’ issued by the Centre for Addiction and Mental Health in Canada has argued that public information which draws attention to misunderstandings about mental illness, and examines the negative cast of much media reporting of mental illness, can do a great deal to lessen stigma. The same report argued that art exhibitions can do a great deal to change public attitudes to mental illness.

Alongside these developments are changes in consumer group attitudes to the display of art produced by people who experience mental illness. Consumer groups have reached the conclusion that such displays must respect the whole person and not focus exclusively on the relationship between the artwork and the mental illness of the creator. Consumers and consumer representatives have begun to argue that art should not be discussed through the use of diagnostic categories. A strong emphasis has been placed on the potential to demean the creator by reducing them to a function of their illness. To take a prominent but little-known example, the widow of Jackson Pollock, Lee Krasner sued her late husband’s analyst in 1977 for exhibiting drawings produced by Pollock during therapy under the heading Psychoanalytic Drawings. As she argued at the time:

I would not dream of not having these drawings shown. I think of them as a very interesting body of work. But I do not want them seen in the warped context of psychoanalytic art. Whether or not [the analyst’s] interpretations are correct – that’s not my field. But he’s encroaching on my field when he discusses Pollock’s art and attaches psychological significance to it.

The court case brought by Krasner challenged the ethical conduct of the analyst for exhibiting medical records. After a long court battle, the American judge decided that the works were not in fact medical records but rather works of art donated by the artist to the doctor. Aside from the ethical and legal questions raised by this case, it is clear that Krasner saw the psychoanalytical reading itself as a distortion of the truth about her late husband’s art. As the dispute which arose around the display of Pollock’s drawings demonstrates, the display of work by individuals with experience of mental illness within a predominately medical framework can be perceived as demeaning artists and has the potential to create conflict between consumers, their representatives and exhibiting institutions. The exhibition ‘For Matthew and Others: Journeys with Schizophrenia’ is one of a series of recent initiatives looking for an ethical and balanced interpretation of art by people with experience of mental illness, provides an opportunity to discuss the future prospects for exhibitions of this nature. Before getting into that discussion, I will survey the history of attitudes to the relationship between art and mental illness, as the past can often be instructive for imagining alternative futures.

Early discussions of art and mental illness within the medical community tended to simply stereotype the work of the mentally ill. For example, in 1810 John Haslam published and discussed the work of one of his patients James Tilly Matthews in a book called Illustrations of Madness. The purpose of this publication was to prove Matthews’ insanity and to thereby defuse his critique of the hospital. For the most part, the art of people with mental illness in this early period was seen purely as the product of a delusional mind and not interesting in any way from an artistic perspective. Alternatively it was subject to a mythologization of the experience of mental illness and its relationship to creativity. The Romantic artists and poets, for example, focused on this relationship in their desire to break away from the rational, classical style of the academy, emphasizing the freedom and individuality of the irrational motives of artistic creation in contrast to the more conventional social regarding professional artist. Eugene Delacroix’s 1850 portrait ‘Michelangelo in his Studio’, which depicts the artist in an apparent state of melancholy, his chisel lying on the floor unused, is an example of this tendency. The Romantics may have idealized freedom from reason as a source of creativity, however they were not interested in the actual products of the mentally ill, and they tended to mythologise marginality as the mark of the authentic artist.

By the later 19th century a new figure had emerged – that of the ‘mad genius’. With the invention of this concept, the products of the mentally ill became the focus of attention. However, their art, like their minds, were often viewed as evidence of ‘degeneration’, a return to a primitive stage of development. The most extreme version of this was found in Lombroso’s Genius and Madness of 1884. Furthermore, certain authors, such as Max Nordau in his book Degeneration of 1892, used the connection to assert the moral sickness of artists, particularly modern ones, leading to the defamation of avant-garde art in the Nazi era and the infamous ‘Degenerate Art’ exhibition. Freud also made this connection between madness, creativity and regression, although he saw the tendency to regression as something inherent in all people, as a pathology that was, in its ubiquity, normal.
In the 20th century, the French Surrealists deployed the madness/creativity nexus to reinforce the "otherness of" their avant-garde art products. Using the supposed isolation and exquisiteness of the mentally ill to reinforce their own sense of exclusion from, and opposition to, the rational values of bourgeois society. Although these works by those with mental illness, many of the positive valourisations of mental illness within Surrealist discourse, as Hal Foster has argued, can suggest that there is a metamorphosis in which art, whether wild expression, inspired vision or transgression. Within this model, the work of such individuals is interpreted as something completely beyond the pale, transcendent, and out of reach of normal, everyday experience. In this way the mentally ill, like exceptionally creative individuals, whether viewed negatively through the concept of degeneracy, or positively as the romantic other, have been defined as completely separate from normal individuals. Even Hans Prinzhorn, who was an early and sympathetic twentieth-century figure in the appreciation of the art of people with mental illness, failed to consider the artists' awareness of how their work was received, and tended to downplay the historical and social context of the institution as a factor in the art's creation, all factors that promote seeing the work as the product of a totally other, transcendent, state of mind. But is this characterization correct?

Recent research into artworks by people experiencing mental illness suggests otherwise. New studies have argued that there is an undeniable historical dimension to the art work of the mentally ill; a dimension which strongly suggests that sane and insane cannot be entirely compartmentalized. To begin with, as Mark G this has clearly defined the institutionalization of the mentally ill, which led to their social invisibility in the 19th century as what gave rise to fascination with, and speculation about them. In other words, the social meaning of art by people with mental illness was related to its institutionalised "otherness." More significantly, it is now argued that there is a strong historical component to the art of the insane. For example, the rise of representation that takes place in art beginning in the 19th century, and which is associated with the artistic experimentation of the Romantic movement, is also a feature of "madness/creativity" and is a response to the specific historical and cultural circumstances of the individual including the conditions of the asylum itself. In the case of the asylum, artists could begin to look at his work as having something to say about the conditions of life in the Saint-Rap's asylum in Provence rather than simply the interior of his mind. The most extreme formulation of this relationship between mental illness and its socio-historical context is the argument of the British psychiatrist R D. L. J. C. Lan, for whom mental illness was a creative response to the untenable situation of living in an insane world.

Even when socio-historical factors shared by mentally ill and non-mentally ill are arguably at a minimum, as in the case of art produced explicitly for therapeutic/analytical purposes, the products of people with mental illness are often the efforts of the patient to reclaim reason from the depths of the asylum. The works of such artists are not "solitary monologues." Rather, as David MacKay has argued for the work of Adolf Wölfl, they often elaborate systems that relate to existing social and scientific structures. Such works, therefore, are the product of completely unique, transcendent states of mind but rather expresses an ordering, system-making tendency that is common with those judged sane. Moreover, for some writers, art making is associated not with illness but wellness. Within this account, the work of people experiencing mental illness is not necessarily an attack on convention and order, but rather an attempt to find it again. For example, some researchers have argued that there are cognitive aspects of art by people with mental illness which are more closely related to wellness than illness. The different historical and more recent approaches to the artwork of people who experience mental illness that I have surveyed so far can be broken into three types. First there are studies that examine the work for evidence of individual human experience that is completely "other" to the norm. These can be psychiatric, but many artistic valourisations of the work also fall into this category whether in the assessment of a level of artistic creativity akin to genius, or simply in asserting the art's utter uniqueness, an idea expressed by the concept of "Outsider Art." Second, there are approaches that examine the work for how it relates to relatively common human experiences, consciousness and skills, as seen in the cognitive study of the art, or those that stress artistic abilities and creativity that, while unusually gifted or rare, are relatively common features of normal work. For its social and historical meaning, it is retaining it not to the interior world of the individual but rather to the socio-historical or political context from which it emerges. I believe that the future for research in this area is an approach that is able to meaningfully combine these outlooks into a more synthetic, that reflects the complexity not only of the art work itself, but which acknowledges the diversity of approaches that can be taken to this art.

Various developments across the fields of psychiatry, public health, consumer advocacy, art history and museology have prepared the ground for a new approach to the display and interpretation of art by people living with mental illness. A new system of exhibiting the art of people who experience mental illness should have the goal of respecting artists, educating the broader community and leading change. An approach is required through which viewers become aware of the ethical responsibility to the creators of such work, of the several different meanings that can attach to it, and of the pressing need to ameliorate the often difficult circumstances of a vulnerable population with contemporary society. Recent exhibitions, such as "Parallel Visions: Modern Artists and Outsider Art" held in California in the early 1990s, contained several works by artists with experience of mental illness. Although the exhibition did stress the connections between the psychological, artistic and socio-historical dimensions of the works, the exhibition was not primarily motivated by an effort to destigmatise mental illness, but to explore the work in its character as a cultural artefact. Moreover, the art of the exhibition title itself suggested that the real subjects of the exhibition were the modern artists, and not those with mental illness, prompting Robert Hughes to suggest in Time that "This relationship between insider and outsider, amateur and pro, one of the main themes of this extremely interesting show... (is) a one-way flow -- the outsiders were less interested in the press than artists like Paul Klee or Jean Dubuffet were in them." In spite of the equality suggested by the word "parallel" in the title, the exhibition could still prompt these broad generalizations about the art, generalisations not based on evidence.

In many respects, I believe that the exhibition "For Matthew and Others" shows the way forward. By breaking down the hard and fast division between the work of people with experience of mental illness, and those who took mental illness as their subject, the exhibition has questioned the categorisation of individuals into strict compartments of sane on the one hand and mentally ill on the other. One of the most interesting aspects of the exhibition is the way in which work by artists presented in both categories share certain characteristics. A common explanation of this feature in the literature on art and mental illness is that modern and avant-garde artists have deliberately borrowed techniques and styles from the work of people with mental illness. However, it must be remembered that for the artists with experience of mental illness exhibited in this show, formal art training or awareness of broader art trends has meant that they have borrowed from the visual image bank accumulated in art history to express their experiences. In other words, this is a two-way relationship, an acknowledgement of which creates the conditions for identification and its corollary, empathy, one of the most important pre-conditions for an ethical approach to both the work and the creators.

The lack of precisely this approach was one of the more disappointing aspects of Richard Dorman's review in the London Telegraph last year of "Inner Worlds, Outsider," another exhibition showing work by people with and without experience of mental illness. He described the exhibition as: a wicked, pernicious exhibition based on a false premise and proselytising for an evil idea... What is objectionable is to present the art of people with severe mental illness alongside the work of Francis Bacon, Joan Miró or Francis Picabia, and then to propose that there is no essential difference between the two, that both are simply different manifestations of modernity... To hang works by the two utterly different kinds of artists side by side without drawing distinctions between them is utterly ridicul..."
Although there are problems with asserting that there is no difference whatsoever between art by people with and without experience of mental illness, the vehemence of Dorment’s language demonstrates that the mere suggestion of equality rocks a deep prejudice. Sebastian Smee’s review of this exhibition in The Australian last year followed similar lines. He was determined to segregate art by people with mental illness, by insisting that art may be the product of neurosis but never of psychosis, effectively discounting the work of many artists at an aesthetic level. This demonstrates that even an exhibition like ‘For Matthew and Others’ will not necessarily achieve its stated objectives. What can be done about this?

The problem that gets in the way of many critics’ understanding of the fluidity between sane and mentally ill is the concept of ‘art’ itself. A new language of criticism and appreciation is required to overcome this kind of reaction. It may be that, for a time, the idea of art and creativity will have to take second place in discussing the creative works of people with experience of mental illness. Only in this way, perhaps, can viewers appreciate that the experiences of individual artists have sometimes meant their marginalisation from society, and that this marginalization can be overcome through having the work of these artists accepted as the products of people who have full, creative, three-dimensional lives outside the accepted parameters of the social definition of mental illness.

‘For Matthew and Others’ certainly showed the way forward, in my view, by accompanying the exhibition with narratives, documents and archives telling the story of the individual’s lives, their relationship with institutions and the experiences of their friends and relatives. In this way, viewers were made aware of the living reality of the artists and what they have experienced in historical terms, instead of allowing romanticised conceptions of creativity to cloud perception. However, if an intelligent critic like Sebastian Smee can persist in applying fundamentally discriminatory criteria to the work of people with experience of mental illness, it seems that there is still a lot of work to do. Simply exhibiting something as art, it seems, isn’t enough to bridge the gap between our current tendency to stigmatise mental illness and the future equality that such artists deserve.
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