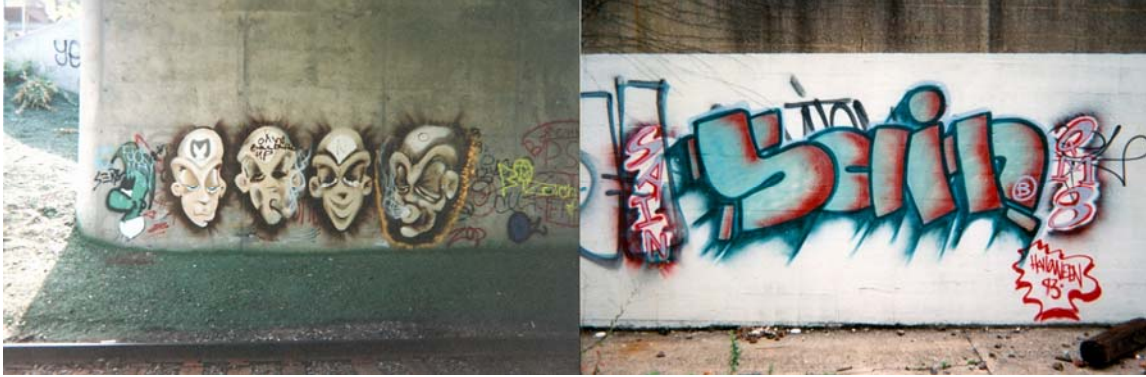


Creativity and Axis I Illness



Fine and Applied Artists with an Axis 1 psychiatric DSM-IV create art as a reaction to their level of diagnostic symptoms. In order to discuss and support this claim, a solid understanding of art, creativity, Mental Illness and Axis I psychiatric diagnosis, medicine and symptoms is required.

The DSM-IV is a Diagnostic and Statistical Manual of Mental Disorders - Edition IV – a classification system for psychiatry. 1 Axis I is a psychiatric diagnosis but is not a personality disorder or mental retardation. If there is more than one diagnosis, the primary diagnosis is mentioned first. I will provide historical and current examples of fine and applied artists diagnosed with a major Mental Illness, provide Psychiatrist comments, examine recent medical study, and provide client artist comments and art work. I will show that the more the symptoms of an Axis I Mental Illness can be reduced, the more “expressive” the person will become. Eventually, I will get into graffiti. “Expressive” is a descriptive term that can range from talking to not talking at all. It could be that the patient is getting up at a more usual time, and it could also refer to the art of music, poetry, writing or visual arts.

Art therapy should be a major component for Axis I Medical outreach programs because this population has a natural inclination toward creativity. Art therapy should be a major component for Axis I mental illness programs. Each day people are hospitalized with these disorders

and should be encouraged to express themselves! I think that it (expression) should be a privilege though and the activities should absolutely take place off the ward (many hospitals are not like this) and should be based upon trust. Just

1Murphy, M., Cowan, R. & Sederer, L. *Blueprints in Psychiatry* Blackwell Publishing, Massachusetts, 2004.

because these people are hospitalized, they should not ever feel like prisoners, which seems to be a problem these days. The staff should get to know each individual as an individual and treat them in a nice way and accordingly. If they do not want to respect the patients and care or be nice, including doctors, then they should not be in this field!!! This type of therapy (art) may help people like the catatonic woman or the one who wouldn't touch her food. Put people like this in front of paints (finger or whatever, crayons, non permanent markers, etc.). Have a teacher, but let her play "patient" – have her just draw and do her own thing (a good teacher won't mind), and the patients may join in easier this way. The teacher could encourage her students to watch. The teacher should not ever give up, and we will hope over time the catatonic woman will do art, thus maybe she can get "better," eat her food and be less catatonic. I will again stress the importance that these activities take place off the main unit!

The art teacher should almost be at the "elementary level." When it comes to teaching patients art and giving the patients compliments on their progress, this especially this could work well with a catatonic type patient. A good compliment and a very empathetic one will go a long way!² Remember these people may be scared, so the art teacher, number one can not ever make the patient or "student," feel like they are being tricked, and this is important. Integrity plays a big part and these compliments really need to come from the heart, and from a teacher who does really care!!

*2Communication Skills in Helping Relationships, Vonda Long.
Pacific Grove, CA:Brooks/Cole Publishing Company, 1996.*

Art has been identified in the branch of philosophy of aesthetics which studies new ways of seeing and of perceiving the world. It can be referred to as a study of sensory-emotional values and includes judgments of sentiment and taste. The scholars in philosophy further define aesthetics as a "critical reflection on art, culture and nature." 3 Aesthetics is a category of axiology, a branch of philosophy that is closely linked to the philosophy of art. More on art - "Art is a process or product of deliberately arranging elements in a way that engages the senses or emotions" and is broadly defined as creativity, talent, vision and stage presence.4 "Those who do" are freely driven to create, design, produce, perform and communicate. Some of the general art categories include architecture, drawing, design, painting, music, humor, writing and photography as well as those less understood art forms of cartooning, computer, graffiti and multimedia recording. Art covers a diverse range of human activities, creations, and modes of expression through a huge variety of media.

Clearly, art is an expression of one's self and inhibition rules. The Graffiti art "tag" is a most basic writing expression of an artist's name in either spray paint or marker and exemplifies ultimate power of freedom and individuality. The reason for including this small unique unit of artists is because to me it is one of the most "real," and unique genres of art. Later on I have a friend, who is a NYC graffiti writer. These days many graffiti writers are using "chalk"- a non permanent form of art. Most "old school" writers say that graffiti is "dead." Ever since 1989 when the mayor of New York City decided that no train would run, unless it was "buffed," or had no graffiti on it. So chalk is a new medium in NYC. Risk + thrill + creative skill = Graffiti success! A graffiti writer's tag is his personal signature and is generally labeled as vandalism by the strict norm of society. Jail, violence and danger are right around every Graffiti artist's corner. Tags can contain subtle and sometimes cryptic messages of statement. Many of these scriptions are very hard to read, especially for the layman. For example "Tox" an artist from London, becomes *Tox03*,

3Energy Medicine: The Scientific Basis, James Oschman.
Philadelphia, PA: Churchill Livingstone, 2000.

Tox04, etc., same in NYC. John Tsombikos claimed before his arrest that his "Borf" tag campaign, which gained recognition for its tagging in Washington, D.C., was in memory of a deceased friend. But as the norm of society struggles to paint over the NYC graffiti, psychologists ask the questions: What is the attraction to the risk by these artists? Some love the adrenaline, is a fact! Why is this population consumed with anti-conventional means toward expression? What does this behavior reflect about the artist and is he symptomatic of more than what is seen plastered on the subway car? Many people have a tendency toward mental illness, especially artists, so it goes both ways. Jails are filled with artists. It is also a fact that jails are filled with 283,800 documented cases of Axis I individuals suffering from the major mental illnesses of Schizophrenia, Bipolar and Major Depression.⁴

States the NYC graffiti Artist: "Yeah, you know, I don't hear voices or shit like that, well at least not auditory. I just sometimes get these fuckin' dope ideas as to what to go write around the city. And it's not a fame thing at this point, it is just something I've got to do, you know, I feel obligated. Art is great, yeah perhaps, maybe me and some of my friends have a low degree of this disease, but it is and won't ever stop us. We are artists, and messengers".

So how is creative expression tied to thought? Thinking can be divided into two types, lateral thinking and vertical thinking. ⁵ Lateral thinking is completely unconventional thinking and looks at challenges from all different angles to find great solutions that would otherwise remain hidden. Lateral thinking is focused on "what could be" and results in a choice of many creative solutions. None of the solutions are guaranteed. This is free thinking without inhibition that is commonly found in a "think-tank" creative environment or in an environment without boundary. Vertical thinking is the opposite of lateral thinking. It is conventional, logical, critical and analytical thinking. Vertical thinking is focused on "what is" and it does not produce creative solutions. This is

4Goodwin, F. (2001, December 5). *Art and madness*. Infinite Mind, Lichtenstein Creative Media.

the thinking of test-takers and those consumed with data. It is closed; exact thinking that is confined to strict boundaries. Most people are accustomed to a mundane way of thinking about solutions, called, "functional fixedness." We see only the obvious way of looking at a problem—the same way we always think about it. Our barrier is self-censorship which is the inner voice of judgment that confines our creative spirit within the boundaries of what we think is acceptable. Remember the exhibit in NYC with Mother Mary, and dung of an elephant, thrown on her painting? The person who made this argued that this was art, as people protested! Where do we draw the line?

“For creativity to have a chance, the brain needs to get out of its own way and go with the flow.” 5 That's the bottom line from a new study on creativity sponsored by Charles Limb, MD. The study included six full-time professional jazz musicians. They got their brains scanned while playing a scale or a memorized jazz piece exactly as written and again when they were free to improvise off on their own musical path. When they improvised, the brain's dorso-lateral prefrontal and lateral orbital regions were far less active. Another brain area, the medial prefrontal cortex, was more active. “The brain regions that were quiet during improvisation are involved in consciously monitoring, evaluating, and correcting behaviors,” write the researchers.5 In contrast, “the medial prefrontal cortex allows self-expression” in this case in the form of jazz improvisation. Creativity isn't just about self-expression. The brain's sensory regions were more active during the music improvisation. “It's almost as if the brain ramps up its sensory-motor processing in order to be in a creative state”5.

Let's meet another artist: Let's take a walk around NYC, walk around the streets and through the parks and we will probably come across a number of homeless people. We'll see a bagperson on a bench with a beer – drawing page after page of pencil scribbles on papers. (graffiti – like). He is

5Michael Samuels and Mary Rockwood Lane. *Creative Healing: How to Heal Yourself by Tapping Your Hidden Creativity*, San Francisco, CA: Harper San Francisco, 1998.

expressionless but has imagination flowing freely. He seems unaware of and uncaring about his surroundings. Why is he drawing? What fuels the desire to be creative? Does he take Antipsychotic medicine that is holding back negative symptoms that allow this flow of creativity? Does he have a natural inclination toward expression? Axis I illnesses include Manic Depression, Schizophrenia and Major Depressive disorder. On any given day, in every walk of life, Axis I illness can be found in varying degrees, from minimal to catatonic, in every city, in every state and in every country.

According to Dr John Wu from Columbia Presbyterian Hospital, the Axis I illnesses vary tremendously in severity. Typical symptoms include delusions, hallucinations or negative symptoms such as apathy and withdrawal. A third category of symptoms involves thought disorganization, in which the person has difficulty with attention, focus and abstract thinking. People who have a lot of negative symptoms or a severe thought disorder can have a very difficult time expressing themselves artistically. Delusions and hallucinations, however, often do not interfere with artistic creativity, which is a very nice thing for these people. In fact, many people, including psychiatrists, believe that certain kinds of hallucinations or psychotic states are associated with an enhanced artistic capacity and creativity.

Marc has had experience with Axis I patients with very limited ability to express themselves: "Yes, one lady at the hospital was completely catatonic. You could try to talk to her for 5 or 10 minutes and she would just stand there, staring blankly, no expression on her face, not saying a word. A person with catatonic symptoms is unable to create art. There was another man who was severely symptomatic, an older man. The hospital assigned him to a room with someone with a similar Axis IV diagnosis, and neither of them communicated. Lastly there was a woman who would sit in front of her meals day after day and just stare at her

food. It was difficult to get her to even touch the food. Let's not forget the lady who walked slowly up and down the ward all day. You ask, can an individual with a severe level of Axis I diagnosis do art? I'm going to have to say no.

So, does an Axis I illness exist or is it a lifestyle choice for the man in the park to live from a shopping cart and to spend his daily efforts on scribble? From observing this man in the park, do any symptoms of mental illness hinder his creativity? Enhance it? We can describe, at least to a point, but in those cases where a person with mental illness has slipped through the system – what do we call him? -creative mind, genius, YES, PERHAPS!

Question: If a person rehearses the lines of a play or the equivalent in his head, or talks to himself in his mind, would we call him Schizophrenic or creative? Or would we put this into the context of “stages of Axis I illness” that can be ignored based upon the degree that this person is fixated in his mind? According to Dr. Wu at Columbia Presbyterian, there are many people living in the community who have delusions and hallucinations of a mild severity who do not ever seek treatment and live outwardly normal lives. In addition, many people with negative symptoms, including apathy and withdrawal, have a form of illness that is also not severe enough to seek treatment. It is not clear how many of these individuals are worse off for having untreated symptoms.

Just what is Axis-I treatment Medication? Schizophrenia, Bipolar and Manic Depression symptoms respond to a whole variety of Antipsychotic drugs. Seroquel, Clozaril, Risperidone, Abilify are the latest generation Antipsychotic products for psychosis and Schizophrenia. Lithium and Depakote are the staples for Bipolar Disease and the variety of the Prozac on the market for Major Depression is impressive. The latest fast dissolving generic products are cheaper and mirror the benefits of the original formula product. All of the new products have been built from stepping stone medications developed in the 1950s, including Navane, Mellaril and Thorazine. The Newest Atypical drugs are designed with less side effects and more complexity to target neurotransmitters and allow improved communication between nerve cells.⁶

Some doctors say that Axis I illness' are bundled together because as the symptoms jump between the boundary lines across the illnesses, they back-pack common psychiatric medicines that serve to

6Murphy, M., Cowan, R. & Sederer, L. *Blueprints in Psychiatry*. Blackwell Publishing, Massachusetts, 2004.

remediate the common symptoms. But in truth, the potent DSM classification is do entirely to the fact that Schizophrenia, Bipolar Disease and Manic Depression account for the most severe form of mental illness. **Why not just bucket the worst together and if the medicine fits, what is the difference in a diagnosis?** "Psychiatry is far from an exact science." Says, Dr. Strauss. Dr Richard Strauss also believes in the later bold writing – "Why not just bucket the worst together and if the medicine fits, what is the difference in diagnosis? "We psychiatrists are about fixing peoples illnesses, and with all the advances in medicine these days certain combinations or concoctions are endless; and we try and try until we find what works for a particular patient."

Schizophrenia is a biological illness of the brain. People with Schizophrenia have perceptions of reality that are strikingly different from the reality of others around them. Thinking can be disorganized. Many people living in a world of Schizophrenia live within a world that is distorted by hallucinations and delusions and this is their reality. Hallucinations and illusions are disturbances of perception and are common symptoms of Schizophrenia. Hallucinations are perceptions that occur without connection to an appropriate source. Although hallucinations can occur in any sensory form, auditory, visual, tactile, taste, smell and hearing voices that other people don't hear is the most common type of hallucination in Schizophrenia. Here as follows is something interesting and notable: Voices may describe activities, carry on a conversation, warn of impending dangers, or even issue orders. Real Schizophrenics hear voices as if they are broadcast from a speaker, as if others could hear them as well. Some people may hear a voice, which would be the equivalent to rehearsing the lines of a play in their head. Some diagnosis may be Schizophrenics based upon the latter according to certain doctors....Other people may not hear voices as if they were

coming from a speaker. Instead they might hear a voice in their head, but the voice is not auditory like a record.

Illusions, which is a whole other topic, occur when a sensory stimulus is present but is incorrectly interpreted by the individual. In part because of the unusual realities they experience, people with Schizophrenia easily see reality “outside of the box” and without boundary. Delusions are false personal beliefs that are not subject to reason or contradictory evidence and are not explained by a person’s usual cultural concepts. Although Delusions can significantly slow down the creative process, a Hallucination is a creative thought to the extreme!

Many experts believe that people with manic depression are more artistic than the general population and cite histories of many artists. There is much written about manic depression and artistic capacity than any other illness. States Dr Wu, “People who have persistent, severe psychotic symptoms tend to be less creative, as the psychosis can interfere with creative processes. People who have a serious thought disorder often have a very hard time communicating. Some peoples’ thinking is so thought disordered that they are incoherent and unable to relate effectively to other people and thus unable to create art, as mentioned earlier in the interview with Marc.”

Creative thinking is at the center of lateral thinking for all of us. There have been many different approaches to the study of creativity. The relationship between creativity and intelligence was a central concern of psychology by Guilford in the 50s. He and Torrance devoted study towards the measurement of creative potential. There have also been many attempts to increase creative behaviors and in 1966 Taylor & Williams provided a survey of the relationship between creativity and instruction. Today actual creative activity cannot yet be measured in MRI and PET brain scans during a creative process, but science is working to improve the technology.

While there are many views about the nature of creativity, there is agreement that the standard creative process involves the application of past experiences or ideas in new ways. The Creative Problem Solving Model, based upon the work of Osborn and Parnes, states that the creative process involves five major steps: fact-finding, problem-finding, idea-

finding, solution-finding, and acceptance-finding. Certain cognitive skills seem to serve the foundation for creative behavior such as: fluency, flexibility, visualization, imagination, expressiveness, and openness. These skills may be personality characteristics, be learned, or they may be situational skills. There is also general understanding that social processes play a role in the recognition of creativity.

Lateral thinking is powerful and is directly linked to Axis 1 diagnosis. Irving Maltzman conducted a number of studies to study creative behavior. In 1960, he described three methods that can increase creative original responses: (1) present an uncommon stimulus situation for which conventional responses may not be readily available, (2) evoke different responses to the same situation, and (3) evoke uncommon responses as textual responses. Maltzman's methods to increase creative response are already firmly integrated into the nature of Major Mental Illness. By definition, Schizophrenia and Bipolar have the components of creative insight and perception of lateral thinking. Within the Axis I illnesses, ideas are free to recombine with other ideas in unique patterns to make unpredictable associations and there is really no barrier to rich feeling and sensual imagery.

Now, we will get in to some history. Psychosis traits might even allow the unusual and sometimes bizarre thought processes associated with Major Mental Illness to fuel creativity. Salvador Dali wasn't just a great artist, but he also met the Axis I criteria of several psychosis diagnoses, a mixture of Schizophrenia and Depressive. (When I showed one of my "Graff" pictures to the Parson's grad, he was like –"Holy shit, that's as good as Dali." Other studies have shown that psychiatric patients perform better in tests of abstract thinking. Newton and Einstein's Schizotypal orientation has been stated to actually enable their revolutionary direction in the sciences. States Emile Glazer, "Affective disorders perpetuate creativity limited to the normal, while the Schizoid person is predisposed to a sense of detachment from the world, free from social boundaries and able to consider alternative frameworks, producing creativity within the revolutionary sphere". Creativity comes in many forms. Psychologists believe that a number of famous creative people, including Vincent Van Gogh, Albert Einstein, Emily Dickinson and Isaac Newton had Schizotypal personalities. These are the personalities that maintain "a pervasive pattern of social and interpersonal deficits marked by acute

discomfort with, and reduced capacity for, close relationships as well as by cognitive or perceptual distortions and eccentricities of behavior, beginning by early adulthood and present in a variety of contexts” and that are also diagnosed with five of the established psychotic diagnostic criteria”. On first look, Edgar Allen Poe, Einstein, Salvador Dali, Van Gogh, and Brian Wilson from the Beach Boys have nothing in common. Their focus areas in creative writing, physics, art, and music do not overlap. Is there a link to the theory of relativity, contemporary art and songs about surfing? According to research, psychosis might actually be the answer. Creative minds in all kinds of areas, from science to poetry, and mathematics to humor, may have traits associated with psychosis. Artists with Schizophrenia and Bipolar Disorder or Major Depression have produced famous works. In some cases, it is unclear which disorder affected the artist. While Vincent Van Gogh may have produced bipolar art, some believe he was an artist who struggled with Schizophrenia. Some artists with Bipolar Disorder report a drop in creative exuberance when their disorder is treated, but medication does not appear to negatively affect the creativity of artists with schizophrenia. Edgar Allan Poe's writings could be Schizophrenic art. Schizophrenics have also made contributions to science: Mathematician John Nash is a notable example who had a recent movie scripted from his life.

Dr. Heilman from the University of Florida’s College of Medicine in Gainesville, cited the work of Miller and colleagues at the University of California, San Francisco, to describe a series of patients with dementia of the brain who acquired new artistic abilities in spite of evidence of deterioration in the left anterior temporal lobe. "These are people who had no history of artistic ability," Dr. Heilman said. "They actually became creative—perhaps because the deterioration on the left side ‘disinhibited’ their right side, and the right side got creative doing artistic things”.

Scientists who are interested in the impact of the brain’s creativity on the Axis IV symptoms are also interested in the impact of the Axis I symptoms on creativity. According to Dr. Heilman’s studies on divergent, lateral out of the box thinking and convergent, fixed or vertical thinking, "many people who are very creative have a higher incidence of mood and addiction disorders and that while many neurologic disorders can reduce creativity ... there are some that might enhance creativity". Two

important components of divergent thinking are disengagement and the ability to develop alternative solutions. While studying mood and addiction disorders, Dr. Heilman explored creativity, sleep, dreaming, rest, relaxation, and depression, and observed that changes in the neurotransmitter systems that transmit impulses within the brain, were the common link between these functions. To solve the unsolvable problem, an individual needs to change the way he has already tried to solve the problem and “think outside the box”. William James expressed in 1890, that the ability to change strategy is integral to divergent thinking and in 1931 Charles Spearman stated that “creativity results from bringing together two or more ideas that previously have been isolated. One way to solve a persistent problem is to see it in new light by combining different forms of knowledge and cognitive strategies mediated by the two hemispheres of the brain.” Dr. Heilman provided a study on a number of scientists who reported solving a difficult scientific problem while asleep or when falling asleep or awakening from sleep. The study shows that creativity might seem to be enhanced during times of noncommitment or rest. Laziness might actually open the creative pathways, but how does creativity respond to drug and alcohol use? He noted an association between creativity and new thought to high rates of alcoholism, drug abuse, bipolar depression, very typical for Axis I illness among creative types including writers, composers, musicians, and fine artists.

Peter is prescribed Seroquel for his AXIS I diagnosis: “Yeah I have always done art, my dad is an architect, I went to school at Pratt for a while, got into drugs and ended up a drug addict and alcoholic, and eventually homeless in NYC. I even climbed to the top of the Brooklyn Bridge to jump off. Thankfully, I’m still here loving life, doing art.... Been sober almost 16 years and I encourage others to be sober. I remember all I wanted to do was to drink. Can't get nothin' done that way.” “Now I have Jesus.”

This associations raise many questions and according to Dr. Heilman. "Does treatment of depression and bipolar disorder influence creativity, and what are the effects of different treatments"?

In today’s world of mental health, medication is key to holding back major mental illness symptoms. Without medication, a mental illness can quickly move ahead and erode the natural creative processes for these

individuals. Medication specifically for Axis I illness appears in several categories, but for the most part, the newest Atypical antipsychotics (some unreleased yet.) are hailed to be the best agents to fight the thought and depressive disorder, psychotic positive delusions and hallucinations and the negative symptoms of social withdrawal and apathy within the illness.

What we know today is that new antipsychotic drugs on the market can hold negative symptoms and positive symptoms of an Axis I illness in check. Although Antipsychotic drugs do not directly impact creativity, when the Axis I symptoms are controlled via drug therapy, a person's natural inclination toward creativity is unveiled. Back to Dr Wu's comment, "People who have a lot of negative symptoms or a severe thought disorder can have a very difficult time expressing themselves." The severe Catatonic state of stupor doesn't tend toward creativity, but if medication is able to calm the symptoms of the illness, there's a chance that some normal expression could return.

Emile Glazer, a professor of abnormal psychology at Oxford University, spoke to the links between major mental illness and creativity: Research has begun to support the idea that creative people are more likely than others to have traits associated with mental illness. "Most theorists agree that it is not the full-blown illness itself, but the milder forms of psychosis that are at the center of the link between creativity and madness. "If you have something going on in one side of the brain, can it disable the other side of the brain to develop even greater ability? Did Einstein's dyslexia within the left side of his brain allow his right hemisphere to grow and be very well connected? People who have tremendous creativity also have tremendous brain connectivity" (7)

Meet Marc. Marc worked in a group home with Axis I individuals for several years: "Yeah there was this one guy who would always be talking to himself out loud; I don't think he was hearing voices at all, as the others did. Everything he would be saying to himself was very intelligent and made sense, and if you wanted to speak to him in the middle of him talking to himself, he was right there for you. All of what he would say out loud was definitely a form of art. I would say his disease was moderate. Severe Schizophrenics or Bipolar would definitely not be able to live in the group home environment. Any way, this guy took care of

himself perfectly and everything, you know, and if you want to call golf an art form, he did that too. It was great working at the group home; it was a happy place for about 16 people (7). There was always something creative to do, and the interesting part about it was that everyone was creative there, creative in their own way; I would say more so than if you went to a hotel for the night in a big NYC hotel. To say the least, I have first hand knowledge that these people have a more creative mind than the general public. I really think after seeing some of these people that they are geniuses in their own way and exceptionally intelligent.”

Artists with Schizophrenia, Bipolar Disorder and Major Depression need to find both audience and markets for their work. The natural creative tendency and ability of this population gives us the opportunity to share unique insights and perceptions of reality. This is common ground.

Now, I am getting towards the end. First off my son is a graffiti writer. He asked that I let his name remain withheld. To me, from my experience, graffiti, is the most realist and most misunderstood art form, one could definitely relate this art to mental illness, but a very acute one. Most all the writers I have seen are on the same “vibe-“ probably schizophrenic, that it is so acute, and almost funny, or funny at times, that it need not be treated. Again, geniuses at work? Perhaps!

So I open one last book, and come to page 84 - the whole book is about graffiti and the culture that surrounds it. Oddly, well some perhaps would use that word, the article title is - THE TRULY ILLMATIC, hip - hop and mental illness. Not surprising really.

In this section, first off right away the article states, "A lot of hip-hoppers I know-especially from New York City - act like they are mentally ill. The author also states that a lot of them probably are. A lot of the time graffiti and hip-hop go hand in hand. It seems, according to the author that Hip Hop, and heavy metal are the only subcultures that celebrate mental illness!!! A great thing - so much talent, and not just ordinary talent, unique and special talent to say the least.

There is discussion about a man who had to live in shelters, but had so

much talent. He had been through much. Sadly this man Nassir and his friend "FUN" were train surfing, "FUN" at the stop of the train, climbed down to "tag" his name on the back of the train, he accidentally hit the third rail and was killed. After this happened, Nassir developed an acute form of schizophrenia, I mean what the fuck do you expect, he lost his best friend; he had to pull "FUN" off the fucking third rail. Shocking, devastating, sad, unreal, painful, why? what?, awful, etc..

To sum this up people, like Nassir understand other people like him, he is not alone! And in this graffiti life style, there are words like "Yo, that's crazy, mad, sick, dope, and ill." We also need to be looking out for the originals among us who truly are - I take that last part in a positive way!!! A way, that will keep the movement alive for the writers who still write. New age writers, versus old - school?

And now a renewed focus to provide cost effective and enhanced creative resources for the Axis I community should be the top line requirement of good social service and education outreach. Creative research outreach results in positives: 1) Provides a feel-good accomplishment and a therapeutic value to the individual and (more importantly) 2) Provides a common link that can tie the Axis I community to the outside world for life.

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