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Significant Relationship between Varieties of Creativity Indicators

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Description

This paper tries to find a proper answer, approaching the link between creativity and psychopathology in terms of cognitive connections and personality traits common to creative and mentally disturbed individuals. To verify our hypothesis we conducted a latent inhibition task and we applied several questionnaires. The results indicated a significant relationship between a variety of creativity indicators and low scores of latent inhibition that were related previously with the presence of mental illness. We used IQ as a mediating variable between creativity and latent inhibition. It seems that creativity can also be associated with high scores at the clinical scales. This study investigated the effect of two often co-occurring- maternal mental disorders on parenting behavior.

Borderline Personality Disorder

Maternal borderline personality disorder was associated with increased hostility, whereas maternal depression in remission with reduced sensitivity towards their children. Maternal history of early life maltreatment had no additional effect on parenting behavior among mothers with borderline personality disorder. Maternal hostility mediated the association between maternal borderline personality disorder and child behavior problems. Maternal sensitivity mediated the association between maternal depression in remission and child behavior problems. Both, maternal Borderline Personality Disorder (BPD) and maternal Major Depressive Disorder (MDD) are often associated with adverse consequences for children, including increased risk for child behavior problems. Reduced maternal emotional availability might play a critical role in transmitting maternal psychopathology on the child. Our aim was to investigate the association between emotional availability and maternal BPD and MDD in remission (rMDD), and if this interrelatedness mediates the association between maternal mental disorders and child behavior problems. The core features of Borderline Personality Disorder (BPD) are affective instability, unstable relationships and identity disturbance. Axis I comorbidities are frequent, in particular affective disorders. The concept of atypical depression is complex and often underestimated. The purpose of the study was to investigate the comorbidity of atypical depression in borderline patients regarding anxietyrelated psychopathology and interpersonal problems. Correlational methods, unlike cluster analyses, cannot take into account the possibility that individuals score highly on more than one symptom dimension simultaneously.

Negative Schizotypy Dimensions

This may account for some of the inconsistency found in the literature of correlates of schizotypy dimensions. This study explored the clustering of positive and negative schizotypy dimensions in nonclinical subjects and whether schizotypy clusters have meaningful patterns of adjustment in terms of psychopathology, social functioning, and personality. Four clusters were obtained: Low (nonschizotypic), high positive, high negative, and mixed (high positive and negative) schizotypy. The positive schizotypy cluster presented high rates of psychotic-like experiences, schizotypal and paranoid symptoms, had affective and substance abuse pathology, and was open to experience and extraverted. The negative schizotypy cluster had high rates of negative and schizoid symptoms, impaired social adjustment, high conscientiousness and low agreeableness. The mixed cluster was the most deviant on almost all aspects. Our cluster solution is consistent with the limited cluster analytic studies reported in schizotypy and schizophrenia, indicating that meaningful profiles of schizotypy features can be detected in nonclinical populations. The clusters identified displayed a distinct and meaningful pattern of correlates in different domains, thus providing construct validity to the schizotypy types defined. Compared to other groups, children of mothers with BPD demonstrated higher scores on the temperament dimension of harm avoidance. Moreover, they tended to perceive their mothers as being overly protective. Regarding psychopathology, these children exhibited a higher prevalence of emotional and behavioral problems than comparison groups. Particularly significant was the finding that children of mothers with BPD described themselves as having very low self-esteem. Children of mothers with BPD are exposed to a combination of risk factors and are at greater risk of emotional, behavioral, and somatic problems. Early treatment of children at risk may help prevent these children from developing severe psychopathology. The idea that personality and psychopathology are intimately connected is a long standing belief held by scientists and clinicians. However, our understanding of this relationship is limited by conceptual and methodological problems associated with the study of personality. More sophisticated conceptual models and scientific research designs will help disentangle this

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complex relationship and its meaning for the development of various forms of psychopathology. We found statistically significant relation (p < 0.01) between slower intellectual development of children and depressive and neurotic traits of parents and foster care givers. This finding supports a hypothesis that depressive parent or care giver may substantially influence child development. Titrations of the central serotonergic system are considered to be involved in the pathophysiology of Borderline Personality Disorder (BPD). The loudness dependence of the N1/P2 component of auditory evoked potentials has been shown to indirectly reflect central serotonergic activity. The aim of this study was to investigate LD in patients with BPD compared to healthy controls, and to evaluate the association between LD and psychopathology such as anxiety, anger or impulsiveness. Female patients with BPD were included and compared to age- and sex-matched healthy subjects. Self-rating

instruments, such as the State-Trait Anxiety Inventory (STAI), State-Trait Anger Expression Inventory (STAXI), and the Barratt Impulsiveness Scale (BIS) were used to assess clinical scores of anxiety, anger, and impulsiveness. Evoked potentials were recorded following the application of acoustic stimuli with increasing intensities; the LD was analysed using dipole source analysis. The mean was significantly higher in patients with BPD compared to controls. In the entire sample there were significant positive correlations of with state anxiety scores and STAXI subscores. The data contribute to the knowledge of neurophysiological alterations in patients with BPD, supporting hypothesis of serotonergic dysregulation in the the pathophysiology of the disorder. The significant clinical correlations suggest mono aminergic modulations of psychopathology on the symptom level.