Madness, Psychiatry, and the Visual Arts in History

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HISTORY OF PSYCHIATRY

While much in the history of “madness” has changed over time, one of the most consistent—yet sometimes overlooked—features of that history has been the presence of the visual arts. Dating back to ancient times, observers have attempted to understand and communicate the meaning of mental illness through paintings, drawings, sculpture, and ceramics and, later, photography and film. Indeed, some of the most enduring images of what used to be called “insanity” and its treatment have been crafted by artists. Think of William Hogarth’s portrayal of Bedlam Hospital (1735); Charles Louis Muller’s depiction of Philippe Pinel removing chains from the insane; or Andrea Brouillet’s A Clinical Lesson With Charcot at the Salpétrière (1887). To many, art has been seen as uniquely qualified to provide insight into both those deemed mad and their self-professed healers.

© ARTPARTA/SHUTTERSTOCK.COM The histories of the visual arts and madness, however, are even more tangled than this. As Gail A. Hornstein, PhD,1 recently pointed out in an essay in the British magazine The Psychologist, art proved to be an integral part of clinical research and treatment dating back to the building and proliferation of asylums in the 19th century. Hornstein is Professor of Psychology at Mount Holyoke College. She is the author of numerous articles and books, including Agnes’s Jacket: A Psychologist’s Search for the Meanings of Madness.2 Throughout her career, she has been committed to recovering the voices and personal experiences of those living with mental illness. In fact, her Bibliography of First-Person Narratives of Madness in English3 has long been a canonical resource for many of us historians.

As Hornstein notes, prominent alienists—as asylum healers were called in the 19th century—and psychiatrists since the 1830s believed that the visual arts had a role to play within asylums. Jean Etienne Esquirol (Salpêtrière) turned to paintings and drawings, while Hugh Welch Diamond (Surrey County Lunatic Asylum) and Jean-Martin Charcot (Salpêtrière) took advantage of the new technology of photography to capture images of their charges.

Their purpose was 2-fold: either to “freeze the features” of patients to allow physicians an opportunity to more effectively identify physiognomical anomalies or to freeze the behavior of “lunatics” in order to flag patterns and discrete stages in their actions. In both cases, however, the ultimate intent was to help refine diagnosis.

In the early 20th century, some psychiatrists took a different approach to visual media. During World War I, German psychiatrist Max Nonne filmed his shell-shocked patients—dubbed “war neurotics” at the time—as a way to demonstrate to students and other clinicians both the symptomatology of the disorder as well as his techniques for treating it. (The film is available online from the German Federal Archive; it can be viewed at:
At the Psychiatric Clinic at the University of Heidelberg, Hans Prinzhorn began collecting the artworks of psychiatric patients throughout central Europe in 1919. His aim was to explore what he believed to be the common, fundamental purpose of all creative activity: forging links between self and other. All told, Prinzhorn collected around 5000 paintings, drawings, sculptures, textiles, and installations by some 500 individuals. Some can still be seen today at the Prinzhorn Collection in the University Clinic in Heidelberg. As Gail Hornstein concludes in her essay:

From the colourful PET scans of the so-called “schizophrenic brain” that now fill psychiatric textbooks, to the cartoon images of neurotransmitters in pharmaceutical advertisements, to the extravagant performance art created by activists in today’s mad movement, images of madness are everywhere. I myself think that the only meaningful approach is to start with the lived experience of individuals, contextualising their “madness” within the rest of their life story and experience.¹

To this day, the visual arts remain a vibrant part of the world of mental health care.

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Disclosures:

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