

Karoliina Kähmi

Advances in Poetry Therapy

The present article gives an overview of the research done so far in the relatively small field of poetry therapy, and introduces my own work. Previous research has given me important perspectives. Particularly the studies on metaphors, communication and the therapeutic properties of poetry have provided much substance to my thoughts. They show that poetry therapy can effectively treat the secondary symptoms associated with mental health problems, at least, such as the feeling of guilt. However, they share a certain rigid conception of the subject as having a condition to be relieved or redirected by the poetry therapy process.

My research differentiates itself in its focus on the participants' personal experience of this process. I deviate especially from the notion of delusions having a biological cause and the unavoidability of medical treatment – reflected by Collins et al. (2006) for example – as it seems erroneous in the light of notable existing research like Seikkula (2013). In my work the "patient" becomes a person with a story to tell and no assumption is made as to the truth-value of his words. This opens up an avenue for an understanding of the phenomenon of mental illness in general, in relation to language, society, ethics and human nature.

Previous research

Poetry therapy as a part of mental health work has been researched to some degree. It is used a lot around the world, especially in the USA, Europe and Japan. The subject of my own work, poetry therapy as part of the rehabilitation for schizophrenia, has not been researched at all in my home country, Finland. Some studies have been done in Europe, the USA and Japan (Bembry et al. 2013; Sucylaite 2012; Fallahi et al. 2007; Collins et al. 2006; Tamura 2007; Furman 2003 and Hallowell & Smith 1983).

CLINICAL AND NEUROLOGICAL PERSPECTIVES

Shafi (2010, 87–99) already provides a comprehensive description of the research done on the subject in his article “Poetry Therapy and Schizophrenia: Clinical and Neurological Perspectives”. Shafi’s own conclusion is that these studies demonstrate the therapeutic utility of poetry for the patients’ cognitive, linguistic and emotional development. Shafi’s article examines the ways poetry therapy can be used in a clinical context, the neurological basis of metaphor processing, and its clinical implications for people with schizophrenia.

According to Shafi, researching the processing of metaphors at the neural level can help determine the effectiveness of poetry therapy. The therapeutic effect of poetry on the patient does not depend only on their psychological or linguistic profile, but also on the location of injury or brain anomaly and its relevance to their condition. Therefore, knowing how the

brain constructs symbolic language can help researchers and clinicians understand why poetry therapy might be suitable for certain people. Additionally, investigating the processing of metaphors could help identify the neural correlates of poetic language. These efforts have and will continue to contribute to our understanding of language in general. Poetry therapy can then be integrated into metaphor processing research for the study of poetic expression in people with psychotic disorders. (Shafi 2010, 87–99.)

The author says that many poetry therapy methods can be effectively used in the treatment of schizophrenic symptoms too, though his main conclusion is that metaphor processing is worth studying from a neurological perspective, and that there is potential in a neurological approach to poetry therapy. He even leaves an open question to both neuroscientists and poetry therapists about the possibility to develop a *neuropoetic* model that could explain how poetry therapy works in practice. (Shafi 2010, 87–99.) His article is mainly useful in relation to my research, however, because it shows how language and symbolism are central to this question.

PSYCHOSOCIAL SKILLS

Bembry et al. (2013, 73–82) deal with the development of psychosocial skills aided by poetry therapy. The research aimed at: 1) improving the group participants' self-confidence, 2) increasing their awareness of individual rights and obligations, 3) developing their conversational ability, 4) being aware of and understanding anger, 5) improving their ability for conflict resolution, and 6) managing their feelings of anger.

There were four participants in the group, who gathered six times at a mental hospital in the USA. Each session addressed the above mentioned objectives. Conversations took place based on the poems chosen by the instructor as well as on those written by themselves. The researchers confirmed that the poems functioned as a catalyst for interaction and the verbalization of feelings. (Bembry et al. 2013, 73–82.) Otherwise it does not transpire from the article how well the set objectives were accomplished by the poetry therapy group.

EMPATHETIC WRITING

Sučylaitė's thesis (2012) clarifies the possibilities of educational poetry therapy as a support for people with schizophrenia. Her qualitative case study presents these possibilities as a way to improve the client's self-knowledge.

Sučylaitė took part in the International Conference of Creative Writing, Pedagogy and Well-Being organized by the University of Jyväskylä in 2014, and I had the opportunity to talk with her about the differences and similarities of our working methods. Sučylaitė's work is influenced by her background as a writer. She has developed the so-called method of empathetic writing, whereby the therapist writes encouraging and therapeutic texts to their client during the session. Many of her methods are similar to mine (collaborative writing; writing based on lists of words given by the therapist; writing about memories evoked by sensations). The main difference is that Sučylaitė writes to her clients herself and tries to affect their inner worlds and narratives using her skills as a professional writer. Sučylaitė underlines that ego weakness and low self-

esteem are the basic problems of people with schizophrenia. Poetry therapy tasks offer a chance to address those problems. (Sučylaitė 2015).

EXPERIMENTAL STUDIES

Fallahi et al. (2007) is the only experimental study measuring the effectiveness of poetry therapy I have found. The study compared the BPRS test results of 15 clients with schizophrenia who received poetry therapy against those of a control group. These clients took group-writing sessions twice a week for a period of 6 weeks. Otherwise, both groups received a similar quantity of medicines and psychosocial care. The study found the recovery from schizophrenia to be more pronounced among the poetry therapy group.

POETRY THERAPY AND COGNITIVE PSYCHOTHERAPY

The study of Collins et al. (2006, 180–187) is especially interesting from the perspective of my own research. The article examines the possibilities of poetry therapy alongside cognitive psychotherapy. One of the clients featured in the article was a middle-aged man diagnosed with schizophrenia. The man was offered the task of writing a poem exaggerating his own irrational beliefs, with the goal to help him process these beliefs and change them appropriately. The therapist guided the client in recognizing his stressful thoughts and expressing them using poetic means. This way he could reinforce his self-esteem and redirect his thoughts in a more positive direction. The authors,

however, support the use of medicines for the treatment of delusions and hallucinations, because according to them they often have a biological basis.

POETRY THERAPY AND EXISTENTIAL PSYCHOTHERAPY

Furman (2003) approached poetry therapy from the perspective of existential psychotherapy. Patients were asked to write about the meaning of life as well as their perception of death, in order to develop their self-expression and change their way of thinking. One of the participants in the training is described to have been diagnosed with schizophrenia, suffering from auditory hallucinations and paranoia. Furman noticed that the patient could give a new meaning to his existence through poetry therapy. Poetry became a part of his identity, restored his hope for the future, and helped him develop new coping skills. According to Furman, poetry did not improve the patient's condition, but it was a big factor contributing to a better quality of life.

THE JAPANESE WAY

Hiroshi Tamura has worked as a psychotherapist in three Japanese psychiatric hospitals and used linguistic psychotherapy with his patients. He calls this renku therapy. Tamura (2007) documented the case of two patients with schizophrenia participating in his renku therapy groups. Renku therapy is a form of therapy where the client and the therapist take turns in writing

a poem's stanzas. Therapist and patient try to find a connection between the stanzas together.

Tamura concludes that a therapy that focuses on schizophrenic language can solve the cognitive problems related to schizophrenia. He has achieved good results using renku therapy. He notes that this dialogue through poetic means promoted a clear and coherent expression in the patient, helped understand and use humor, and lessened the symptoms of schizophrenia. A clear change in the quality of the patient's poetry gradually takes place during the process (Tamura 2007, 319–328). I have tried this type of method myself with my group: the participants wrote tankas and haikus, and commented on each other's poems by writing and speaking. They have also written continuation poems with my participation as an instructor.

POETRY THERAPY AND PSYCHOSIS

Hallowell & Smith (1983) have used a psychoanalytical approach to poetry therapy, presenting the case study of a man with schizophrenia. The patient was quite averse to treatment and the therapists used poetic dialogue in order to communicate with him. Poetry worked in this case as an empathetic communication channel. As in Tamura (2007), the patient and the therapist wrote stanzas alternatively. However, this time some pathological trains of thought became apparent in the patient's poems. The patient was now unwilling to open up about his feelings through the poems. Slowly, the poems changed anyway, and he began to replace the delusional marks in his text for his new realizations. The text began to show a pursuit of

freedom of expression and autonomy. These changes reflected the patient's spiritual growth. (Hallowell & Smith 1983.)

There have been other similar studies. For example, Silver (1993) reports challenges with a client diagnosed with schizophrenia. During the 23rd session, the client did not speak a word, but brought a poem written by himself to the 24th session.

*'Writing is a road to me, from me to you'
– how do the people with schizophrenia experience the
poetry therapy process?*

My study (Kähmi 2015) examines the role of poetry therapy in the rehabilitation of schizophrenia, this time giving a voice to people with schizophrenia, presenting their own perspective, and providing valuable information for the possible therapeutic implementations of poetry and their development potential.

The main focus of the study is the meaning the participants ascribe to group sessions. Another aim is to examine the therapeutic aspects of metaphor and poetic language used in the poetry therapy group. The research questions were:

1. What are the most meaningful and therapeutic aspects in group poetry therapy from the point of view of the client?
2. What is the personal significance of therapeutic metaphor and poetic language for people who experience psychosis?
3. What kind of poetry therapy model is suitable for people with schizophrenia?

DATA COLLECTION AND METHODOLOGY

The qualitative research data was collected in the year 2011 from a group consisting of clients diagnosed with psychosis. There were 36 closed poetry -therapy group sessions during the year 2011, once a week, with 11 participants at the start and 7 at the end, of ages ranging between 22–60. Their diagnoses were either schizoaffective disorder, schizophrenia, or some other psychosis. I worked as an instructor during the process and conducted theme interviews at the end.

The study material was the poems delivered by the seven continuous members – not those by the members who dropped out – and other content produced by the group. We used poetry-therapy methods in the group: structured writing exercises, collaborative writing, discussions and writing based on already existing poetry. We linked music and visual material to the work through activities such as choosing mood-reflecting picture cards at the beginning and end of the sessions, or the conception of one's own life by connecting pictures and text.

The study material also included the interviews with each member, and my own research diary. In the final interviews, I surveyed the importance of the participation in the group as a whole throughout the year. My research diary offered a new narrative angle to the therapy process. By looking at my own thoughts, reactions and feelings throughout the year I could better recognize which events, pictures, poems or words were meaningful for the whole group or for a single participant.

The material was analyzed using Grounded Theory (Strauss & Corbin 1990), which is a systematic methodology involving the discovery of theory through the analysis of data. In accordance with the framework known as "meaningful moments",

I selected those memorable events that were experienced in a strong and condensed way, by either the participants or the instructor, as central to the reviewing process; whether they supported the therapy or hindered it. I reviewed the metaphors used and interpreted by the group as well as their therapeutic significance. The concept of therapeutic metaphor was originated by Moon (2007, 9–11).

RESULTS

All of the participants felt that participating to the group was a personally meaningful experience; they reported having enjoyed the process and hoped to be able to join into similar group in the future. The research shows that the most important function of poetry therapy is to raise hope and improve the feeling of self-worth. The most meaningful aspects of poetry therapy according to the participants are writing in a safe group, regular meetings, and the chance to interact with others.

Poetry therapy produced strong, out of the ordinary experiences for the participants. Open interaction worked as a process support, improving the group's ability to socialize, feel a zest for life and clarify their future hopes. Active emotional exploration and the opportunity for artistic self-expression positively affected their spirit, as their mood and self-esteem improved during the year. The group also enabled them to build new personal relationships. This creative stimulus contributed to other areas of their lives too; they reported an enhancement of their relationships, studies and other artistic hobbies.

CONCLUSION

Poetry therapy can thus be viewed as a comprehensive form of rehabilitation, involving aspects of general well-being. Its special features are a strong experiential quality and the meaningful moments produced by the collaborative and creative work. The most important differences between poetry therapy and traditional psychotherapy is that in poetry therapy writing can be used as a communication channel, and metaphorical language offers a certain protection that enables dealing with painful experiences and thoughts. Another important aspect seems to be group writing. Group writing promotes the feeling that one is able to share, be heard and see oneself from new angles. Poetic expression enables empathetic interpretation.

Poetry therapy is suitable as support for mental health rehabilitation alongside other creative or cognitive therapies. People can benefit from it in rehabilitation homes and day centers, for example. It could also be used in family therapy. One can continue writing and reading individually after the group sessions have ended, so the therapeutic effects may be long lasting.

RESEARCH SUGGESTIONS FOR THE FUTURE

Further interesting subjects also arise on the basis of my research, such as the use of poetry therapy for the prevention of psychosis. While metaphors serve a central purpose in poetry therapy and their use is therefore encouraged, metaphors are also used naturally by clients who seek urgent help and are met at the receptive environment offered by Open Dialogue – the most effective method for the prevention of chronic psychosis

in the western world according to Mackler, (2011). Additionally, in a psychotic state, words may provoke unusual images and emotional content that could be better understood in a poetry therapy context, provided the correct framework is found. This would enable a deeper and more empathetic interpretation revealing essential, otherwise intangible information about the client and beyond.

Translated by **Jose M Kähmi** in collaboration with author.

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Karoliina Kähmi (PhD) is a trained poetry therapy instructor and a researcher at the Department of Arts and Culture, University of Jyväskylä, Finland. Subject of her thesis is: *Writing is a road to me, from me to you." Group writing and the meaning of metaphors in poetry therapy for psychosis* (2015).