



A review Sylvia Plath Effect - An Indian Scenario

KEYWORDS

Sylvia Plath effect, creative women, mental disorders, Indian scenario

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ABSTRACT

Since long time people have been correlating creativity with mental illness. The evidences and incidences are also found that supports their correlation. This susceptibility of creative peoples, especially writers and poets to suffer from mental illness has been termed as Sylvia Plath effect on the name of famous American poet Sylvia Plath. From the cases encountered and survey done till date, it has been found that among writers and poets, female poets were more likely to be mentally ill than other creative females, such as politicians, actresses, and artists. This correlation between creative expressions of writers and their emotional disturbances is seen as an insightful work of literature. As far as Indian perspective of Sylvia Plath effect is concerned, few examples are found that goes in accordance, however, the overall occurrence of effect is not that much prominent. However, many studies have demonstrated that creative writers are prone to suffer from mental illness; this relationship has not been examined in depth and the area is quite open for future research and discussions.

INTRODUCTION

SYLVIA PLATH

Sylvia Plath was born on October 27, 1932 in Boston. Born to middle class parents in Jamaica Plain, Massachusetts, Sylvia Plath published her first poem when she was eight. Sensitive, intelligent, compelled toward perfection in everything she attempted, she was, on the surface, a model daughter, popular in school, earning straight A's, winning the best prizes. By the time she entered Smith College in 1950 she already had an impressive list of publications, and while at Smith she wrote over four hundred poems.

Sylvia's surface perfection was however underlain by grave personal discontinuities, some of which doubtless had their origin in the death of her father when she was eight. During the summer following her junior year at Smith, Sylvia nearly succeeded in killing herself by swallowing sleeping pills. After a period of recovery involving electroshock and psychotherapy Sylvia resumed her pursuit of academic and literary success, graduating from Smith *summa cum laude* in 1955 and winning a Fulbright scholarship to study at Cambridge, England.

In 1956 she married the English poet Ted Hughes, and in 1960, when she was 28, her first book, *The Colossus*, was published in England. She and Ted Hughes settled for a while in an English country village in Devon, but less than two years after the birth of their first child the marriage broke apart.

In 1962-63, Sylvia was living in a small London flat, now with two children, ill with flu and low on money. The hardness of her life seemed to increase her need to write, and she often worked between four and eight in the morning, before the children woke, sometimes finishing a poem a day. On February 11, 1963, Sylvia Plath killed herself with cooking gas at the age of 30 (Becker, 2003; Alexander, 1999).

SYLVIA PLATH EFFECT

Psychologist James C. Kaufman (2001) coined the term 'Sylvia Plath effect' to refer to the phenomenon that poets are more susceptible to mental illness than other creative writers. Although many studies (Andreasen, 1987; Jamison,

1989; Ludwig, 1995) have demonstrated that creative writers are prone to suffer from mental illness, this relationship has not been examined in depth.

Sylvia Plath's case history can be framed on the basis of information now available in the public domain, including her posthumously published journals (Faber & Faber, 2000) and *Letters Home* (Faber & Faber, 1976), a semi-autobiographical novel (Faber & Faber, 1963), a well-researched, sensitive biography (Stevenson, 1989) and *A Life of Her Husband* (Weidenfeld & Nicolson, 2001).

The previous onset of depression, at the age of 20, was associated with overwork and failure to get into a Harvard writing class on which she had set her heart. She was referred to a psychiatrist and was started on electroconvulsive therapy (ECT). Hiding herself in a small space under the house porch, she swallowed all her sleeping pills and laid in coma for two days, until the family heard her groans. After hospital resuscitation she was transferred to the McLean psychiatric clinic, where she remained for four months, had modified insulin treatment, a second course of ECT and psychotherapy, and made a good recovery (Brian, 2003).

Runco (1998) stated that although much can be learned by viewing Sylvia Plath's poetry as an expression of her thinking and affect, additional insights are afforded by reversing the typical direction of effect and by viewing Plath's affect, and in particular her depression, as a result of her writing. Plath's huge investment in writing may have contributed to the sensitivity that predisposed her to stress and depression.

Friends who helped with the care of her two small children later described her as overwrought, 'hysterical' and intensely preoccupied with the breakdown of her marriage, which she blamed entirely on her husband's infidelity and the hostility to herself of his family and friends. She suffered badly from insomnia and early waking, relying on a hypnotic to get to sleep. Her normally rounded features had become gaunt and she lost some 20 lb (9 kg) weight, though she could still eat a meal with relish when it was cooked for her. Speech and movement were not retard-

ed, apart from a loss of spring in her gait, and she continued to take great care over dress and appearance. She expressed no ideas of guilt or unworthiness, nor is there any evidence that she was deluded or hallucinated (Brian, 2003). In mid-February, 1963 shortly before her psychiatric appointment was due, she was found dead of carbon monoxide poisoning in her own kitchen, with her head in the oven and the gas turned on (The Guardian, 1993).

SUICIDE –A PSYCHIATRIC MOOD DISORDER

Suicide is among the top three causes of death among youth worldwide. According to the WHO, every year, almost one million people die from suicide and 20 times more people attempt suicide; a global mortality rate of 16 per 100,000, or one death every 40 seconds and one attempt every 3 seconds, on average. Suicide worldwide was estimated to represent 1.8% of the total global burden of disease in 1998; in 2020, this figure is projected to be 2.4% in countries with market and former socialist economies (Rajiv and Chitranjan, 2012). According to the most recent World Health Organization (WHO) data that was available as of 2011, the rates of suicide range from 0.7/100,000 in the Maldives to 63.3/100,000 in Belarus. India ranks 43rd in descending order of rates of suicide with a rate of 10.6/100,000 reported in 2009 (WHO suicidal rates report, 2012).

Psychoanalytically suicide is an inwardly directed aggression against an internalized object (Freud, 1917). Ringel (1976) postulates a 'presuicidal syndrome', a form of a chronic neurosis that predisposes to suicide and whose features comprise constriction of affect, values and social relations, a reversal of aggression and suicide phantasies.

Feelings of guilt, ideas of hopelessness and helplessness have been found to be strong potentials for suicide (Beck et al, 1985). Mental illness especially Affective Disorder of depressive type, personality disorder and schizophrenia also eventuate suicide in some cases. There are clinical predictors of suicide risks within the symptom constellation of depressive illness. The intensity of depression is judged by patient's expression of suicidal thoughts and the suicide attempts. However, a lack of clear correlation between the thoughts and the attempt on one hand and the severity of depression on the other is being recognized (Asberg & Traskman 1979).

During last two decades, the monoamine theory of affective illness has been having its sway and naturally biological accompaniments of suicide behavior became the focus of research (Asberg & Traskman 1979).

Studies on the neurobiology of suicide have implicated dysfunction of serotonin, dopamine, acetylcholine, adrenaline, noradrenaline, opioid, GABA, and glutamate systems. Abnormalities have been reported in the hypothalamic-pituitary-adrenal axis, lipid metabolism, CSF 5-HIAA, polyamines, growth factors, and astrocytes and other glial cell (Ernst et al, 2009). In another study, very low levels of melatonin were found to correlate with hopelessness and could hence constitute a predictor of suicide (Rao et al, 1988).

Evidence from genetic research, monoamine studies and psychopharmacological trials points towards a possible biological predisposition and precipitant for suicidal behavior (Rao and Devi, 1987).

Dr. Slater (1972), the then editor of *British Journal of Psychiatry*, wrote that the appraisal was based on a binary model of affective illness, in which the terms endogenous

and reactive—or alternatively psychotic and neurotic—were used to denote two contrasting syndromes: the one consisting of recurrent severe disorders of mood (depressive and/or manic), apparently spontaneous in onset, the depressive phase being accompanied by psychomotor retardation, feelings of guilt and unworthiness, early-morning waking and somatic changes; the other presenting as milder, often intermittent depression mingled with anxiety, triggered by adverse life events, marked by irritability and self-concern rather than guilt and by subjective complaints rather than objective bodily disorder (Kendell, 1976). If one accepts this model, there is undoubtedly a strong case for allocating Sylvia to the former group (Brian, 2003). It was given support by John Horder, the respected London general practitioner (GP) who treated her in her last illness and who later wrote: 'I believe, indeed it was repeatedly obvious to me, that she was deeply depressed, "ill", "out of her mind", and that any explanations of a psychological sort are inadequate...' (Horder, 1989).

INTERCONNECTION BETWEEN CREATIVITY AND MOOD DISORDERS

People have wondered whether there is a relationship between creativity and mental illness at least since classical times (Hetss, 1953). In the past, creativity has been linked with disorders such as schizophrenia, psychopathy, melancholia, psychoneuroses etc. but more recently, the emphasis has shifted to affective disorders and, in particular, manic-depressive illness (Ludwig, 1989; Jamison, 1992; Jamison, 1993; Richards et al, 1988).

In the nineteenth century the influence of Lombroso led to speculations that genius was a "hereditary taint" transmitted in families along with mental illness (Lombroso, 1891; Galton, 1892; Hirsch, 1896, Lange-Eichman, 1931). In the twentieth century this association has been supported by several techniques commonly used to examine familial transmission of various illnesses, including evaluation of first degree relatives of creative individuals (Ellis, 1926; Juda, 1949; McNeil, 1971, Holden, 1986, Andreasen and Canter, 1974).

Examining the association between creativity and mood disorders is an interesting scientific pursuit. However, the real test of whether there is an association can only be determined by rigorous empirical studies. Studies are relatively rare, however, because research on the nature of creativity presents a variety of challenges (Andreasen, 1987). While the sparse studies in this area have contributed to a better understanding of the nature of the relationship between creativity and mental illness, much remain unknowns (Ludwig, 1994).

The difficulties and challenges faced by creativity researchers are defining the nature of the sample to be studied and the generalization of information (Andreasen, 1987; Ludwig, 1994). The use of the term "creativity" to refer to individuals who make creative contributions is relatively modern. Up until the early 20th century, such individuals were said to have "genius." In certain studies "genius" was defined as having a high intelligence quotient (IQ) on the TQ tests that Terman et al. (1925-1959) had developed.

These early efforts suggest that a better definition of the term "creativity" may be the key to identifying an appropriate sample to study. Many different, perspectives have been offered on defining creativity by authors such as Howard Gardner. Gardner (1999) argues persuasively that

there are multiple types of creativity, which he refers to as "multiple intelligences." A key component, of Gardner's approach is that he disagrees with the common stereotype that makes creativity equivalent to pursuing work in the arts, and ignores the fact that people in fields such as engineering or biology also may be highly creative.

Given this definition of creativity, how then should an investigator identify a sample to study? One approach is to select a very homogeneous group of creative people, such as a group of writers, or musicians, or mathematicians, which is the most common approach and the approach is to sample more broadly and to study a mixture of creative individuals from multiple disciplines. An alternative approach is to identify a group of people for whom written histories are available and to use this information as the basis for study. Examples of this type of approach are the studies of Ellis (1926), Juda (1949), Post (1994), Ludwig (1992), and Schildkraut et al. (1994).

The problem in generalization of information from studies conducted because what applies to writers, may not apply to other kind of creative artist like those who are involved in accomplishing great works or make important discoveries. And what applies to male writers and artists may not apply to female writers and artists (Brady et al, 1993).

If the goal of a study is to examine the relationship between creativity and psychopathology, then several other challenges must, also be met. One is to use a standard and widely accepted set of definitions of mental illness, and to assess its presence or absence using a structured interview of some type. A second challenge is to identify an appropriate comparison or control group, in order to determine whether rates of any given illness in the creative people are different from rates in a "normal" comparison group (Andreasen, 1987; Juda, 1949).

Outcomes from several studies undertaken reflects that the patterns of psychopathology differed among artists, composers, architects, actors, musical entertainers, fiction writers, poets, and nonfiction writers. Poets, for example were most likely to suffer from a psychosis or commit suicide as compare to musical performers and gender differences also were apparent, where eminent women were more likely to suffer than men. Although demonstrating creative achievement comparable to those in creative arts, scientists were far less likely to suffer from mental illness (Ludwig, 1994).

The striking number of suicides by contemporary writers has also led to renewed interest in this association. The following are only some of the writers who have died by suicide during the twentieth century: Ernest Hemingway, Sylvia Plath, John Berryman, Anne Sexton and Virginia Woolf (Andreasen, 1987).

The results of the study conducted by Ludwig (1994) revealed that writers displayed significantly higher rates of almost all of the mental disorders evaluated. About twice as many writers as nonwriters experienced some form of mental disorder during their lifetimes. Depression was the most common disorder in writers.

One of the earlier study to examine the relationship between creativity and mental illness was conducted using a sample of 15 writers from the University of Iowa Writers' Workshop and 15 control subjects of equivalent, age, gender, and educational achievement (Andreasen, 1974).

This workshop is oldest and most widely recognized creative writing program in USA. Over the years the sample was steadily expanded, so that the final study consisted of 30 subjects in each group (Andreasen, 1987). Subjects were evaluated using a structured interview, and diagnoses were made using the *Diagnostic and Statistical Manual of Mental Disorders*, 3rd ed. (*DSM III*) criteria. Rates of mood disorder are extremely high in the writers; 80% had some type of mood disorder, and 30% had either bipolar I or bipolar II disorder. Both these rates are significantly different from the control subjects. The writers also had higher rates of alcohol abuse than the controls. This study has been replicated by several other investigators (Andreasen, 1987; Andreasen, 1974).

In 1989 Jamison reported her work examining British writers and artists (Jamison, 1989). They were selected using the criterion of having won major honors or prizes in their field, such as membership in the Royal Academy, the Booker Prize, or the New York Drama Critics' Award. The subjects were subdivided into five groups: novelists (8), poets (18), playwrights (8), biographers (5), and artists (8). Overall, 38% of the sample had been treated for a mood disorder. The highest rate of treatment was in the playwrights (63%), but more than half had received psychotherapy rather than medication. The poets had the highest rate of needing medication for mood disorder (33%); they were also the only group to have received treatment for mania.

Research provides long lists of famous folks who suffered from mental illness: Shannen Doherty, Dwight Eisenhower, Mark Millar, Ogden Nash, Dan O'Bannen, and Beth Orton.

CREATIVE WRITERS SPECIFICALLY FEMALE WRITERS ARE MORE PRONE TO MENTAL DISORDERS

Studies have shown that women have higher rates of mental illness than men. From early adolescence through adulthood, women are twice as likely as men to experience depression (Nolen-Hoeksema, 2001). Among other predisposition factors responsible for suicide, incidence of mental illness in suicides and attempted suicides ranges from 10% to 30% in different studies (Adityanjee, 1986).

In one Study, (Kaufman, 2011) 1,629 writers were analyzed for signs of mental illness. Female poets were found to be significantly more likely to suffer from mental illness than female fiction writers or male writers of any type. Another study analysis to 520 eminent women (poets, fiction writers, non-fiction writers, visual artists, politicians, and actresses), and again found the poets to be significantly more likely to experience mental illness.

In independent study performed by the Department of Psychiatry at the University of Kentucky Medical Center, (Ludwig, 1994) female writers were found to be more likely to suffer not only from mood disorders, but also from panic attacks, general anxiety, drug abuse, and eating disorders. The rates of multiple mental disorders were also higher among these writers. Although it was not explored in depth, abuse during childhood (physical or sexual) also loomed as a possible contributor to psychological issues in adulthood. The cumulative psychopathology scores of subjects, their reported exposure to abuse during childhood, mental difficulties in their mothers, and the combined creativity scores of their parents represented significant predictors of their illnesses. The high rates of certain emotional disorders in female writers suggested a direct relationship between creativity and psychopathology, but the relation-

ships were not clear-cut. As the results of the predictive analysis indicated, familial and environmental factors also appeared to play a role.

The statistics of Epidemiological Catchment Area (ECA) survey for women in U.S. population provides some information justifying the above point. Female writers, compared to women in the ECA study (Robins and Rieger, 199; Ludwig, 1994), had substantially higher rates of depression (56% versus 9%), alcoholism (20% versus 5%), drug abuse (17% versus 5%), mania (19% versus 1%), panic disorder (22% versus 2%) and generalized anxiety (14% versus 5%).

Several studies reflects sufficient example of female writers/poets who had suffered from mental illness viz Virginia Woolf, Sara Teasdale, Anne Sexton, Sarah Kane, Alda Merini, Sylvia Plath etc.

Sylvia Plath's case history conforms clearly to a psychosocial model, according to which a severe life-event in the presence of vulnerability factors (negative close relationships and low self-esteem) is highly predictive for depression in women with children, and the risk will be increased if there is a history of previous depressive illness, or of early loss or deprivation in childhood (though in Sylvia's case there is no evidence to suggest early abuse or neglect) [50]. In epidemiological studies, moreover, the prevalence of depression will tend to vary with population levels of adverse life events, even if heritability coefficients for depression are substantial (Brown, 1998).

INDIAN PERSPECTIVE OF SYLVIA PLATH EFFECT

In different individual studies information has been reported which exemplifies that many writers and poets from India have suffered from mental illness and attempted or committed suicide. To name few they are Binoy Mazumdar, Swadesh Deepak, Indrani Alikath Gyatsen, Dhan Gopal Mukerji, and Reetika Vazirani.

Binoy Majumdar (17 September, 1934 – 11 December, 2006) was a Bengali poet. He was born in Myanmar but his family later moved to West Bengal, India. Binoy received a prestigious Sahitya Akademi Award in 2005. His famous work include *Nakshatrer Aloy*, *Phire Esho*, *Chaka* etc. in 1980s and 1990s, Binoy was affected by severe mental illness. He tried to commit suicide several times, and stopped writing poetry altogether. He later moved to outskirts of Calcutta and lived there as a stranger. Binoy had passed into obscurity in his later years, suffered from senility and lived in social seclusion and neglect. He died on 11 December 2006, at age of 72 (<http://poemhunter.com/binoy-majumdar/>).

Swadesh Deepak (born 1942) is a popular Indian playwright, novelist and short-story writer. Deepak has been active on the Hindi literary scene since the mid-1960s and is best known for *Court Martial*, a path breaking play that he published in 1991. He had won many awards including Sur purushkar, SangeetNatak Academy Award 2004, the most prestigious award conferred to performing artist in India. In early 2006, Deepak showed symptoms of acute depression related to Bipolar disorder. He had suffered a cardiac attack in 2004, but had shown considerable improvement ever since. On June 2, 2006, Deepak left home for his routine morning walk, and went missing. All attempts to trace him have shown little results (SangeetNatakAkademi, 2008).

Indrani Alikath Gyatsen (1952-1994) was an Indian novelist and columnist. Her works includes three famous novels

viz. Daughters of the House (1992), *Crane's Morning* (1993) and *Hold my Hand, I'm dying* (unknown). She committed suicide in 1994 after consuming sodium phosphate not long after the plagiarism was discovered (Khushwant Singh, 2012).

Dhan Gopal Mukerji (1890-1936) wrote numerous books and stories for children, most of which describe the animal life of India and Hindu lore and beliefs. Dhan Gopal Mukerji was born on July 6, 1890, in a jungle village near Calcutta, India. He wrote, with Mary Carolyn Davies, *Chintamani: A Symbolic Drama* (1914), adapted from a play by Girish C. Ghose; the play *Layla-Majnu* (1916); the poetry collections *Rajani: Songs of the Night* (1916) and *Sandhya: Songs of Twilight* (1917); and the play *The Judgment of India* (1922). Mukerji is also known for his autobiography *Caste and Outcast*, which tells of life in India and America. He is considered the first Asian Indian writer of significance in the United States. In 1927 Mukerji published his most famous book, *Gay-Neck: The Story of a Pigeon*, which won the 1928 Newbery Medal. Following a six-month nervous breakdown, Mukerji committed suicide by hanging himself in his New York City apartment in July of 1936 (<http://biography.yourdictionary.com/dhan-gopal-mukerji>).

Reetika Gina Vazirani born on August 9, 1962 in Patiala, India was a poet and educator in America. There, Vazirani took the life of her two-year-old son, Jehan, and then her own. She was a recipient of a Discovery/The Nation Award, a Pushcart Prize, 2003 Anisfield-Wolf Book Award, a Barnard New Women Poets Prize, the Poets & Writers Exchange Program Award, fellowships from the Bread Loaf and Sewanee writer's conferences etc. On December 5, 2004 she slashed her own wrist with a kitchen knife and died in a pool of blood. The medical examiner has not yet ruled on Reetika Vazirani's death. Vazirani also took the life of her two-year-old son, Jehan, before she took her own (Virginia Heritage, 2004).

Indrani Alikath Gyatsen and Reetika Vazirani are the only two Indian female poets who are known to suffer from mental illness and committed suicide as compared to other male writers. This goes in accordance with the fact that all Indian male to female suicide ratio is 4:1 (Nambodiri, 2005).

According to Weissman (1974), there is preponderance of female over male attempters in all studied countries and times almost without exception. The findings from several studies from India indicate a male predominance among suicide attempters. The sex differentials in completed suicides from India are again at variance with the West. Out of 11 studies reviewed for this variable, six studies reported a female preponderance among completed suicides whereas the remaining five noted a male preponderance. The question therefore, as to whether in India more women than men commit suicide or vice versa remains unanswered owing to varying results reported by different researchers (Adityanjee, 1986).

CONCLUSION

Sylvia's illness and suicide have generated many articles in specialist journals, but almost all have been focused on issues of psychodynamic interpretation and have failed to deal squarely with the clinical history and diagnosis (Jami-son 1995).

As far as Indian perspective of Sylvia Plath effect is concerned, certain examples are definitely found where crea-

tive people especially writers have suffered from mental illness and attempted or committed suicide. But, in India along with worldwide scenario the range of types of creativity has not been widely studied to date. It has focused largely on writers. It is a slippery slope. The studies on everyday people are much more complicated and less conclusive, because there are also such incidents where many people are known to suffer from depression that are not particularly creative. And on the contradictory, there are also many people who are creative despite of any mental illness. The study of the relationship between creativity and mental illnesses is still a relatively open area, with much remaining to be done. In India, despite some of such incidents have already been visualized, where creative people, particularly writers and poets are known to have suffered from mental illness, no supportive literature of occurrence of Sylvia Plath effect in India have been found and hence it is also still a relatively open area, with much in depth studies yet to be done.

ACKNOWLEDGEMENT

I am highly grateful to Management of Uka Tarsadia University for providing me conducive environment to write this review. Further I am also thankful to Dr. Pithawala for his guidance and reviewing of this manuscript.

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