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# Toward alternative theories of poetry therapy.

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TOWARD ALTERNATIVE THEORIES OF  
POETRY THERAPY

A Dissertation

By

JUDITH PUTZEL

Submitted to the Graduate School of the University of Massachusetts  
in partial fulfillment of the requirements of the  
degree of

DOCTOR OF EDUCATION

May 1975

Major Interest: Counseling

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TOWARD ALTERNATIVE THEORIES OF  
POETRY THERAPY

A Dissertation Presented

By

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## ACKNOWLEDGEMENTS

To you who have witnessed me righting myself by writing myself:

"People see me as composing a poem  
but  
I am really composing myself."

My thanks to C. G. Jung whose message I am playing out:

"My life has been in a sense the quintessence of what  
I have written, not the other way around."

This dissertation is but another chapter in my life. I am writing my own book as I live it; I am asserting my own author-ity. What the next chapter will be, I cannot say. But that you have stayed with me during the rough drafts of me and this chapter has meant a lot to me. At times I have felt like:

"It seems very pretty," she said when she had finished,  
"but it's rather hard to understand!" (You see she didn't  
like to confess, even to herself, that she couldn't make  
it out at all.) "Somehow it seems to fill my head with  
ideas--only I don't know what they are!"

Alice in Wonderland

Thank you for your patience, trust and love.

First, I would like to thank Patricia McNally for her early words which drew me towards her:

"because many of my words seem like husks around the  
seeds that were dancing inside of me."

She has perhaps taught me more than any one person over the past year.

Enclosures crumble  
I hear someone calling me  
My heart cocks like a doe in winter  
attention!  
my mind is still asking questions,  
still seeking answers.  
my heart knows: I am the question.  
I am the answer."

PAM

And my committee:

To Jack Wideman

"I celebrate myself, and sing myself,  
And what I assume, you shall assume,  
For every atom belonging to me as good belongs to you."  
(Walt Whitman)

who has suffered with me, and against me, who has modeled a style of  
counseling and being that has nourished me, who has helped me see that Jung  
agrees with me, and who believes that everyone's theory or therapy is an  
autobiographical statement of who he is.

To Ken Blanchard

"It all depends upon  
trusting  
silence  
  
and  
  
laughing  
because  
It must be said." (Sam Keen)

for his friendship, trust and low-low profile as chairman of my committee.

To Dick Conville

"When I use the word," Humpty Dumpty said, in a rather scornful tone, "It means just what I choose it to mean. Neither more nor less."

"The question is," said Alice, "whether you can make words mean so many different things."

"The question is," said Humpty Dumpty, "who is to be master. That is all." (Alice in Wonderland)

for his close readings, hours of anguish, battles, and perseverance. My dissertation is that much better for his being on my committee.

To Susan Campbell

"To be a person is to have a story to tell. We become grounded in the present when we color in the outlines of the past and the future. Mythology can add perspective and excitement to your life. Within each of us there is a tribe with a complete cycle of legends and dances, songs to be sung. We were all born into rich mythical lives: we need only to claim the stories that are our birthright." (Sam Keen)

who has helped me value my own story, has witnessed many chapters, has encouraged my mythical lives, has patiently listened to me sing my song, however croaky the voice, and who has helped me claim my own author-ity and the novel-ty in my birthright.

And finally, to Jack Monks

"A faithful friend is a strong defense,  
And he that hath found such hath found a treasure.  
Change not thy friend for any good thing.  
A faithful friend is the medicine of life." (Ecclesiastes)

"When a man chooses to reveal himself to a friend, the friend is made witness to a spectacle of growth, like the birth of a child or the unfolding of a flower. There is an unfolding out of darkness into light; there is the revelation of a hidden life, which, if it is to develop, needs air and sun and a careful nurture. If the flower does not unfold, it withers and dies in bud, and drops from the stem. If a man does not reveal himself, his spirit dies like a worm-eaten bud. However, one must be patient and not ask to see all the growth at once. First the small shoot pushes up timidly to the sun, then another appears, and the stalk grows strongly into bud and blossom and fruit." (Morris West, The Ambassadors)

for the poetry I have written since I have known him, for fielding the mis-directed anxieties of the writing of this dissertation, and for being my friend.

- - - - -

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TOWARDS ALTERNATIVE THEORIES OF POETRY THERAPY  
(May 1975)

Judith Putzel

Directed by: Dr. Kenneth H. Blanchard

ABSTRACT

The focus of this dissertation is on the use of poetry as a therapeutic technique in the therapy relationship. This is a descriptive study synthesizing and drawing together historical, anthropological, theoretical and practical foundations of Poetry Therapy.

Before man turned to a therapist for help, he turned to poetry. The dissertation looks at preinstitutionalized examples where expression via language and song had healing effects. The sources for the discussion on feelings and language are primitive sources, literary and philosophical sources, and anthropological sources.

The professionalized theoretical and practical foundations of Poetry Therapy are discussed from three perspectives: Freudian, Jungian, and Humanistic (Gestalt). The concepts of the process of writing a poem is distinguished from the orientation and emphasis of writing the product of a poem. The argument is made that poems should not be criticized, for it is difficult for many patients/writers/people to distinguish criticism of their poem from criticism of themselves.

A review of the literature differentiates hard-data research from observational research which explores the dynamics and make-up of Poetry Therapy groups.

A major premise of the dissertation is that in every person there is an inherent poetic ability. The poets, known and unknown, speak to the therapeutic effects of poetry and writing on their lives.

What a Poetry Therapy group is and how it functions are explored in relation to psychotherapy as an adjunct therapy and as a therapy in its own right. The process (the emphasis on writing, reading, or both writing and reading poetry), the structures (size of groups, settings of groups, and the length of groups), and the dynamics (clear contracting and ways of working with a poem) of Poetry Therapy groups are discussed.

The role of the Poetry Therapist is discussed. Poetry Therapists are often lecturers or poets, people who consider Poetry Therapy as an adjunct therapy, or people trained in psychotherapy who consider Poetry Therapy as a therapy in its own right. A program for training on the graduate and undergraduate levels is presented, and the certification process for becoming a Certified Poetry Therapist is explained.

The author explicates her own theory of Poetry Therapy and discusses a five day design illustrating the application of her humanistic approach. This she bases on assumptions about the nature of man, the nature of groups, the role of the therapist, and assumptions about Poetry Therapy groups and how a poem

functions in Poetry Therapy. Her orientation is in encouraging and implementing the writings of patients involved in the group rather than on relying on the writings of better "known" poets. She provides exercises and alternative exercises with rationales behind why and when she suggests using them.

## CHAPTER ONE

### INTRODUCTION

#### PURPOSE

The author wishes to build a theoretical foundation to show that both the reading and writing of one's own experience in a poetic and oftentimes metaphoric mode enhances personal growth and has therapeutic results for the individual whether in a group context or an individual counseling session.

This is essentially a descriptive study, synthesizing and drawing together much of the historical, anthropological, theoretical and practical foundations of what has already been written in the field. In addition, she explicates her own theory of why Poetry Therapy effects personal growth, focusing on the areas of self-awareness, expression and communication.

The focus of this dissertation is on the use of poetry as a therapeutic technique in the therapy/counseling relationship. Two different processes, both of which are used in Poetry Therapy groups are meant by "use of poetry": (1) the use of other people's poetry as a beginning point for patients to become aware of their own feelings; and (2) the use of one's own poetry to express and communicate feelings.

The author's purpose is to define the many dimensions of Poetry Therapy when no such statement has been made explicitly. This dissertation could be considered a handbook for people interested in and working with



Poetry Therapy. For people interested in practical applications and use of poetry in groups, there are chapters which explicate what goes on in Poetry Therapy groups, how a poetry therapist functions, and how to use poetry in such contexts. For people interested in theoretical, historical and anthropological foundations, there are chapters which are more abstract. Although these two orientations may be considered separate and appeal to entirely different audiences, it is the author's firm belief that the theoretician should respect those involved in the application of Poetry Therapy and that the person applying Poetry Therapy should respect the theoretician.

#### STATEMENT OF THE PROBLEM

(1) There is no one source which deals explicitly with the theory, historical and anthropological foundations, and practical applications of Poetry Therapy. As a result, in order to gain an overall perspective of Poetry Therapy, one would have to search out many articles from journals and periodicals. For the person interested in the how's and why's of Poetry Therapy, there is no one source which provides such explicit information.

The major books in the field, Poetry Therapy and Poetry the Healer, are each a series of articles edited by Jack Leedy. They are accounts of singular applications, written by those involved--accounts relating, after the fact, what took place in a variety of settings (hospital, community clinics, drug centers, drop in centers, nursing homes, schools, and colleges). For the most part they are observational research rather than the formulation of

an explicit theory of Poetry Therapy. The articles are written by people with a variety of backgrounds (psychiatrists, psychologists, social workers, teachers, librarians, poets, nurses). The results and suggestions for further applications in these two books and in journal articles are repetitive in scope. Rarely in any one article are there accounts of underlying assumptions and hypotheses, pre-group testing, accounts of the process, results, and post-group testing. As a result, the reader sees THAT Poetry Therapy works but HOW the process takes place and WHY the results are achieved are much harder to substantiate.

(2) Most of the literature in the field is based on the reading of poetry rather than on the writing of poetry. Groups oftentimes use known poetry as a jumping off point for the expression of feelings. Therefore, a first impression of a Poetry Therapy group might easily be that emphasis is on the reading of other people's poetry. That there are two substantially different--yet related--approaches to Poetry Therapy is not obvious in most articles. Little has been written about the use of writing as a therapeutic outlet. Both are valid and effective modes of using poetry to facilitate expression and communication. It is not the author's purpose to argue for one mode over the other, although her preferred orientation is towards the writing of poetry. It is not her intention in this dissertation to invalidate the effectiveness of reading poetry in groups.

(3) When theoretical background is referred to at all, most of the early literature in the field is psychoanalytically grounded. More recent applications of Poetry Therapy include humanistic concepts. There is no one source which explicitly talks about these different orientations and how both are being used, and modified, and where they complement each other in Poetry Therapy groups. There is a need for such a source which will pull together, describe and define the many aspects of Poetry Therapy.

Therefore, the problem is to set side by side in one source: the abstract theoretical foundations along with the more concrete applications, the preference for the use of reading along with the preference for the use of writing, and the psychoanalytic grounding along with the humanistic grounding.

### SIGNIFICANCE

The significance of this dissertation is threefold. First, to draw attention to the field of Poetry Therapy as a legitimate therapy. Second, to provide one source which consolidates theories and applications of Poetry Therapy and to which practitioners and professionals can turn. Third, to expand on what has been written.

### AUTHOR'S PERSPECTIVE

The author's preferred orientation towards counseling and therapy is "humanistic." While she has great respect for psychoanalytic grounding,



she prefers an interpersonal and existentially oriented therapy. Her intention in this dissertation is not to critique the analytic grounding but rather to review and build on that foundation. With this context in mind, she develops her own humanistic theory of Poetry Therapy.

As she reviewed the literature, she found very little written specifically by or for humanistic psychologists who want to use poetry in their counseling/therapy professions. English teachers and non-psychology oriented people are the closest that come to this. In fact, initially she was overwhelmed by the vast amount of literature and related literature written by psychoanalytically grounded professionals. The fact that little has been written by and for humanists could simply represent the difference between the objective hard-data emphasis of the psychoanalytic movement and their more subjective, involved, action oriented modeling. However, the wealth and vastness of the theories explored by Freud and his followers cannot go unappreciated in helping to build important foundations for future theoretical and practical applications in the growing field of Poetry Therapy. The humanists thus help shift the dynamics of the therapy/counseling relationship from the passive projection screen orientation to a more active inter-change where the therapist/counselor models a behavior which is coherent with his view of the nature of man.

This is visible through a distinct difference in styles. The psychiatrist is more a resource person bringing poetry to the patient, spending much

time analyzing and interpreting the patient's inter-action and re-action to the poem. He maintains the more traditional professional distance of the therapist. The more humanistically oriented (here and now oriented) counselor, however, models an involvement and excitement with both the client and the poem. An example of this is the simple fact that many humanistic poetry therapists participate in the groups themselves as members and insist on being called by their first names. They also contribute and read their own poetry, often written to members of their group.

#### DEFINITIONS

(1) POETRY: The author does not see poetry as limited by metered lines, rhyming words, and rhythmic phrases all put together with a consciousness of style and form. Although style and form can be a part of whatever piece of writing emerges, they are not preoccupations of the writer and therefore do not interfere with completely free expression emerging from the process of writing.

The term "poetry" is used as the language and expression of one's own being, the speaking of the Self, from a place within an individual. Poetry (the Eskimo word meaning 'breath of soul') reaches down to man's very nature. As Edwin Arlington Robinson said: "Poetry is a language that tells us, through a more or less emotional reaction, something that cannot be said." (Perring, L. "The Untranslatable Language," English Journal,

60:54-61, Jan. 1971) It is the voice from within that, on a spiritual level, is spokesman for the "isness" of being, the "isness" of becoming, that place within where man is "one" and/or is struggling with that "oneness" and "isness." Poetry as such is a "depth ontology." (Ibid.)

The emphasis of this view of poetry is different from the more traditional view where the poet writes for an audience (other than himself). Poetry, as the term is used, is less a craft or an art intended to communicate something but more a process expressing somebeing or somebecoming. Poetry is a vehicle for a person to get in touch with that which is ex-static, outside of the static; it is a process of discovering that there is something infinite within, a great realm of possibility and flux that constitutes life from moment to moment. The mood of such poetry might be considered to be the mood of "perhaps" and "possibility" and "as if." Within this mood, the poetic word describes not the world of thingness and objects and products but is ambiguous and admits of many definitions. This allusive and elusive and illusive quality is essential to poetry as it is and is a manifestation of man's eternal struggle to define himself and his world.

Two aspects to emphasize in the use of the term "poetry" are "expression" and "communication." Without saying that communication is unimportant, the author wants to underscore how important expression is. You cannot communicate what you cannot express, and precisely because communication is so important, expression is absolutely primary. Much of

this dissertation refers to expression, becoming aware of feelings, and becoming able to get them out and express them. Hence, the expression and communication of feelings through poetry is important in the therapeutic process.

(2) POETRY THERAPY: "Poetry Therapy" is a technique involved in one-to-one or group settings where poetry is used as a vehicle to facilitate the expression and communication of feelings. Poetry is used as a vehicle in two major ways--the reading of poetry (other people's) and the writing and sharing of poetry (one's own). In some groups one or the other orientation is used; in other groups reading is combined with writing to facilitate growth, awareness and change. Poetry is also used in combination with movement, music, clay, art and other expressive media.

Throughout much of the literature, Poetry Therapy is considered a technique adjunctive to other therapies. This means that a Poetry Therapy group is not the only therapy that an individual is in. In addition he could be in individual or group therapy, or have an equivalent counseling relationship. Here he could take the "expression" of the Poetry Therapy group and gain further insight into how that expression fits into his entire life at that time. Expression in and of itself is not the only goal of therapy; in groups where Poetry Therapy is considered an adjunctive technique, expression is one of the prime goals of Poetry Therapy.

Many social workers, librarians and English teachers, and others



without therapeutic training, take the above view that Poetry Therapy is an adjunct therapy to be used as a place to express but not a place to work through feelings. It is understandable that such professionals would view Poetry Therapy as adjunctive, for they may not consider themselves as qualified to really assist in the working through of potentially heavy feelings. However, it is surprising that many psychologists and psychoanalysts also consider Poetry Therapy as supplementary to ongoing therapy, for these therapists have the professional training and apply that training in the patient's ongoing therapy.

The author's orientation towards Poetry Therapy is that therapy can and does occur in Poetry Therapy groups. Poetry Therapy should not be considered an adjunct therapy. Where the therapist considers himself competent to deal with the therapy involved in such groups, he should do it. The therapist facilitates many processes which are therapeutic: awareness, expression, communication, discovery, appreciation--and integration. Poetry Therapy thus becomes therapy in its own right.

Poetry Therapy provides a means for a person to begin talking about himself; it is a means through which a person can objectify his feelings (if need be) and talk about them as outside of himself. Through the process of reading and writing poetry, a person can gain a sense of control over feelings which oftentimes seem to control him. He can express chaos within, without being overcome by it. Through sharing one's own feelings via poetry and by

reading the poetry of better known poets, individuals come to realize that what seem like unique and lonely feelings are shared by others and are basic to the human condition. By becoming familiar with poets who have written from their personal distresses, individuals are given models of people who have gotten themselves out of the seeming mire of deep feelings. These are but some of the elements responsible for the processes of growth and change as seen in Poetry Therapy.

(3) THERAPY/COUNSELING: "Therapy/counseling" is difficult to define for there are so many different therapies each with its own uniqueness.

The author especially likes the following definition:

The word 'therapy' is used instead of treatment because of its derivation and in my feeling about the word, there is not so much implication of manipulation of one person by another. To treat, according to the dictionary, is to apply a process to someone or something. The word 'therapy' has no verb in English, for which I am grateful; it cannot do anything to anybody, hence can better represent a process going on, observed perhaps, understood perhaps, assisted perhaps, but not applied. The Greek noun from which therapy is derived means 'a servant', the verb means 'to wait'. I wish to use the English word 'therapy' with the full force of its derivation, to cover a process which we recognize as somehow and somewhat curative but which, if we are honest enough and brave enough, we must admit to be beyond our control. (Taft, J. Dynamics of Therapy in a Controlled Relationship, p. 3)

The therapy/counseling relationship is one in which there is primarily a verbal interaction between the therapist and patient. In this interaction

feelings are expressed through language for the intended outcomes of insight and personal growth and self-awareness.

(4) THERAPIST-PATIENT: The author wishes to borrow again from Jessie Taft and use her notion of therapist as "servant." The therapist "serves" and attends to his client, the patient. He observes perhaps, understands perhaps, assists perhaps--but does not apply anything to anyone. The patient, or client, is the person with the presenting problem.

In writing about the poetry therapist the author is faced with a dilemma, for other people refer to therapist in other ways. Psychoanalytically grounded writers speak in terms of "therapist-patient," and "sickness-health"--from her humanistic orientation she finds this outlook to be one which perpetuates a one-up-one-down sick vs. well dichotomy. Even the less severe "counselor-client" differentiation at times seems out of place because frequently the counselor is but a step ahead of the client, enjoying and growing with poems. Even "teacher-student" or in the older sense of the words "teacher-disciple" are dissatisfying. The dilemma is how to refer to these (basically) two categories of people. Most of the literature, being written by psychoanalytically grounded people, uses "therapist-patient." Going to an extreme, the author is tempted to refer to "facilitator-resource" and "client" or "person," but these seem out of place also. She is grateful to Jessie Taft for her use of the word therapist as a servant, for she shares her view. Alternatives for the terms are cordially invited, for although she may serve as "therapist," she

is "patient" as well and finds poetry as therapeutic for herself as for those with whom she works.

### GUIDE TO THE READER

Before laying out an overview of the dissertation, a few things may help guide and focus the reader on areas of interest. The first half of the dissertation (chapters II-V) deals on a more abstract level; the second half of the dissertation (chapters VI-VIII) deals on a more concrete level. Theoreticians and professionals who are already using Poetry Therapy may be more interested in the roots and foundations for Poetry Therapy. They should turn to the first half. Non-professional audiences and people who have never heard of Poetry Therapy may find it more useful to by-pass the early theoretical pages where a Review of Literature and overview of the research in the field are included and go directly to the second half of the dissertation where Poetry Therapy is more clearly spelled out in terms of What it is, Who does it, and What goes on in a Poetry Therapy group. If the two audiences are in fact different, it is hoped that each will browse through the other half of the dissertation as well. For the work is a whole--pulling together theory and application. Although the second half of the dissertation might be a book in itself entitled Introduction to Poetry Therapy, if the reader wants a complete view of Poetry Therapy the first half cannot be overlooked. With these guidelines in mind, wend your own way, and read what you want to read in whatever order you want to read it.



## OVERVIEW

Chapter One sets forth the purpose--to build a theoretical foundation for the use of poetry in therapy. Three specific problems are mentioned: first, that there is no one source which deals explicitly with theory, historical and anthropological foundations and practical applications of Poetry Therapy; second, that most of the literature talks about the reading of poetry as facilitating expression rather than the writing of poetry; and finally that most of the literature is psychoanalytically rather than humanistically grounded. The significance of the dissertation is also threefold: first, to draw attention to the field of Poetry Therapy; second, to provide one source which consolidates theories and applications of Poetry Therapy to which practitioners and professionals can turn; and finally, to expand the existent literature to include the writing of poetry as facilitating the expression of feeling. In author's perspective a humanistic orientation, which is basically interpersonal and existential is shared by the author. She defines several important terms: poetry, poetry therapy, therapy/counseling, therapist-patient. She gives a brief guide to the reader. And finally she includes an overview of the entire dissertation.

Chapter Two: Poetry and the Self: Historical and Anthropological Perspectives on Poetry as Therapy. This chapter takes an historical look at poetry and its relationship to man. Before he turned to a therapist for help, man turned to poetry.

Chapter Three: Poetry and the Self: Theoretical and Practical Foundations for the Use of Poetry in Therapy. This chapter looks at Poetry Therapy foundations from three major perspectives: Freudian, Jungian and Humanistic (more specifically Gestalt). There are many such perspectives, but the focus will be on these three. It is important to add that others have addressed themselves to poetry and to the poets. Specific writings by Freud, Jung and Perls relating to poetry are briefly summarized. The author then gives a general sense of how each therapist might use Poetry Therapy--"might" because we do not know specifically.

Chapter Four: Poetry and the Self: Research in the Field of Poetry Therapy--Review of the Literature. This chapter reviews the literature in the field. Experiential research where pre- and post- tests were administered (there is little of this) is distinguished from more observational research where people have conducted Poetry Therapy groups, described them and written them up after the fact.

Chapter Five: Poetry and the Self: What the Poets--Known and Unknown--Say of Poetry. Having explored what others have to say of man's relationship to poetry, the author then turns to the poets themselves and hears what they have to say of themselves and their art. This chapter quotes both known and unknown poets--for we are all poets, whether we are published and recognized or not.

Chapter Six: The Poetry Therapy Group: What It Is and How It

Functions. This chapter looks at the dynamics of a Poetry Therapy group. The reader with little understanding of what Poetry Therapy is should turn to this chapter first.

Chapter Seven: The Poetry Therapist. This chapter looks at the functions and responsibilities of the Poetry Therapist, the training required of Poetry Therapists, and the process required to become a Certified Poetry Therapist.

Chapter Eight: Towards A Humanistic Theory of Poetry Therapy.

This chapter pulls together the author's own theory of Poetry Therapy. Having read extensively and having conducted Poetry Therapy groups over the past few years, she has evolved an implicit theory. This is an effort to make that theory explicit.

## CHAPTER TWO

### POETRY AND THE SELF: HISTORICAL AND ANTHROPOLOGICAL PERSPECTIVES ON FEELINGS AND LANGUAGE

#### INTRODUCTION

The following pages look at Poetry and the Self from several perspectives. The author begins here by drawing from pre-institutionalized therapy in history and anthropology, then moves on to more professionalized theoretical and practical foundations, then takes a look at the research in the field, and finally turns to the poets themselves to hear what they have to say about the relationship of Poetry and the Self.

The author's intention is to show how very essential poetry as an expression of feelings has been in the life of man. Before he turned to a therapist for help, man turned to poetry. He valued the "therapeutic" and healing value of such expression. Poetry pre-dates therapy. The use of poetry is in the very nature of man. This chapter will explore what it is in the nature of man that naturally desires and creates poetry for personal meaning and therapy. History and anthropology are two areas from which the author will draw major building blocks to establish a foundation for the use of poetry as therapy. Man has always turned to poetry. Let us look at some of the areas in which this is evident.

## FEELINGS AND LANGUAGE: PRIMITIVE SOURCES

Feelings and language are two basic ingredients of both poetry and psychotherapy. Because it is central to man's life, his expression and his communication, it is interesting to look at the role language plays in the historical perspective of the use of poetry in therapy and healing. Language distinguishes man from other animals. In beginning to look at language we have to ask what it is in language which is so basic to life. Language is man's unique tool to form relationships with other men. He can communicate. The study of linguistics will also show us that language has some inherent qualities which cross specific cultural barriers and are universal.

The earliest value of poetic language in medicine was through the universal language of rhythm. (Meerloo, Joost A.M. "The Universal Language of Rhythm," in Poetry Therapy.) The tidal rhythm, the cyclic nature of the moon, the rhythm of the heartbeat--all of these were natural phenomena around which primitive man learned to regulate his life. (It is interesting to note that the word rhythm is derived from rheein, meaning to flow.)

This inherent tendency towards rhythm, and hence music, can be seen in cultures more advanced than primitive man. It can be seen in Egyptian incantations and spoken charms. (Bottone, Anthony, "Poetry in Medecine," New Physician, July, 1971) It can be seen with the Greeks who, possessed of an intuitive wisdom, recognized the rhythmic healing power of poetic language. They worshipped Apollo, dual god of medicine and poetry. Apollo was also god of Truth. In ancient Greek many terms which were poetic had dual



meanings. The epode, a form of lyrical (the lyre was a musical instrument given to Apollo by Hermes) poem, comes from a word which means a charm or song sung to lull pain and heal sickness. Here again is a link between poetry and healing involving rhythm. Paeon is a hymn of joy usually sung to Apollo in thanks for victory or at the end of a great plague. The Greeks, realizing the healing power of the language of song, noted that "The sick man is a sick man's charmer." (Burnside, "Nurse-Patient Relationship," Nursing Forum, vol. 8, p. 326) They revered the healing power of chanting. This can be seen today by the many more contemporary poets who wrote about their maladies: Robert Lowell, Ann Sexton, Theodore Roethke, Sylvia Plath, Emily Dickinson, John Keats, Percy Bysshe Shelley, Paul Verlaine. Like the Greeks, these poets, and many others, intuitively grasped the two ingredients which are basic to both poetry and therapy: feelings and language. They, like the Greeks, sang of their own experience.

Like the duality of many Greek words which link poetry to healing, the Eskimo word for "to make poetry" is also the word for "to breathe." It is a form of the word anerca, the soul, that which is eternal, the breath of life. Poems are words infused with spirit. "Let me breath of it," says the poet maker. "One has put his poem in order on the threshold of his tongue." Another Eskimo said, "My breath--that is what I call this song. . . for it is just as necessary to me to sing it as it is to breath." He added, "Songs are thoughts, sung out with the breath when people are moved by great forces and

ordinary speech no longer suffices." (Lewis, Richard, I Breath a New Song, 1971) The Eskimo language makes little distinction between nouns and verbs, all words are forms of the verb "to be," which itself is lacking in the Eskimo language. Stress here is placed on the process of being rather than on a more static specific existence of a "noun." That is, all words proclaim in themselves their own existence. Also in the Eskimo culture, a poem is part of the process of living. Poems, for the Eskimo, are created, they are not preserved. However, there is no word "create" in Eskimo--only the word "to work on." Again, stress on process of creating rather than product to be preserved. Words, for the Eskimo poet, are like the knife of a carver: they free an idea from the bonds of its formlessness. This is an excellent example of how much of existence can be inherent in words. Almost all poems are accompanied by music, and only on rare occasions are poems recited without musical rhythm and accompaniment. These examples from Eskimo culture are but a few examples of how central to the process of living are music and poetry.

#### FEELINGS AND LANGUAGE: SOME LITERARY AND PHILOSOPHICAL SOURCES

The Bible is an excellent source where feelings and language are combined. Joseph Gelberman and Dorothy Kobak address themselves to this topic in their chapter "The Psalms as Psychological and Allegorical Poems" in Poetry Therapy. They say that the Psalm was devised to express truth and experience on a feeling level rather than on an intellectual level.

The Psalms are thoroughly human documents, reflecting the difficulties of existence, the struggle to remain faithful to ideals, the overcoming of doubt, the fight for victory of the better self, and the conquest of despair. Essentially the Psalmist is asking "Who am I?", "What is the meaning of life?" "What are good and evil?", "How can I understand suffering?", "What is my purpose?" and "How can I fulfill myself?" The Psalm, Gelberman and Kobak add, is a versatile ancillary to therapy in that it has applicability to the clinical process (1) when used to create an emotional climate divorced from prior or later intellectual insights, (2) when an identification on a personal or cosmic level with individual and universal suffering can be captured with a similar catharsis reexperienced vicariously, (3) when the inspirational impact on striving towards the goal of "victory" has been stimulated by the attraction towards the positive assurance that initiates and completes the Psalm.

In addition to the Psalms, Ecclesiastes is another rich poetic source:

For everything there is a season, and a time for  
every matter under heaven;  
a time to be born, and a time to die;  
a time to plant, and a time to pluck up what is planted;  
a time to kill, and a time to heal;  
a time to break down, and a time to build up;  
a time to weep, and a time to laugh;  
a time to mourn, and a time to dance;  
a time to cast away stones, and a time to gather stones together;  
a time to embrace, and a time to refrain from embracing;  
a time to seek, and a time to lose;  
a time to keep, and a time to cast away;  
a time to rend, and a time to sew;  
a time to keep silence, and a time to speak;  
a time to love, and a time to hate;  
a time for war, and a time for peace.



Similar Biblical references are evident in more contemporary works like

Kahlil Gibran's lines:

Yet the timelessness in you is aware of life's timelessness,  
And knows that yesterday is but today's memory  
and tomorrow is today's dream.

(The Prophet, 1952, pp. 70-71)

Aristotle ranks the poet high as physician to the psyche. In his Poetics, he characterizes poetic drama as a potent force not only for the purgation of suppressed and undesirable feelings but as a valuable instrument for the development of insight. He also says, "The greatest gift by far is to have a gift for metaphor. . . . it is the mark of genius."

Plato is probably one of the earliest philosophers to consider the nature of poetic creation. In Ion he speaks of "divine madness":

For the poet is a light and winged and holy thing, and there is no invention in him until he has been inspired and is out of his senses and the mind is no longer in him; when he has not attained to this state, he is powerless and is unable to utter his oracles. Many are the noble words in which poets speak concerning the actions of men; but like yourself (Ion) when speaking about Homer, they do not speak of them by any rules of art: They are simply inspired to utter that to which the Muse impels them, and that only; and when inspired, one of them will make dithyrambs, another hymns of praise, another choral strains, another epic or iambic verse--and he who is good at one is not good at any other kind of verse: for not by art does the poet sing, but by power divine. [emphasis mine] Had he learned by rules of art, he would have known how to speak not of one theme only, but of all; and therefore God takes away the minds of poets, and uses them as his ministers, as he also uses diviners and holy prophets, in order that we who hear them may know them to be speaking not of themselves

who utter these priceless words in a state of unconsciousness, but that God himself is the speaker, and that through them he is conversing with us.

Distrusting the poet's 'irrationality', his out of his mindness (again language is important, for the 'lunatic,' whose mind God has taken away, is related to the natural rhythmic flow of the moon-la lune.) Plato excludes him from his Republic, where reason ruled.

Nietsche, in The Will to Power picks up where Plato left off and develops the notion of the Dionysian principle in the creation of poetry. This principle consists of an infusion of demonic frenzy, an intense inspiratory phenomenon. The term 'inspiration' refers to an intrinsically dramatic experience. More than the sudden cognizance of a good idea, the term literally refers to the act of breathing (again, this reminds us of the Eskimo breath of soul) and the implication that what is inspired or taken in sustains or imbues life, is inextricably bound into its meaning. Suddenness, breakthrough, impulse to action and associated transient emotional relief are all, to some extent, components of the experience.

#### FEELINGS AND LANGUAGE: ANTHROPOLOGICAL SOURCES

There are further examples which illustrate the inherent link of feelings and language to the process of healing. The Eskimo use of poetry is similar in many ways to many primitives. Since preliterate times, poetry has been used to deal with pathogenic emotional states. This can be seen in

spells, incantations and invocations, often taking the form of poetry. Take for example the Delphic oracle, where the priestess prescribes action in the form of poetry. Even today in primitive societies, shamans, kin to the earliest psychiatrists, continue the tradition. ('Shamans, Witch Doctors, Medicine Men and Poetry', in Poetry the Healer.)

The National Institutes of Mental Health now sponsors a program for the training of medicine men. A trainee has to memorize hundreds of songs and chants until he knows them perfectly and has mastered the nuances of their healing symbolism. (Ibid.)

William Trask takes an extensive look at the role "song" plays in the life of primitive man. (The Unwritten Song, 1966, vol. i, pp. x-xiii.) He notes that poems are almost always sung, again like the present day Eskimo. Many are sung to relieve personal grief, impotence, or simply being tired. Composers of such songs are professional or simply anyone desiring to compose and express himself. Trask looks at many cultures and their unique ways of using poetry. American Indians, Indian Indians, and Iranian Venidads all distinguish three ways of overcoming disease: surgery, medicine and the spell. Their strongest belief is that the man healed by the "word" is more effectively cured than a man treated by either surgery or medicine.

C. M. Bowra (Primitive Song, 1962, pp. 26, 52, 282-6) sees enchantment in the words of primitive songs, since the power of words renews the singer's and hearer's will to resist the malevolent universe which is

incessantly threatening his well-being. And shamans, witch doctors, wizards and medicine men believe that all disease has a psychic phase; hence they try to remove the traumatizing cause from the patient's mind. (Eliade, M. From Primitive to Zen, 1967, pp. xix, 24-25, 30).

The American Navajo also believes strongly in the curative power of songs, fear of illness being their most dominant fear. Although curing ceremonials are focused on one or more patients, anyone attending such ceremonials benefits from the proceedings. Similar proceedings are true for other tribes: Apache, Creek, Cheyenne, Choctaws, Chippewas, Pueblo, and Dakota. Each has its own ceremonial ritual, each has its own way to fight evil spirits. A Yakut shaman, for example, has a poetic vocabulary of 12,000 words--three times as many words as are known by the rest of the community. (Lippert, J. The Evolution of Culture, 1931, p. 601)

Throughout the world and throughout history, from Malaya, to Nigeria, to the Aborigines in Australia, verse and song have helped peoples in distress get through emotional hard times. An example closer to home, during the war, Japanese Americans at Tuli Lake Relocation Center avoided depression by composing forms of haiku. To both composer and hearer, the Senryu poetry was a refuge and an instrument in community expression.

Although the Greeks may have been some of the earliest to put together verse and healing, as far back as the tenth century an Arabic physician and teacher put an entire medical compendium into verse. (Bottone, Anthony, "Poetry in Medicine," The New Physician, July, 1971)



## POETRY IN THEORY

As discussed above, it is easier to find therapy in poetry than to find poetry in therapy. Yet there is much poetry around us if we but learn to really look for it, see it--and appreciate it. Much of the theoretics involved in psychology, psychiatry and medicine in general, is poetic. Take, for example, the haiku poetry of medical texts:

"Spiritual Cirrhosis"

A relationship collapses  
Forcing individuals together  
New persons arise.

"This poem sums up the necrosis, subsequent fibrosis, and the regeneration of pseudo-lobuls that characterizes hepatic cirrhosis." (Burnside, "Nurse Patient Relationship," Nursing Forum, vol. 8, p. 326) The meaning of the above definition is secondary to its rhythm and meter. Or take Freud's definition of kissing:

One special form of contact  
which consists of mutual approximation  
of the mucous membranes of the lips in this kiss,  
has received a sexual value  
among civilized nations,  
though these parts of the body  
do not belong to the sexual apparatus  
and merely form the entrance  
to the digestive tract. (Ibid.)

## DOCTOR AND POET: THE SAME PERSON

More recently, the Apollonian influence, the connection between the god of healing and the god of poetry, shines around us. The doctor and the



poet are one and the same person. William Carlos Williams, well known as a poet, has two professions. In his autobiography he complains that most people "do not grasp that one occupation complements the other, that they are two parts of a whole, that it is not two jobs at all, that one rests the man when the other fatigues him." Much of Williams' writing is poetic:

With my left hand steering the child's head, I used my ungloved right hand outside on her bare abdomen to press upon the fundus. The woman and I then got to work. Her two hands grabbed me at first a little timidly about the right wrist and fore-arm. Go ahead, I said. Pull hard. I welcomed the feel of her hands and the strong pull. It quieted me in the way the whole house had quieted me all night.

This woman in her present condition would have seemed repulsive to me ten years ago--now, poor soul, I see her to be clean as a cow that calves. The flesh of my arm lay against the flesh of her knee gratefully. It was I who was being comforted and soothed. (The Farmer's Daughter, p. 142)

Williams is facile in incorporating his expressive abilities with his medical expertise; he has an ability to see his world of medicine with poetic eyes:

Do we not see that we are inarticulate? That is what defeats us. It is our inability to communicate to another how we are locked within ourselves, unable to say the simplest thing of importance to one another, any of us. . . that makes our lives like those of a litter of kittens in a wood pile. . . . That gives the physician. . . his opportunity. . . . The girl who comes to me breathless, staggering into my office, in her underwear a still breathing infant, asking me to lock her mother out of the room; the man whose mind is gone--all of them finally say the same thing. And then a new meaning begins to intervene. For under that language

to which we have been listening all our lives a new, a more profound language, underlying all the dialectics offers itself. It is what they call poetry. That is the final phase." ("William Carlos Williams-- Poet and Physician", The New Physician, July 1971, p. 433)

There are many such examples in the writings of William Carlos Williams.

Another person who combines Apollo's two masks of poetry and healing is Molly Harrower, an internationally known psychologist and a recognized poet. Her book The Therapy of Poetry (1972) is a unique example of the combination of her professions. In most cases, a psychologist takes the poetry of a known poet and writes a theoretical treatise on the psycho-emotional issues of the poet. (e.g. "Object Lost, Dreaming and Creativity: The Poetry of John Keats," by Hamilton, James W. Psychoanalytic Study of the Child, 24:488-531, 1969) or "Emily Dickinson and Poetry Therapy; the Art of Peace," by Cynthia Chaliff, in Poetry The Healer, Jack Leedy). But here, Harrower takes her own poetry and looks at it developmentally with her expertise of psychology. In the introduction to the book she says:

This book, in a sense, is coauthored. The senior partner, a poet; the collaborator, a psychologist. The fact that they both inhabit one physical organism is, I think, incidental, or may actually prove to be helpful to the peculiar task at hand. I, the poet, should not feel threatened by the psychological-self probing into the needs which generate poetic expression. I, the psychologist, will make use of diaries and old letters which reveal usually hidden facets of poem-making. I, the psychologist, will have access to the first drafts and rough notes enabling me to trace the emerging poem through stages not revealed in the "tidy" versions which see the light of printed day.

The book is an excellent example illustrative of the role of poetry as a "healing" and "soothing" process in the life of one person--both subject and object of the book.

### SUMMARY

This chapter begins to lay a groundwork from which to view an integral relationship between Poetry and the Self. It looks at that relationship through the perspectives of history and anthropology. Language and its derivation has played an important role in connecting man with his feelings and his expression of those feelings. Many sources, literary and philosophical, look to language and poetry as basic to expression and communication. And throughout different cultures poetry plays a vital role in connecting expression with healing. Not only is there therapy in poetry, there is also poetry in therapy and in the theoretical definitions of traditional texts. Within an historical context, the author shows that frequently the doctors (therapists) and the poets are one in the same person. We now turn to these therapists/poets to hear their views of the relationship of Poetry and the Self.

The preceding pages lay a framework for the pages which follow. Just as rhythm and the primitives' respect for the vital connection between song and healing lay a groundwork for a more general look at the relationship of poetry to therapy, so the chapter which follows (focusing on the theoretical contributions of Freud, Jung and Perls) lays a basic groundwork for the actual practice of Poetry Therapy. It could be said that Chapter Two is a

pre-institutionalized view of the relationships between language and feeling and Chapter Three which follows is a more institutionalized or professionalized view.

## CHAPTER THREE

### THEORETICAL AND PRACTICAL FOUNDATIONS FOR THE USE OF POETRY IN THERAPY

#### INTRODUCTION

This section focuses on the theoretical and practical foundations for the use of poetry in therapy. More specifically, it looks at the contributions of Freud, Jung and Perls. The author uses some fairly specific terms. She assumes that her audience is a well-read one, familiar with psychological terminology, and that elaboration and definition of these terms is unnecessary-- especially as whole volumes have been devoted to defining, elaborating and illustrating much of the Freudian and Jungian terminology.

The purpose of this chapter is to give the reader an idea of the theoretical frameworks which address themselves to poetry specifically. The fact that Freud, Jung and Perls each wrote articles on poets or poetry is very important; for it helps fill in a composite picture of man's relationship to poetry, language and self awareness. We have just looked at an historical and anthropological view, and before we can look at more current applications of poetry in therapy, it is necessary to bridge the time span and turn to those psychiatrists who wrote explicitly about poetry. The intention in this dissertation is to weave a composite view of Poetry Therapy. To do this it



is necessary to review briefly those articles which address themselves to the topic. It is the author's hope that the reader will be able to see the connections between, for example, Freudian theory and Poetry Therapy. The same could be said for the sections on Jung and Perls.

## PSYCHOANALYTIC CONTRIBUTIONS: FREUD

### Summary of Article

Freud has an article entitled "The Relationship of the Poet and Day-Dreaming." (Collected Papers, vol. 4, 1953, pp. 173-183) In this article, he is interested in gaining insight into the creative powers of imaginative writers. He begins by looking at children and their sense of play and reality. He then discusses the function of dreams (daydreams) for children and extends this discussion into looking at the function of dreams and daydreams in adulthood. Finally, he talks about the fantasy world of writers, poets.

A child's most absorbing occupation is play. In play a child creates a world of his own, or rearranges and reorders his old world in a new way to please himself. He takes his play very seriously. Although Freud says that "play" is the opposite of "reality," the child's play is very real to him.

Children and creative writers, poets, have much in common. Like the child, the poet creates a world of fantasy which he takes seriously. He invests it with a great deal of affect, while separating it sharply from reality. For him there is the difference between the enjoyment of fantasy and the

possibility of something really happening in reality (unlike the child). Many emotions and experiences (however painful they may be), which are enjoyable in fantasy, would not be as enjoyable were they to happen in real life.

Basic to the above discussion are three terms which should be mentioned independently: PRIMARY PROCESS, SECONDARY PROCESS, and the REALITY PRINCIPLE.

The child as an infant is a source of psychic energy (libido, id). He wants what he wants when he wants it. If he feels hungry, hunger is his whole self. If he is sucking, sucking is his whole experience. He is omnipotent and in control of everything. He has no conception of time and space boundaries; past and future merge into one. He doesn't have the facilities to understand the difference between outside reality and inside reality. When mother goes away, it is very frightening now and totally, and that is all that matters. This is what Freud calls PRIMARY PROCESS. It is only later that he learns that those realities were only fantasy and that fantasies won't satisfy him.

As he grows up, a child becomes more discriminating. His experiences are based on reality, not the old seeming reality of his fantasies. Although parts of his personality (unconscious, id) still cling to primary process thinking and impulses, there exists a REALITY PRINCIPLE which sifts his experience. With the strengthening of the ego comes delayed gratification and compromise. There are trade offs in an older child's experience as he realizes that he can't have everything that he wants when he wants it. This is what Freud calls SECONDARY PROCESS.

Freud talks about three different kinds of fantasy (similar to dreams): childhood fantasy, adult fantasy, and the writer's fantasy.

(1) Childhood fantasy is pure primary process. And to extend the above discussion of primary process, it could be added that dreams, as Freud saw them, were wish fulfillments on the part of the dreamer.

(2) Adult fantasies, and dreams, are again wish fulfillments. Where this is considered normal for children, wish fulfillment dreams in adults are something to be ashamed of, according to Freud. Where the former share their fantasies and dreams, the latter conceal them. Adults feel alone in their private worlds of daydreams and intimate fantasies.

Why this difference? Freud says that it is because of motivation. For children, play is determined by a child's wish (to be grown up) which he does not need to conceal. Yet adults' daydreams make them feel childish and therefore have to be concealed and "entirely hidden."

Freud asks how we know of them if these fantasies are so secretive. He answers that it is thanks to neurotics who "have to confess their phantasies to the physician to whom they go in hope of recovering through mental treatment." (p. 176)

(3) Writers' fantasy is a world invested with a great deal of affect. The activity of this fantasy world involves three periods of ideation:

- a. an intense desire from the present
- b. an early experience in which this wish is fulfilled
- c. a future situation representing the wish fulfillment.

Fantasies, according to Freud, are early symptoms of pathology.

Because man is ashamed of his fantasies, nocturnal dreams and daydreams, he represses his wishes and pushes them back into his unconscious. Freud talks of the "repulsion" of wishes when they are told. In this article he mentions several characteristics of daydreaming:

1. happy people never have fantasies  
     only people who are unsatisfied have fantasies
2. unsatisfied wishes are the driving force behind fantasies
3. every separate fantasy contains the fulfillment of a  
     wish and improves on the reality which in the present  
     is unsatisfactory.

Freud elaborates on two different kinds of wishes. There are ambitious wishes and erotic wishes. He gives an example of women who are less ambitious than men, according to him. Therefore it is necessary to conceal their wishes because they are erotic in nature. He adds, "a well-brought-up woman is, indeed, credited with only a minimum of erotic desire." (p. 177)

Freud's view of "fantasy" is not shared by the author. Yet there is much in his discussion which is worth thinking about and having as background for a basic understanding of the possible dynamics at work within the psyche of an individual. His "reality principle," that mechanism which helps us sift our experience and determine what is fantasy and what is real is functional



in using poetry in therapy. For there is a fine line between imagination and fantasy and reality when it comes to poetry. The realm of the imagination is as valuable, and potentially is even richer, as the realm of reality, for much of the gap between where a person is and where he wants to be is dealt with by the imaginative process. The author agrees with Freud that a poet alternates between fantasy and reality, but she does not share his point of view that fantasy and wish fulfillments are symptoms of pathology.

### Freud's View of Poets

Freud says that the poets were the first "to salvage from the whirlpool of their emotions the deepest truths to which we others have to force our way, ceaselessly groping among torturing uncertainties." (Arnheim, Rudolph, Art and Visual Imagery, p. 11) By crediting the discovery of the unconscious to poets, he links modern medical insight to the psychological intuitions of the past. Like Adler, Moreno, Jung, Reik and others Freud, long before the study of man's behavior was thought of as a science, says that the poets are here to reveal and analyze the human condition. (Leedy, Jack, Poetry Therapy, p. 11)

Imaginative writers are valuable colleagues. . .  
 In the knowledge of the human heart they are far  
 ahead of us common folk, because they draw on  
 sources that we have yet made accessible to  
 science. (Poetry the Healer, p. xvii)

Where he says we would be indifferent to or repelled by the fantasies of the daydreamer, poetic art creates pleasure and overcomes the feelings of



"repulsion" created by human beings. "The writer softens the egotistical character of the day-dream by changes and disguises, offering aesthetic pleasure. The true enjoyment of literature proceeds from the release of tensions in our minds." (p. 183) It is the poet who, by inventing the hero myth--indeed a metaphor for himself, or the invulnerability of the ego--alternates between reality and fantasy. He talks about conscious wishes awakening unconscious wishes, receiving reinforcement from them and in turn becoming dream instigators.

Freud describes the poet as a professional daydreamer whose unconscious wishes are fulfilled by sublimation. He adds that creativity and poetry are similar to neurosis but are not themselves neurotic. For the origins of art, he says, lie in neurosis. The poet has the sensitivity of awareness of his own and others' impulses, dreams and fantasies and has the courage to express them verbally. (It is important to add that many psychiatric patients have this same sensitivity and awareness of what Freud calls "preconscious material.")

Freud is not suggesting that poetry be used as therapy. Rather he is suggesting an exploration of the qualities of the mind of the creative artist. Freud also mentions Ludwig Boerne's article, "The Art of Becoming an Original Writer in Three Days," written in 1823, which pretty much described the process of free association. In addition, he makes reference to Havelock Ellis' discovery of the publication of Dr. J. J. Garth Wilkinson in 1857 of

"A New Method" of writing poetry, which was essentially the process of free association. (Menninger, Karl, Theory of Psychoanalytic Technique, 1964, p. 45)

According to him, the qualities necessary for creativity which the artist must have are:

1. a strong instinctual drive
2. an extraordinary capacity for sublimation
3. a laxity of repression
4. an ability to verbalize.

Freud seems to differentiate the poet from the rest of mankind. He attributes to the poet certain qualities which, by implication, others do not share. The author shares in Freud's view of the artist's sensitivity towards poetic creation. She shares in his view of poets as alternating between reality and fantasy. She shares that creativity and poetry are similar at times to neurosis, but are not themselves neurotic. However, she does not share in Freud's fundamental belief that the origins of art lie in neurosis. That poets have a sensitivity of awareness of themselves and of others is incontestable, and that they have the courage to express verbally those insights is evident from the vast amounts of poetry accumulated over the ages. Within each of us there is the potential for that same acute awareness, insight and expression, and those qualities are not reserved for the poets to the exclusion of all mankind.

The importance of Freud's chapter on "daydreaming" lies in the qualities that he attributes to the poet. It is these qualities which are directly relevant to further discussions of the use of writing in therapy.

The Psychiatric Interview:  
An Argument for Poetry as an Adjudicative Therapy

At this point the author would like to enumerate some of the dynamics of the more traditional, medical model therapy hour. Not only are these important in terms of the way poetry is used by many therapists given their psychoanalytic training, but they are also important in terms of the function of the poem for the poet.

In brief, the psychiatric interview is a unique process of interaction between the "therapist" and "patient." Traditionally, although less frequent today, the patient lies on a couch and the therapist seats himself behind the patient and out of sight and "contact" with the patient. He does his part to keep a "professional" distance between himself and his client, keeping his more personal thoughts and feelings to himself and only interacting on a very limited basis. There is a sense of formality in the relationship, the patient calling the therapist with all due respect of his knowledge and training "Doctor." The therapist then serves as a passive, projection screen on which the patient can project. The therapist diagnoses his patient, labelling and categorizing him in terms of specific states of dis-ease.

By extension of the above description, it is often said that the medical model of therapy perpetuates the "one up-one down" dynamic between therapist and patient. This can be seen literally in the positioning during the interview. The "sick-well" dichotomy is another dynamic which is evident in the patient being called "patient" and the therapist being called "Doctor." What is implied, and perpetuated, is that the therapist is in charge and has the answers and the knowledge. This can cause a "dependency" on the part of the patient towards his therapist, and it is his "problem" to work through this dependency.

As mentioned before, Freud is not suggesting that poetry be used as therapy but rather to explore the qualities of the mind of the creative artist. That poetry not be used as therapy is a clear statement that would support Poetry Therapy as an adjunct therapy. The interactions of the psychiatric interview are unlike the interactions in a Poetry Therapy group. For example, the traditional "couch" on which the patient reclines during analysis is not present in a Poetry Therapy group. Although many of the same dynamics occur during a Poetry Therapy group as during a traditional analysis, the focus in a group is on expressing feelings, getting them out. The real working through of those feelings the therapist reserves for the ongoing therapy.

#### The Use of Poetry Within the Psychoanalytic Framework

When poetry is introduced in the therapy hour within the traditional setting, it is in line with the above description. The "patient" still brings to the "therapist" his creation, his poem and offers it up for approval and



criticism. The parallel of the child-parent relationship is obvious. There is little sense initially on the part of the patient that he himself wrote the poem for himself; rather he wrote it in all probability for his therapist. There is virtually no exchange of poetry between the therapist and his patient, for even if the therapist is writing his own poetry, he maintains his professional distance and does not share that side of himself. (An exception to this is given by Meyer Cahn in an article in which he recounts using his own poetry in therapy to service his own countertransference needs. To avoid involvement with his patients he wrote poems to and about them. By doing this he could avoid, or not, involvement and engagement with them.) (Cahn, M., "Poetic Dimensions of Encounter," in A. Burton (ed.), Encounter: The Theory and Practice of Encounter Groups, 1969)

In sum, Freud has helped to lay a theoretical and practical groundwork for the use of poetry in therapy. He points out the commonalities between children and poets in that each creates a fantasy world which he takes seriously. For each there is little distinction between play, reality and fantasy. He mentions primary process, secondary process and the reality principle and speaks specifically about fantasies and wish fulfillments as being early symptoms of pathology. The poet, according to Freud, alternates between reality and fantasy. It is Freud's task to help sort out material presented by the poet/patient and to better understand the qualities of the mind of the creative artist.



This discussion leads into a discussion on Jung, one of Freud's followers. Jung, however, had a falling out with Freud and veering away from Freud created his own impact on the field of psychoanalysis and Poetry Therapy. Jung seems to be the important link bridging Freud and the humanists.

## PSYCHOANALYTIC CONTRIBUTIONS: JUNG

### Introduction

A section on Freud is included in this dissertation because he is viewed as the grandfather of the psychoanalytic movement. Jung is included because he helps redirect many concepts initially introduced by Freud. He helps build the bridge between the analytic mode and the humanistic mode of interaction, for Jung gives more responsibility to his client/patient to develop and discover for himself his own meaning. Some of the significant shifts are: the shift from the "cure" model to the "growth" model, the shift from the work of art as a neurosis to the work of art as arising from similar psychological conditions, the shift in the usage of the term "symbols" from meaning sign and symptoms to Jung's own definition of symbols, and the importance of an individual's establishing his own symbolic meaning, the shift from the health "product" to a healthy "process" of living, and the shift from the intrapersonal orientation to a transpersonal orientation. Jung's contribution to the field of Poetry Therapy is indeed significant.

Some additional Jungian concepts, which are important to the development of Poetry Therapy, are also discussed. For the totality of Jung's writings are indeed relevant, and the one chapter summarized in the following pages does not scratch the surface of Jung's impact. Finally, the author mentions Jung's interest in poets and poetry. And as there are no primary sources which describe the application of Jungian theory, so there are no sources which describe how Jung might work with a poem. We must speculate.

In 1922, Carl Jung delivered a lecture in Zurich to the Society for German Language and Literature. His topic of discussion was entitled "On the Relation of Analytic Psychology to Poetry." Where Freud focuses on the intrapsychic dynamics of the individual in relative isolation, except insofar as his family is concerned, Jung addresses himself to the artist in meeting the unconscious needs of his age. Art, he says, represents a process of self-regulation in the life of nations and epochs.

### Summary of Article

Jung begins his lecture by welcoming the opportunity to define his views on the relations between psychology and art in general. For most of the lecture he addresses himself to "the artist" rather than "the poet," and when he does refer to the latter, he clarifies that he speaks "not of the poet as a person but of the creative process that moves him." (Portable Jung, p. 311)

Art, Jung says, because it derives from psychic motives, is a proper subject for psychology. But he clarifies that the question of what art is in itself can never be answered by the psychologist but must be approached from the side of aesthetics. Art, by its very nature, is not science; and science by its very nature is not art. Whatever the psychologist has to say about art must be confined to the process of artistic creation and has nothing to do with innermost essence. Hence, the reason why we cannot measure the success of poetry therapy through the standard testing criteria.

Here Jung differs from Freud. Where Freud focuses on the poet's personal relations with his parents, Jung says that although the material the poet works with can be traced back to those same sources, this does not enable us to understand his poetry. Jung rebels against Freud's putting a work of art on the same level as a neurosis. "If a work of art is explained in the same way as a neurosis, then either the work of art is a neurosis or the neurosis is a work of art." (Portable Jung, p. 303) Jung adds, that it is an "undeniable fact that a work of art arises from much the same psychological conditions as neurosis" (Portable Jung, p. 304)--these being common to the nervous intellect, the poet, and the normal human being. The inclusion of the normal human being distinguishes Jung from Freud.

In this lecture Jung brings in many of the concepts which are key to his approach to life. Jung helps begin to shift the focus from Freud's medical model "cure" oriented therapy to what might be better called a "growth"

oriented one where an individual evolves and emerges and is continually involved in the processes of life and growth. This lecture touches on but does not elucidate many of the concepts which are building blocks to understanding Jungian theory.

Jung addresses himself directly to the differences between his own outlook and the medical psychology inaugurated by Freud. He does not deny that the scientific treatment of art reveals personal threads that the artist, intentionally or unintentionally, has woven into his work. In this the psychoanalysis of art differs only in degree from subtle psychological nuances of a penetrating literary analysis. This kind of analysis is in no way concerned with the work of art itself. Freud's reductive method is a "medical technique for investigating morbid psychic phenomena" (Portable Jung, p. 306) and is "based on the assumption that the neurotic patient represses certain contents because they are morally incompatible with his conscious values." (p. 306) Therefore, it follows that the repressed content must have correspondingly negative traits (infantile-sexual, obscene or criminal) making them unacceptable to consciousness. "The essential thing in Freud's reductive method is to collect all the clues pointing to the unconscious background, and then, through the analysis and interpretation of this material, to reconstruct the elementary instinctual processes." (p. 307)

Jung lays some important groundwork for the liberation of poetry from the medical model "cure" orientation of Freud to the more "growth" orientation



of the humanists. He says, "In order to do justice to a work of art, analytical psychology must rid itself entirely of medical prejudice; for a work of art is not a disease, and consequently requires a different approach from the medical one." (p. 308)

Jung challenges Freud's use of the word "symbols" as the conscious contents giving clues to the unconscious background. These, Jung says, have the role of what he would call "signs" or "symptoms." For a true symbol, Jung adds, "attempts to express something for which no verbal concept yet exists." (p. 307)

At first it seems surprising that Jung focuses on the "product" of the work of art rather than on the "process" of artistic creation. This seems to be a "static" contradiction to an ever evolving "dynamic" process of growth. For he talks about personal causes having as much or as little to do with a work of art as the soil with the plant that springs from it. The special significance of a work of art lies in the fact that it escaped from the limitations of the strictly personal and soared beyond the personal concerns of its creator. Yet, this is not a contradiction. For although focusing on "the work of art," Jung is not looking only at that simple "product" but is placing that product within the context of a "process" more universal and ever evolving.

I have come to learn that although a psychology with a purely biological orientation can explain a good deal about man in general, it cannot be applied to a work of art and still less to man as a creator. A purely causalistic psychology is only able to reduce every human individual to a member of the species Homo sapiens, since its range is limited to what is



transmitted by heredity or derived from other sources. But a work of art is not transmitted or derived--it is a creative reorganization of those very conditions to which a causalistic psychology must always reduce it. . . . (T)he meaning and individual quality of a work of art inhere within it and not in its extrinsic determinants. One might also describe it as a living being that uses man only as a nutrient medium, employing its capacities according to its own laws and shaping itself to the fulfillment of its own creative purpose. (p. 309)

Jung in talking about the process of creation, distinguishes two types of artistic products. The first involves a definite aim, a conscious effort to create, exercising the keenest literary judgment and choosing his words with complete freedom. His material is subordinate to his artistic purpose; it is this that is expressed,--nothing else. Here the artist becomes so identified with his creation that his intentions and his faculties are indistinguishable from the act of creation itself. The second work of art "expresses itself" through the artist where it has made him its instrument. This work of art brings its own form and rejects any additions which the artist "consciously" tries to make. Here the artist is not identical with the process of creation; he is aware that he is subordinate to his work or stands outside of it.

Here Jung further distinguishes between the two modes of creation. Where Schiller distinguishes between the "sentimental" and the "naive" artistic creation, Jung parallels with "introverted" and "extroverted"; with the intraverted attitude the poet masters his material with conscious intentions; the extraverted attitude is distinguished by its refractoriness.

Jung then focuses on this extraverted attitude, where he speaks of the poet not as a person but as the creative process that moves him. Where the consciousness of the poet is not identified with the creative process, he becomes a reacting subject. Here there exists an "alien inspiration" which controls the poet; it is here that the conscious mind of the artist is not only influenced by the unconscious but is actually guided by it. Jung looks at the creative process as a "living thing implanted in the human psyche" (p. 313) leading a life of its own outside the hierarchy of consciousness. In the language of analytical psychology, this would be termed an "autonomous complex."

Jung elaborates on what he means by "autonomous complex"--"A psychic formation that remains subliminal until its energy-charge is sufficient to carry it over the threshold into consciousness. Its association with consciousness does not mean that it is assimilated, only that it is perceived; but it is not subject to conscious control." (p. 317)

The intraverted attitude produces the conscious product shaped and designed to have the effect intended. This lies within the creator's limits of comprehension. But the extraverted attitude, dealing with events originating in the unconscious, achieves its end without the assistance of human consciousness and often in defiance of it, often extending beyond the creator's limits of comprehension and becoming a transcending suprapersonal expression.

Although Jung introduces the terms, he adds that although we are typed introverted or extraverted, we can work with the complementary attitude at times and are not bound to any one classification.

Jung mentions the poet who goes out of fashion and is rediscovered and tells something new. His explanation is that the essential message is so hidden in a symbol that only a renewal of the "spirit of the time" permits us to read its meaning. Old eyes read what they are accustomed to read. Fresher eyes allow for new perspectives in understanding. Works that are openly symbolic have a "pregnant language" that cries out that they mean more than they can possibly say. A symbol remains a perpetual challenge to thought and feeling, for although it can be seen, there is always more to what it might mean.

Does art really "mean" anything at all? Maybe it simply "is" and "means" nothing beyond that. (Ciardi says a poem ought not "mean"--just ought to "be.") Jung accepts this within the sphere of art, but in talking about the relation of psychology to art, we are outside of that sphere. He says man must find meanings in things; he must interpret, otherwise he would be unable to think about them. When we are caught up in the process of creation, we neither see nor understand, for cognition is injurious to immediate experience. Of necessity we must step outside the realm of artistic creation and try to establish meaning.

From where does the "autonomous creative complex" arise? Jung quotes Gerhard Hauptmann: "Poetry evokes out of words the resonance of the primordial world." (p. 318) Its source lies not in the personal unconscious of the poet, but rather in a sphere of unconscious mythology whose primordial images are mankind's common heritage. This he refers to as the collective unconscious. The collective unconscious, because it was never repressed or forgotten, shows no tendency to become conscious under normal conditions, nor can it be brought back to recollection by any analytical techniques. The collective unconscious is a potentiality, a possibility. Those primordial images, or archetypes, constantly reoccur throughout history. These mythological figures are products of creative fantasy and still have to be translated into conceptual language. Only the beginnings of such a language exist. When such images reappear we are no longer individuals. The voice of all mankind resounds within us, for whoever speaks in primordial images speaks with a thousand voices.

Jung concludes his lecture looking at the social significance of art. It is the artist's function to educate the spirit of an age, to conjure up the forms in which the age is most lacking in order to meet the unconscious needs of the era. In this sense, art represents a process of self-regulation in the life of nations and epochs.



Where Freud focuses on the intrapersonal psychic phenomena geared towards diagnosis and cure, Jung takes a giant step and extends himself into the more transpersonal realm where creativity and humanity evolve and grow according to natural and universal phenomena.

Additional Concepts of Important to Jung:  
Applications/Contributions to the Field of Poetry Therapy

The lecture summarized above only touches on many concepts which are crucial to an understanding of Jung. It would be impossible to begin to discuss the entirety of his orientation. What he espouses is not a psychology or a theory of therapy but rather an approach to living one's life in a fulfilling and creative way--ever discovering new levels of awareness and consciousness. Jung talks about integrating the conscious and unconscious and in so doing developing a unique personal identity. This process of self-differentiation he calls the process of individuation.

The concept of individuation is an excellent link to the humanists. Individuation is a process which is never completed. It is the process of psychological development by which man becomes the definite, unique being he in fact is. It is a "coming to selfhood" (Portable Jung, p. 122). Jung's emphasis lies in the "coming" rather than the "selfhood." His concept of individuation is that it is a process, a never ending process, which is involved with discovering the struggle of meaning in our own lives. It is the inclusive and integrating principle by which man discovers the wholeness of his personality.



Jung would agree with Fromm who says, "the whole of life of the individual is nothing but the process of giving birth to himself." (Fromm, The Sane Society, 1956, p. 26)

So much of Jungian terminology is descriptive of this process of man's giving birth to himself. His methodology is a metaphorical one. Ortega Gasset said that the metaphor is like "a tool for creation which God forgot inside one of his creatures when He made him." (Sherrard, Peter, The Linguistic Foundation of Education, unpublished master's thesis, May 1967)

The metaphor as a "tool for creation" emphasizes the process involved rather than the product--it emphasizes How we get to a given point rather than where we arrive. "Life is process, death is thing."

As mentioned briefly above, Jung places a great deal of emphasis on the symbol, because in his orientation, the symbol is vital to man's growth and expanding consciousness. Treatment of "symbols" in the above lecture does not adequately illustrate the volumes that Jung has written on the subject.

A symbol is a spontaneous image which emerges from the depths of an individual's personality. It is a directive motive force which embodies an open future and which is becoming actualized in the present. A symbol permits a representational unfolding of an individual's personality. "Representational" means that a symbol is "allusive to" that seed of potential but cannot name it or define what it will necessarily be. Symbols cannot be fully expressed in rational terms or with an analytic mind-set. A more productive way to

approach a symbol is to encourage it to grow and develop, work with it, affirming it, nurturing it and drawing it forward. A properly nurtured symbol buds and blossoms and allows the person for whom it is a symbol to experience something in himself beyond the seed of potentiality. "Whether or not something is a symbol," Jung says, "depends primarily on the attitude of the consciousness that contemplates it." (Jacobi, Jolande, The Psychology of C. G. Jung, p. 97) The question is whether the person has the right momentary disposition to perceive the object not as a sheer phenomenon but as something more.

What we call a symbol is a term, a name, or even a picture that may be familiar in daily life, yet that possesses specific connotations in addition to its conventional and obvious meaning. It implies something vague, unknown, or hidden from us. (Jung, Man and His Symbols, p. 3)

Jung emphasizes the difference between symbols which are allusive and beyond the range of human understanding and mere signs which denote the objects to which they are attached. A sign, Jung says, is always less than the concept it represents, while a symbol always stands for something more than its obvious and immediate meaning. Jung is careful to state that an important difference between signs and symbols is that a sign is a sign with relatively objective qualities to it and becomes a symbol only when the individual perceiving the sign is willing to embody it with a more allusive meaning.

Where Freud is concerned with signs and symptoms, well-defined entities with causes, well-described treatments, and "cures," Jung is more concerned with symbols which remain a perpetual challenge to our thoughts and feelings. Jung helps open the door to a new perspective which is larger than pathology. Where Freud as therapist is the man with the knowledge about his patient and is the one who does the interpretation, Jung facilitates the discovering, interpreting, and establishing meaning of symbols with his client. In fact, the emphasis of the individual perceiving the sign places the responsibility for creating symbols out of signs on the client.

This is important in noting a major contribution to the field of Poetry Therapy. Jung essentially is saying that it is the client (poet) who is responsible for stating the meaning of his poem, no one else. It is the poet who creates the symbols which have the most meaning for him, and however allusive, elusive, or illusive he may want to make them, they are intended that way. Assuming the intraverted attitude, this puts the poet (client) as having the final say as to the intention of his poem.

Where Freud looks at a patient coming to him showing signs of internal distress and malaise and interprets this in terms of symptomatology or an illness, diagnosing according to a particular syndrome as though a fixed and defineable entity, Jung is different. He looks at these signs of dis-ease as seeds of growth and tries to find with that person a way of eliciting the potentials within him. He does not diagnose in terms of pathological symptoms

and try to eliminate the dis-ease. Rather he treats the dis-ease as an inherent and necessary stage in the process of personal growth. The following quotations are written by Ira Progoff, a man very much influenced by Jung. The quotations apply to Jung.

(P)sychological illness do not behave like entities. They do not enter the life of a person and then leave. They rather are the life of the person. They are even the destiny, or the channel by which an important aspect of the specific meaning of the individual's life unfolds. This is particularly true of sensitive persons who eventually find an important work for their lives, or who achieve an especially intense spiritual awareness. The culminating experience by which new capacities of awareness open to such persons to give new content and meaning to the activities of their lives, often looks deceptively like illness while it is still in its early stages. If it would be diagnosed and treated in the light of pathology at that point in its genesis, all the possibilities of development would be cut short before they had a chance to grow. (Progoff, Ira, Symbolic and the Real, p. 58)

The important point in carrying this through successfully is to refrain deliberately from premature diagnosis. When symptoms of disturbance appear where these symptoms are part of the process of personal growth, the meaning and potentiality of development is missed if it is interpreted in the light of pathology. (Ibid, p. 60)

Jung replaces the diagnostic analysis with drawing forth out of a mire of tension and possible emotional confusion a potentiating energy of a symbolic seed. The goal is no longer therapy as such but the encouragement of development of the potential of the person. Rather than removing old symptoms, he opens new pathways of meaning.



Although the goal is not a therapeutic one, therapy does become an inevitable by-product of the emergent experience of a process of integrative wholeness. Jung says "psychology ceases to be a tranquil pursuit for the scientist in his laboratory and becomes the active part of the adventure of real life." (Man and His Symbols, p. 80) He adds, "no textbook can teach psychology; one learns only by actual experience." (p. 81)

### Jung's Interest In Poetry and How He Might Use It

Jung says that "Poets are spokesmen for the world." He believes that the poet is able to articulate an awareness between his unconscious and his conscious which is common to all mankind. Implicitly he believes that we are all poets; we are all creative people able to create our own worlds, our own meaning systems.

Because of this belief, Jung, when working with a client, encourages the individual to build on that potential seed of creativity and self-fulfillment. Where the person shows an artistic flare, he encourages the person to draw or paint; where the individual feels more poetic, he encourages that person to write. Jung, in a sense, was grandfather to the expressive therapies--encouraging people to take action and to participate fully in their own lives. When clients bring poems into the therapy hour, he encourages them to find and establish the special meaning of that poem.



He also brings his own expertise. Like dreams, poems are symbolic representations of our unconscious. Jung might look for patterns or indications of persona-shadow, animus-anima, archetypes, etc., but he does not impose these on his clients. Rather he uses his expertise to encourage them to discover for themselves. Where a patient of Freud's brings his poem to the father-figure for interpretation and praise, a person working in the Jungian mode is more able to give himself the interpretation and praise he seeks.

#### CONTRIBUTIONS OF JACK J. LEEDY, M. D.

It seems appropriate at this point to include the practical and theoretical contributions to the field of Poetry Therapy of Jack J. Leedy. A psychiatrist working at Cumberland Hospital in Brooklyn, New York, Leedy's primary contribution has been to be one of the major organizers of what is becoming the field of Poetry Therapy. A second major contribution is helping to draw attention to the field by publishing two books. And finally a third contribution, this one more theoretical, is his introduction of the term "isoprinciple."

Leedy got his M.D. from the University of Pittsburgh School of Medicine and did postgraduate work at its Western Psychiatric Institute and Clinic, and at the New York State Psychiatric Institute of Columbia University College of Physicians and Surgeons.

#### Association for Poetry Therapy

Leedy founded the Association for Poetry Therapy and worked with

poetry therapy groups as participant, therapist, consultant and director. He has been instrumental in helping other psychiatrists, psychotherapists, and other professionals to establish such groups in mental health centers and clinics and in hospitals. He is encouraging the establishment of a new profession of Poetry Therapist and is very much involved in attracting qualified people to the field.

In 1969 Leedy became the Director of the Poetry Therapy Center in New York, and in 1969 he became the President of the Association for Poetry Therapy. Still a young and unknown organization, in February, 1975 membership numbered 182 people. (Although Poetry Therapy is being conducted in over 400 locations across the country.) Members include psychiatrists, psychologists, social workers, English teachers, poets, college professors, graduate students and anyone interested in joining and developing the field of Poetry Therapy. The Center runs periodic workshops in New York, and in 1974 the APT held its second International Conference. The Third International Conference is scheduled for April, 1975.

People have been doing Poetry Therapy for years without realizing that it was a field or that there was even an Association for Poetry Therapy. There is a sense of excitement and collegueality among the members, almost like sharing a secret that each has known about for many years.

This poses problems for establishing an accreditation process in this field which is assertively hoping to become known and respected as a field

of its own. The APT is currently reviewing its accrediting process in an effort to have a standardized process which could have impact on the American Psychological Association. Most of the early members of the APT are certified in some professional field, having undergone the usual rigorous certification process. For the most part, they are clinicians and care about the quality of their work. They feel a responsibility to their patients. They also feel a responsibility to the people who may not have the certification and professional degrees that they hold, for they see these people as qualified to run Poetry Therapy groups and in fact see the outcomes of such groups as being therapeutic. The APT is currently struggling to define an accreditation process for itself.

#### Publications in the Field of Poetry Therapy

A second major contribution to the field of Poetry Therapy is the fact that Jack Leedy has helped not only to found an organization in the field of Poetry Therapy, he has also drawn much attention to the growing field. One way he has done this is by editing two books. The significance of this contribution cannot go overlooked, for the books have helped draw considerable attention to the field by publicizing the fact that it exists.

In 1969 Jack Leedy published a book entitled Poetry Therapy. Prior to this, articles have been written in professional journals about the use of poetry in therapeutic settings, but there has been no one source which

addressed itself to the growing field of Poetry Therapy. The book is a compendium of chapters written by people involved in the field of Poetry Therapy. They are practicing psychiatrists, psychologists, social workers, English teachers, a literary critic and a semanticist. The book states various principles of Poetry Therapy and demonstrates their use in individual and group therapy, with adolescent and adult neurotics, psychotics, retardates, in private practice, in hospitals, mental health, self-help and counseling centers. The book includes some cautions against using Poetry Therapy and some suggestions for a curriculum to train poetry therapists.

In 1973, Leedy published another book entitled Poetry the Healer. Like Poetry Therapy, this book is a compilation of articles written by psychiatrists, professors, poets, and other professionals working with Poetry Therapy. Leedy's second book goes a step further than his first. This book not only looks at how poetry can be used to "illuminate the darkest recesses of the mind" it also discusses the "normal" person as well as the "sick." "It describes how poetry, through the route it can take into the unconscious, has the power to make the average person happier, more fulfilled." (quoted from the cover of Poetry the Healer) It is a book written for professional and lay audiences alike--and to anyone who wants fresh insight into the often hidden meaning and power of poetry.



The "Isoprinciple": Leedy's Contribution to the Theory of Poetry Therapy

In his chapter "Principles of Poetry Therapy" in Poetry Therapy, Leedy introduces the "isoprinciple." In articles on Poetry Therapy (Crootof, Edgar & Hazley), the "isoprinciple" is often referred to as a key concept.

The isoprinciple, Leedy says, effective on music therapy as well, has proved important in the choice of poems for use in Poetry Therapy. (Leedy uses already written poetry in his groups.) He has found that poems which are close in feeling to the mood of the patients are helpful in releasing those feelings. This is the "isoprinciple." Depressed patients are helped by reading poems that are sad and gloomy in tone yet which reflect hope and optimism. Patients find that they are not alone in their depressions when they read, study, memorize, recite and create this kind of poem. They find that others are depressed, or have been, that others can and do recover from their depressions, and that there is no disgrace attached to victims of extreme alterations of mood. Crying with a poem is crying with a symbolic "other" with whom they can share their distress.

However, Leedy, concerned about suicidal ideas and gestures in the depressed, cautions that the therapist should be careful in using poems that:

1. offer no hope or that might increase the depth of the depression by implying that life has no meaning,
2. increase guilt feelings,



3. imply that God, father figures or mother figures forsake people, seek vengeance, and cannot be relied on in times of crisis,
4. encourage, glorify, or even mention suicide,
5. are confused, defeatist, homicidal, vulgar or debasing,
6. encourage silence and discourage vocalization, particularly of feelings of hostility, and
7. are persistently pessimistic with self-destructive love and a fearful hatred of life. (Poetry Therapy, p. 68)

Leedy's contribution to the field of Poetry Therapy cannot be overlooked. Essentially, he is the only leader in the field in terms of organizing and publicizing. Theoretically he has contributed the concept of the "isoprinciple." In addition, he has helped focus attention on the growing field, has encouraged people to become interested and involved, and has begun to pull together in book form the theory and experiences of Poetry Therapy. He has given of his time and energy in order to see something that he believes in develop and grow on its own.

For those therapists who use known poetry in their groups, the "isoprinciple" is an important concept to consider. That poems which are close in feeling to the mood of the patient can serve as a catalyst cannot be

contested. Yet, poems of opposite moods can be equally as effective in opening up a patient to talk about his feelings. This therapist (the author of this dissertation) does not pre-select poems to use in Poetry Therapy groups, so the application of the "isoprinciple" is a moot point. As a concept, however, it is an important step in building a framework for the practice of Poetry Therapy.

## HUMANISTIC CONTRIBUTIONS

### INTRODUCTION

It would be impossible to go into great depth in dealing with the humanistic foundations for the use of poetry in the therapeutic process. Humanistic psychology is not easily defined, partially because there are so many different approaches. To define and describe exactly what humanistic psychology is is more difficult than explicating the more traditional medical model of Freud. Not only has there mushroomed a whole crop of therapy approaches, many of them, despite their differences, overlap, build on similar principles, and work with clients in common ways.

It is interesting to note that, like Freud and Jung, many humanistic psychologists make specific references to a special quality of insight and awareness and ability to bridge the conscious with the unconscious. This they attribute to the poets.

Most of these theories could be used to work with people in Poetry Therapy groups. Because many "new" therapies employ Gestalt techniques, the author takes Gestalt theory as one example of how application of humanistic techniques is effective for therapy. First, we turn to what is said about poetry by the leading spokesmen of Gestalt; then we look at

additional contributions of less specific humanistic theories.

GESTALT--"VERBALIZING AND POETRY":  
SUMMARY OF CHAPTER

In Gestalt Therapy, by Perls, Hefferline and Goodman, there is a chapter entitled "Verbalizing and Poetry." Perls places great emphasis on language and says that by using language correctly we stay in a healthy relationship with others. He adds that creative speech is the opposite of neurotic verbalizing. Finally he instills in his patients an involvement in their own process of language, communication and life. Perls says that language and speech are important. For example, it is a neurotic abuse to use "instead of" rather than "along with" as a form of speech, i. e., "but" rather than "and." The right cultivation of speech keeps the sequence of: (a) pre-verbal social relations of the organism, (b) the formation of a verbal personality in the organism/environment field, (c) the subsequent relations of this personality with others flexibly open and creative. Perls talks about the importance of speech in keeping man in healthy relationship with those around him. He also goes a step further and talks about "creative speech." Perls says:

(S)ome psychotherapists give up in despair to bypass speaking altogether, as if only inner silence and non-verbal behavior were potentially healthy. But the contrary of neurotic verbalizing is various and creative speech; it is neither scientific semantics nor silence; it is poetry. (Gestalt Therapy, p. 321)

A poem, he continues, is a special case of good speech. Here, as with other good speech, the three grammatical persons--the "I", "thou" and "it" the content, the attitude and character, and the tone and rhythm, mutually express one another. This makes the structural unity of the poem. He continues:

(T)he speaking activity of the poet is, as the philosophers say, "an end in itself"; that is, just by the behavior of the overt speech, just by handling the medium, he solves his problem. Unlike ordinary good speech, the activity is not instrumental in a further social situation, as to persuade the listener, to entertain him, to inform of something, in order to manipulate him for the solution of the problem.

Essentially, the poet's is the special case where the problem is to solve an "inner conflict" (as Freud said, the art-work replaces the symptom): the poet is concentrating on some unfinished sub-vocal speech and its subsequent thoughts; by freely playing with his present words he at last finishes an unfinished verbal scene, he in fact utters the complaint, the denunciation, the declaration of love, the self-reproach, that he should have uttered; now at last he freely draws on the underlying organic need and he finds the words. . . .

His content is not a present truth of experience to be conveyed, but he finds in experience or memory or fancy a symbol that in fact excites him without his (or our) needing to know its latent content.  
(Gestalt Therapy, p. 323)

Poetry, Perls says, is the exact contrary of neurotic verbalizing, for it is speech as an organic problem-solving activity, a form of concentration. Neurotic verbalizing is speech attempting to dissipate energy in the speaking,



suppressing the organic need and repeating, rather than completing, an unfinished subvocal scene. Poems solve a problem which can be solved by verbal invention alone. The poem, because it has a beginning, middle and end, does not get caught in the morass of neurotic repetitions; a poem finishes the situation.

Perls argues that it is not necessary for a poet to know the latent content of his poem. He says that the act of writing the poem itself is, in a sense, a solution to his problem. He finishes it, often exhausted, and with a sense of his having, for the moment, come to a resting place, a solution. Although the writing itself may be similar to an obsessive pattern, the content of individual poems differs from poem to poem and makes a poem different from a neurotic obsession which repetitively makes little progress and shows little change. This lack of necessity to know the latent content frees the therapist from trying to "milk" the meaning from the poem and the patient; if a patient is stimulated to write, he treats himself.

Perls is interested in process. The handling of the words is, for the poet, the activity itself. His vocabulary becomes more and more his own, more idiosyncratic if his subvocal problems are obscure and hard to catch, more common if they are problems he can recognize in others. (p. 236)

Perls says that the goal of psychotherapy is not for the therapist to become aware of something about the patient, but for the patient to become aware of himself. In this sense, unlike the more traditional Freudian model, he

condemns the process of "free association" as a mechanism whereby the therapist is focusing on the patient's behavior in unawareness and learning something "about" him. Perls wants the patient to learn these Perls of wisdom for himself, to become his own therapist. He differentiates between free associating to an image and from an image. By this he means to let the speech develop itself--image to thought to rhyme to exclamation to image to rhyme--however it may come, but at the same time feeling that it is oneself who is speaking, owning that speaking, rather than some automatic speech. Free-association does allow for the shifting of figure and ground, and if the patient can learn to discover for himself, to explore for himself, he will learn that his unawareness may be unknown--as yet--but it is not chaos. The maxim "Know Thyself" is not something done to one in trouble, but is something that one does for one's self everyday. In this way, by teaching the patient to discover for himself, the therapist is giving the patient the tools for his own growth. Perls advocates the creative use of words, plastically destroying and remolding words as necessary. Language reform, the cure of empty symbols and verbalizing, is possible only by learning the structure of poetry, Perls says, and finally by making poetry and making common speech poetic.

This chapter on "Verbalizing and Poetry" is interesting in its content but says little directly about how poetry could be used as part of the therapeutic process. However, Perls is sympathetic to the poets and feels that poetic language is unique and necessary for true expression.

For an example of how Gestalt might be used in a Poetry Therapy group, turn to the final chapter entitled "Towards a Humanistic Theory of Poetry Therapy." This chapter sets forth the author's own theory of Poetry Therapy and cites an example of working with a group member using materials he had written. In this inter-change she uses predominately Gestalt techniques.

The discussion which follows speaks generally about important contributions within the humanistic movement. The demystification of the therapy process, the changing role of the therapist, and the eclectic nature of humanistic psychology may seem to have little to do with Poetry Therapy. However their contributions are essential to the shift in process within therapy groups allowing for a more human inter-action, a more growthful self-exploration. Although the humanistic trend may not speak specifically about Poetry Therapy, humanistic theory is nevertheless important in paving the way for such an explicit statement. The theoretical pages which follow, as this chapter is entitled "Humanistic Contributions", will relate this theory more explicitly to the author's own theory of Poetry Therapy as set forth in Chapter Eight.

#### ADDITIONAL HUMANISTIC CONTRIBUTIONS

Although the author includes Gestalt as supportive to the field, and gives an example of a Gestalt application in her final chapter, there are other humanistic contributions as well to Poetry Therapy.

In 1951 Carl Rogers surprised some therapists with his incredible notion that friends, books, and other enterprises of everyday life provide therapy for some people. Their enterprise is part of everyday living. Today "therapy" is no longer only taking place behind closed doors. It no longer is confessing the past dreams of which Freud said we should be so ashamed, but is now exploring present and future dreams and fantasies often filled with hope, joy and unshameful fulfillment. The content for therapeutic exploration has opened up, the process expanded, and more people are involved in new and more creative ways. "In Greece, we are too poor to have psychiatrists; we have friends." (Mellina Meroni)

Major impacts of humanistic psychology involve the therapy process becoming more available to the general public. First, there is a significant demystification of the therapy process; second, as the role of the therapist changes, clients are more able to observe the process involved in therapy and hence, via the modeling examples of their therapists, become responsible for their own growth, become their own therapists; and finally, the variety and eclecticism within humanistic psychology emphasizes that there is no one right way to grow.

### Demystification of the Therapy Process

An important shift from a medical model to a humanistic model of therapy is the shift from the "cure" orientation to the "growth" and "self-



actualization" orientation. The ideal product of health has been replaced by the ideal process of evolving, developing, and growing. What is occurring is a demystification of the therapy process. With the therapist stating that he is servant to his client, and admitting that he may be witness to a process which he does not fully understand and cannot, nor does he want to, control, the process of "therapy" changes as does the role of the therapist.

If 'you do your thing' can be anything, and if anything you do helps find out what your thing is, then it stands to reason that just about anyone can do it, or more conservatively, that traditional training in psychotherapy is not necessarily prerequisite to the successful conduct of new therapy methods.

The above quotation is from the June, 1974 issue of one of the wide-read (para)professional journals illustrative of the shift in therapeutic orientation, Psychology Today. (London, Perry, "The Psychotherapy Boom," pp. 63-68)

This is not to overlook the destructiveness of self-styled "therapists" on their own ego trips. A "guide" must be informed, not merely eager to help. A sympathetic ear and an encouraging word are both helpful but do not constitute expert "therapy." The medical adage "Primum non nocere" (first, do not harm) is still paramount. (Pietropinto, Anthony, personal communication)

### The Changing Role of the Therapist

Consequently, the role of the therapist is changing. As the "patient" is considered less and less to be "sick" and more and more in charge of his



own journey of self-discovery, the role of therapist shifts to be less and less all-knowing and more and more facilitating of growth and awareness. This is especially true as "therapy" is moving away from individual consultation to more group consultation and group experiencing. For the most part, the therapist is more active and involved--very different from the Freudian projection screen. With the humanistic concept of "modeling behavior," the therapist uses more and more of his own experience, both past and present, to facilitate the group. This can be seen very specifically in Poetry Therapy groups where therapists both write poetry themselves and share that poetry with the group as well. An excellent article about this dynamic and its effect on the group is in Encounter, by Burton, chapter entitled "Poetic Dimensions of Encounter," written by Meyer Cahn. In this article, Cahn talks about a group he trained at the National Training Laboratories in which he wrote a poem about a woman in the group, shared the poem with her and dealt with her unexpected reactions. Another aspect of the increasing informal involvement on the part of the therapists is the encouragement in a group that everyone, therapist included, be addressed on a first name basis.

Such involvement on the part of the therapist(s) is not without its risks. However, it is in keeping with a more risk oriented therapy process that those risks are taken. For example, how much involvement and participation by the therapist is desirable in a Poetry Therapy group?

Although these questions are focused on Poetry Therapy groups, they are

applicable to most therapy situations as well. What is the ideal "professional distance" for a therapist to have with his client? Where Jourard in The Transparent Self talks about openness and self-disclosure on the part of therapist as well as client, it is not always beneficial for the therapist to be totally open. Where a therapist writes a poem, he takes a risk in sharing it with the group. Although it may seem like a direct form of communication with a specific individual, it also is a "model" for the patient. In a sense, it is a model for the patient to set himself up against, to compete against in a way. And because the poem of the therapist may be more "together" or more this or more that, the patient can never hope to arrive at such a point of articulation. Also, although it may be an open and "honest" thing to do, when a therapist begins to question his own sanity and shows his own craziness, this could be very confusing and threatening to a patient who is trying to get his shit together, and here the therapist is letting his fall apart. In sum, there are many kinds of self-disclosure that a patient does not want to hear. For example, the question of a therapist's sexual attraction for a client could be very threatening; and questioning of his own sanity, competencies, and values, unless handled wisely, could be detrimental to the overall goal of therapy. In addition, how early should a therapist "reveal" himself? How much of his married, family and own sexual life should he share with his client(s). How much of a strong, together figure does a client need for a therapist? How weak and insecure a personality is he open to? These

questions are relevant to all therapy situations. According to the more traditional model, some are moot questions. But today, where therapists are participating, revealing, and modeling a growth process in themselves, the answers are not so clear cut.

In general, emphasis is being placed on the personal qualifications of the therapist in relation to the success of his work with a client. Where someone already possesses these qualities, the less vital training would be, and the easier it would be to train therapists without worrying about their knowing medicine, psychology, social work or counseling. This would also be true of Poetry Therapists.

There are many aspects of the newer therapies that account for the shift in roles of the therapists. An important one is the shift from the "healthy product" of a person to a "growing process" of involvement in one's own life. This is seen in the Gestalt question of "How." Communication and interaction are emphasized today to a great extent. This can be seen in as simple a difference as the difference between one-to-one and group orientation. The more people there are involved in a group, the more possible inter-actions are and the more important communication is in a direct sense.

#### Variety Within Humanistic Psychology

Whereas in traditional analysis, patients were diagnosed and fit into pre-existing molds and categories, today there is an affirmation of an

individual's uniqueness. There exists the notion that "there is no one right way to be or grow"; it is up to the individual to find it and express it for himself. This can be seen in many groups which are eclectic in nature. They combine movement, dance, verbal and nonverbal techniques to get at messages and memories that are stored in various ways within our muscles, senses and bodies. The eclectic nature of many "therapy groups" today is indicative of the process orientation towards growth; it is understandable, given this, that many "therapists" are no longer called therapists but are considered group "facilitators."

It is difficult to say just when the shift in orientation began. In 1947 NTL, National Training Laboratories, held its first labs in Bethel, Maine. Since then groups have sprung up all over the country and world. Growth centers, such as Esalen in California, have become a substitute or addition to therapy as it was known.

Abraham Maslow could be considered grandfather to the shift. He "was a solitary voice crying for a psychology based upon the intensity of the poets rather than on the analysis of the mentally sick." (Poetry and Mysticism, p. 8) Although one emotional Freudian leapt to his feet at a meeting of the American Psychological Association, shouting at Maslow, "You are an evil man. You want to destroy psychology," by 1966 Maslow was President of the APA and his approach became a serious rival to Freudianism. (Ibid.)



Since then there has been an overwhelming amount of books and articles published in the field of "humanistic" and "existential" psychology. And given that Poetry Therapy is an eclectic approach to therapy, it goes without saying that portions of many of these theories are directly applicable to Poetry Therapy groups. Although it might be useful, to cite every concept and every process from the many approaches (Rogerian, Gestalt, Transactional Analysis, Bioenergetics, Psychodrama, Art Therapy, Rational Emotive Therapy, etc.) would be impossible.

Many psychologists speak specifically about the therapeutic process of writing. For example, Rollo May known as an "existentialist" writes:

The need to express one's self in writing, " Andre Maurois tells us, "springs from a maladjustment to life, or from an inner conflict, which the . . . man cannot resolve in action." No writer writes out of his having found the answer to the problem; he writes out of his having the problem and wanting a solution. The solution consists not of a resolution. It consists of the deeper and wider dimension of consciousness to which the writer is carried by virtue of his wrestling with the problem. (May, Rollo, Love and Will, pp. 170-171)

The "inner conflict" which "man cannot resolve in action" as stated by Maurois is similar to the "inner conflict" of Perls as described on page 64. Another example is Sidney Jourard in The Transparent Self in his chapter "Self-Disclosure, The Writer, and His Reader". In this chapter Jourard distinguishes between experience and self-disclosure; experience refers to a process, to the flow of perceptions, feelings, memories and fantasies



occurring from moment to moment, and self-disclosure the conscious decision on the part of the person who had those experiences to share them.

Authentic writing is risky. The chief risk lies in letting other people know how one has experienced the events impinging on one's life. (p. 59)

I have little doubt that we therapists have lost the chance to make some professional fees because a prospective patient achieved catharsis, insight into and compassion for himself, through writing a poem, a novel, or a play. Disclosure of one's being can be therapeutic. (p. 60)

The concept of "self-disclosure" is applicable not just in writing but in therapy, individual and group, as well.

## DISCUSSION

So much more can be said about the development of the humanistic school of therapy. It is such a massive field. The changing trend raises many questions: What are the most appropriate settings for the newer therapies, for the creative therapies? Are we dealing now more with education of the total person vs healing a sick symptom? Can we say that there is a shift from a therapy setting to an educational setting? Is there still a place for therapy as it was, and is, practiced by more traditionally trained psychoanalysts?

Poetry Therapy groups are useful to generate feelings and awareness and to elicit feelings which are as yet unexpressed. In the opinion of the psychoanalytically oriented Poetry Therapists, this mode of therapy is not

enough to really work through major issues and traumas in a person's life. However, more humanistic and creative therapists are more willing to accomplish both the eliciting of feelings and the working through of feelings within the Poetry Therapy group itself. The "here and now" focus of the newer therapies is influential on where and when therapy actually takes place. If a feeling is present, the existential therapists deal with it; they do not put it off to be worked through at some later date in the privacy of an office. Rather they use the environment of the group's support and work through that feeling when it occurs, now. With the demystification of "therapy" and with the experience of working through feelings when they occur, rather than putting that work off, the patient learns that feelings are not to be avoided (repressed, suppressed, denied, or set aside for a later time) but are to be faced, now. This puts him in charge of himself, in touch with himself and his own issues. Poetry Therapy groups help a person find his own author-ity. He discovers his response-ability to others and to himself, now.

### SUMMARY

There are many differences between the role of the therapist in the traditional model and in the more eclectic humanistic models. Some of these can be seen in the following table:

TABLE I

Traditional	Humanistic
1. Therapist as passive projection screen, uninvolved and knowing.	1. Therapist as more active, involved, sharing of self, questioning.
2. Therapist called "Doctor" by patients.	2. Facilitator called by first name by clients.
3. "There and then" focus.	3. "Here and now" focus.
4. Poems and dreams presented to therapist by patient.	4. Poems, fantasies, etc., brought by client <u>and</u> by therapist alike. Poems often written to client by therapist.
5. Therapist actively grounded in theory. Conceptual knowledge valued.	5. Therapist actively facilitative, encouraged to utilize intuition, not necessarily trained in theoretically conceptual knowledge. Emphasis on learning by doing, practical experience valued.
6. Therapist working primarily alone.	6. Therapists/facilitators often working in teams, often male and female.
7. Poetry Therapy viewed as adjunctive to ongoing therapy.	7. Poetry Therapy viewed as a therapy in its own right.

The above summary is, of course too cut and dry. It is impossible to make the boundaries between the two extremes as neat and as tidy as they are here presented. There is much gray between these black and white polarities,

and many therapists trained in psychoanalytic theory run their groups in what might be a more humanistic manner. It is the author's belief that more therapists who are traditionally trained run groups similar to the humanistic processes than the other way around.

## CHAPTER FOUR

### POETRY AND THE SELF: RESEARCH IN THE FIELD OF POETRY THERAPY REVIEW OF LITERATURE

At this point, we shall look at what research has been done in the field of Poetry Therapy. The preceding chapters have set forth a pre-institutionalized anthropological and an historical framework for Poetry Therapy and have referred to the clinical frameworks of Freud, Jung and Perls specifically as speaking to the abilities of the poet. Included are other psychologists who support writing as a therapeutic endeavor. Now let us see how some of the followers of these same voices have applied their professional expertise to the field of Poetry Therapy.

One of the frustrations, and joys, of pulling together a theory of Poetry Therapy and trying to synthesize what has been written and discovered in the field is the dearth of "research" based articles. Out of twenty-two chapters in Poetry Therapy, only two include specific procedures for researching the Poetry Therapy groups and their effectiveness. None are included in Poetry The Healer. These two books are cited because they seem to be the major compendiums of articles on the subject. Many journal articles include vital facts about groups that are run, like numbers in groups, group make-up,



places where groups are run, duration of groups, but--again--none are focused on the research side of validating the effectiveness of such groups.

As can be seen from the bibliography, there are a great many articles and papers on the topic of Poetry Therapy. Many of these are theoretical papers talking about the way's and why's that Poetry Therapy works, and many of them, a great many, are anecdotal and affirm the fact that Poetry Therapy works. Few however, give traditionally tested data as basis for the fact that this mode of therapy is effective in helping people articulate and deal with their feelings.

The bulk of articles written on the subject are accounts of groups that are run. Such accounts relate how the group was set up, what were some of the dynamics that occurred during the groups, and what were some of the outcomes. Many include short case histories of patients, and a great many include excerpts from poetry that was written during the group.

There is much excitement with what is written and expressed in Poetry Therapy groups. Papers and articles have been written off of these group experiences in an effort to share that excitement. Hard data batteries of tests and test results may seem to be cold and impersonal to someone who has run such a group. So it is not surprising that so little has been written from the traditional research perspective. In fact, "hard data" seems to be measuring primary process growth in secondary process terms--like measuring the wind with a ruler. It could be surmised that many people who

get involved in Poetry Therapy are themselves poets in some concrete sense, i.e., most Poetry Therapists probably have written poetry for themselves and originally became interested in the field and method out of their own experience. One could assume that such poetically oriented people are less interested in measurable numbers and concrete figures than they are with more abstract poems, which may be more symbolic, yet which represent the same growth and change. The author makes this assumption because she has not found anywhere a discussion of why there are so few articles with hard data facts. Her assumption is based on her own propensity to want to get involved directly with a group, and to watch and feel it grow and develop rather than spend time measuring it.

Possibly another reason why there is so little traditional statistics "measurement" of growth in such groups is the shift in orientation from the more traditionally oriented to more eclectic and humanistic groups which don't believe as strongly in any one model (or measurement) of a "healthy" person. And what would you use as a yardstick, if you did believe in such a measurement? Poetry is a "healing" process, a life-long process, and helping a patient discover the gift of poetry for himself is helping him discover something that will be with him for a lifetime. Hence, growth and facility with the tool of poetry is not something that is easily measurable. For Poetry Therapy is emphasizing a process, a tool, to help grow yourself, and not a final product of a poem or person.

### Experiential Research

Kenneth Edgar and Richard Hazley have made two studies where they methodically tried to evaluate Poetry Therapy groups. Both are included in Poetry Therapy.

In conjunction with Herbert Levit, they did a study at Dixmont State Hospital, in Pittsburgh. They ran two groups of chronic schizophrenic patients: one received Poetry Therapy and the other conventional hospital treatment.

### Procedure

Edgar and Hazley selected seven patients for their interest in participating, ability to relate verbally, and average or higher intelligence. The control group consisted of five patients and was matched in age, education, marital status, and hospital diagnosis. Every Thursday for eight months, Edgar and Hazley worked with this group. They chose poems according to Leedy's "isoprinciple"--that poems symbolically represent feelings patients are unable to deal with successfully.

### Evaluation and Results

Both groups were given pretests: Rorschach, Wechsler Adult Intelligence Scale, House, Tree, Person, Bender, and a psychiatric interview. And, although they intended to administer the same tests as post-tests, this was impossible. All except for one of the patients in the experimental

group were either discharged or going home on visits by the end of the experiment. (Why the patients going home for visits couldn't be tested before or after, I don't know. JP)

The profile of the average patient: 31 years old, single, high school graduate, and with a hospital residence of over six years. Coming from within 50 miles, they were usually from small industrial towns. They had received medication and traditional group and individual therapy. Each at some time had been delusional or had hallucinated, and several had been aggressive. All of these patients during their therapy program prior to the Poetry Therapy showed little or no enthusiasm from day to day. Yet at the end of eight months of therapy, including Poetry Therapy, hospital personnel noted definite changes. Out of the original group of seven, three had been discharged and four were making home visits. Out of the control group, one had been discharged. The four others were not permitted home visits, nor were their attitudes more enthusiastic towards hospital routine. Based on these facts, it appears that the experimental group had a significantly more successful group experience than did the control group. However, as classical research studies, these are so full of holes as to make them virtually useless--e.g., the fact that there are "7" subjects and "5" controls.

The second research group that Edgar and Hazley tested was at Slippery Rock State College, an out-patient counseling clinic.



### Procedure

Sixteen students were selected for the group. They had applied for individual counseling and were asked if they would be willing to participate in an experiment in group therapy using poetry as a tool. They were also told that they shared some common problems with each other. Nothing more was said. The eight males and eight females all accepted.

Based on the psychiatric interview and the battery of tests administered, it was determined that the "common problem" was inadequate psychosexual identification and failure to become "weaned" from the "family of origin." All 16 students were juniors or seniors, had an IQ range of 108-135, a mean of 120. By sex, the mean IQ was 127 for the women and 113 for the men. The group was divided by sex, and each member was asked to draw a number one or two from a hat. The eight men and women who drew number one were assigned to the control group, the eight others became members of the experimental group. The eight in the control group were told that they could be admitted into treatment or seek treatment outside the college at any time, and at the beginning of second semester they could be admitted into the experimental group. The question can be raised that since all the controls had applied for individual counseling, didn't the experimenters foresee that they would probably enter therapy and disqualify themselves?

### Pretest

The pretest battery of tests consisted of:

- a. an MMPI (Minnesota Multiphasic Personality Inventory) profile



- b. the Draw-A-Person test
- c. Cards 6BM and 7BM of the TAT (Thematic Apperception Test)
- d. Card #1 of the Rorschach

The MMPI, DAP, and TAT were evaluated as measures of dependency; Card #1 of the Rorschach was interpreted as "Being indicative of either the parental figure with whom the child experiences the greatest conflict, the relationship of the child to his parents, and/or a condensed self-image."

### Method

The experimental group met for two hours Thursday afternoons in a comfortable room designated for group therapy. They sat around a large table; sessions were informal and coffee and cookies were often served. The only structuring was that the co-therapists were seated at opposite ends of the table. Poems were selected by the therapists and expressed the feelings thought to be troubling the group members. Copies of the poems which were read were distributed to the group members. Members were encouraged to describe any feelings made manifest by the reading of the poems. Members were also encouraged to write additional stanzas to these poems. These would then be read.

### Post-test Results

In January, 1965 the same projective tests were administered for the purpose of comparison. Twenty-six hours of therapy had taken place during

the semester. The post-tests were administered to the experimental group still numbering eight. The control group had ceased to exist, as four of the original eight had requested treatment before the 12th hour of the experiment had been completed.

The two significant limitations to this study as "evidence" that Poetry Therapy works are obvious. First, the dissolution of the control group makes it difficult to see whether members of this group might have changed over the four months due to factors other than Poetry Therapy. And second, eight subjects is not a very large sample. Edgar and Hazley suggest further research in this area.

### Evaluation

Three psychologists reviewed the results of the projective post-tests. Their unanimous conclusion was that seven of the eight experimental group had improved and that one had not. In addition, the seven who had improved indicated that they felt they had benefited from Poetry Therapy. The student who was termed by the psychologists as "not improved" said he had found the treatment "interesting but of little real value to him." It is important to add that this student was an English major obsessed with the idea of being a poet. People intent on becoming "a poet" are often so intent on the finished product of the poem that they do not relax and get fully involved in the process of Poetry Therapy.

## Discussion of the Data

Edgar and Hazley's discussion of the data called attention to four phenomena:

1. The females improved more significantly than did the males. (This could be related to the fact that both therapists were males.) The relevance of IQ was not determined to be very significant but may be an avenue of fruitful research for future study. Several questions should be explored: Does an individual with a high IQ tend to profit more from Poetry Therapy than the average or subaverage individual? Or would a different type of verse than was used be equally beneficial with a group with fewer cultural advantages?
2. "An individual with an idealized image feeding upon his competence as a poet or writer may not be a suitable candidate for this form of therapy inasmuch as the sessions may enhance the image at the expense of the already deflated self.
3. The therapists should watch for the emergence of the "psychological" moment of individual patients, that moment of special readiness to accept change sometimes signaled by an original poem or an especially strong reaction to the poem of another.

4. There appears to be some tendency for the original poems of individuals in group therapy to resemble the projections of Jungian archetypes, the child, the hero, the self. (Edgar and Hazley, in Poetry Therapy)

### SYNTHESIS OF FINDINGS FROM POETRY THERAPY GROUPS: OBSERVATIONAL RESEARCH

At this point the author would like to bring together some of the findings from Poetry Therapy groups. Many articles talk about outcomes, make suggestions for future groups, and mention surprises in running such groups. It seems that everyone who runs Poetry Therapy groups learns something in the process; and all are eager to share those learnings. To simplify and consolidate much that is repetitious general headings are used.

#### Aspects of Group Make-Up

1. Educational differences: This is faced by all educators--how to best reach an audience where there are educational and cultural differences. Some patients are articulate and verbal and have a cultured background very much aware of poetry and its richness; others are less verbal and have never really paid attention to literature before. The question arises as to ideal homogeneity vs heterogeneity of a group. A related dilemma arises when a member of a group is especially knowledgeable about poetry. If he fancies

himself "a better poet" than the therapist or lecturer, he may set himself about the task of destroying the climate of the evening or group. (Kramer)

Will greater growth occur when people are more similar in backgrounds or more dissimilar? Arguments can be made for both sides. Parker (Rolland S. Parker, "Poetry as a Therapeutic Art," in Poetry Therapy) feels that groups should be reasonably homogeneous in terms of the ego intactness of the individual patients. Spector (S. Spector, Research in Poetry Therapy, unpublished manuscript referred to in Parker article) demonstrated differential responses to poems according to diagnostic types, with alcoholics showing extreme reactions. He also found that schizophrenics reacted positively to a pessimistic poem which had been reacted to negatively by "normals." This finding is similar to Parker's findings concerning the reactions of similar groups of patients to projections of the human figure in Rorschach inkblots. He mentions that therapists should anticipate oftentimes paradoxical reactions to some materials by severely disturbed patients. Edgar and Hazley also noted different reactions to poems based on IQ differences of patients. Where similar diagnostic types reacted in similar ways to poems, it is generally agreed that the more varied the make-up of the group, the more possible transferences and the more possible inter-actions there are within any one group--resulting in greater possibilities for therapeutic encounter.



2. Shifts in audiences: One of the problems of groups run in hospital settings is the shifting attendance, although this is less of a problem with Poetry Therapy than other forms of group therapy. One shot lectures or evening presentations do not create problems, for these are total experiences in themselves. But where groups are ongoing and on a voluntary basis, which is highly recommended, there is frequently a high turnover from session to session. This poses a problem in establishing a cohesive group. Kramer (Kramer, in Poetry Therapy, pp. 200-211) and Erickson and Lejeune (Carl Erickson and Ruth Lejeune, "Poetry as a Subtle Therapy," Hospital and Community Psychiatry, 1972, pp. 56-57) comment on the unpredictable turnover of patients within a hospital setting and its effect on building a cohesive working group. Individual patient's gains are frequently the group's loss, for as patients get better and leave the hospital, they also leave the group. The more a member contributes to a group, the closer he comes to being released from the hospital and leaving the group. Arguments can be made for a series of unconnected sessions where patients can participate of their own volition from evening to evening. Such sessions are not built on continuity of participation. Where groups are intended to stay together for any period of time, the comings and goings of patients is disruptive to creating any continuity.

3. Who benefits: It is generally agreed that anyone can benefit from a Poetry Therapy group. However, one category of persons is an exception. Writing in a group for therapy is untenable for people whose writing is

important in becoming a "writer" or a "poet." As Edgar and Hazley put it, "An individual with an idealized image feeding upon his competence as a poet or writer may not be a suitable candidate. . . inasmuch as the sessions may enhance the image at the expense of the already deflated real self." (Poetry Therapy, p. 122) Where an individual is pre-occupied with the final product, he is blind to the process involved. And it is often this process where the therapy takes place.

4. When they can benefit: Timing of group sessions is important. Participation that is voluntary is more conducive to positive results than participation and attendance which is mandatory. When patients attend a Poetry Therapy session too soon after receiving shock treatments, there is a noticeable difference in their attention and behavior. Patients' behavior varies from normal, to forgetting the therapist's name, to giggling at reference to sex, and to general loss of memory. The question has been raised (Kramer) as to whether patients should be allowed to attend Poetry Therapy groups soon after shock treatments. Besides shock treatments, patients often attend sessions under great emotional stress. It is crucial that the therapist know how to best handle such situations. An example: a patient came into one session noticeably upset. The therapist soon learned in talking privately with the patient that her friend had escaped from the hospital. The patient was "keeping the secret," but it was not easy to do so. The therapist encouraged her to tell the attendants, which she did. The patient was then able to better

concentrate for the duration of the group. (Kramer)

5. Presence of attendants: The presence of attendants may prove to have harmful effects on the patient's ability to concentrate and get involved in the session. It serves as a continual reminder of the patient's true status in the hospital--a prisoner. Especially when attendants demand they leave punctually at 9:00, the patients are often interrupted in mid-thought. The results are demoralizing, and it dampens the mood of the whole evening. This behavior on the part of attendants is the exception rather than the rule, however. For the most part, when they attend, attendants stay very much in the background or participate along with the patients.

#### Leaders of Poetry Therapy Groups

There are many different ways to lead a Poetry Therapy group; hence, there are many different leadership styles for such groups. These fall primarily into three categories.

1. The lecturer. Frequently hospitals invite guest speakers and lecturers to address a hospital audience for an evening. These people are often specialized in their respective fields. Their function is to stimulate the minds and feelings of patients but not to be responsible for therapy. The fact that a lecturer who comes to run a group is a published poet fills many patients with awe and interest. Lack of creative success is oftentimes a factor in a patient's emotional deterioration, and the presence of known poets

enables him to ask specific questions about problems faced in a creative career. Also, as many poets have themselves been patients in psychiatric institutions, the patients have models to follow in reassessing their own lives. Kramer favors the lecturer sharing of himself through reading his own poetry and talking about his life. He argues in favor of the process of identification which occurs when patients meet a poet and hear him talk about himself.

There are also arguments to counter this one. These arguments favor a professional distance similar in many ways to Freud's professional distance. The patient does not have to compete with the "model" presented by the lecturer or therapist. If the therapist or lecturer shares his own poetry, he is presenting the patient with a "perfect product," an ideal image of a poem (in the eyes of the patient). The patient cannot hope to emulate such perfection, and he may give up. His own failure at not being able to write a "perfect poem" may be hard to deal with.

When lecturers come to a hospital from the "outside," the separation when they leave for their homes and families contrasts strongly with the patients who have to return to their wards. It is recommended that all lecturers and visiting speakers be able to spend time at the end of a session talking informally with the patients so as to minimize that separation.

Erickson and Lejeune also feel that it is important that the patients have ample time to react to the lecturer and poet, for they need to tie their emotional experience with the human being. Discussion of poets in general,



in addition to those who come to lecture, should also be encouraged because people open up when discussing real people.

2. The bibliotherapist or non-therapist leader. One of the chief arguments that Poetry Therapy be an adjunct therapy and not a therapy in its own right is that frequently people running groups are not specially trained in therapy. Bibliotherapists, English teachers and others interested in Poetry Therapy may have the energy and enthusiasm to conduct groups and introduce poetry but may lack the skills to consider the group "therapy." Such people can effectively generate feelings and awareness, yet they may lack the tools to work through the underlying problems that may arise. These people do not consider themselves "therapists." Frequently they work in conjunction with a trained therapist. Or, where they work alone, patients in their groups are also in ongoing therapy groups as well. David McDowell ("Bibliotherapy in a Patients' Library," Bulletin of the Medical Library Assn., 59, July 1971, pp. 450-457) argues in favor of Poetry Therapy as an adjunct therapy. Roger Lauer is another who favors the use of Poetry Therapy concurrently with other ongoing therapies.

3. The Poetry Therapist. One definition of the optimal therapist is:

Such a perfect human being must be capable of free participation with minimal neurotic distortions and countertransferences. He should be able to set an example of acceptance of negative feelings and to resolve disagreements about his role. Exercising maximal alertness, he must understand the history and momentary dynamics of both the group and its



individuals. He ought to be able to withstand the anxieties and pressures that the group will stimulate in him. Finally, he must develop certain practical techniques for recruitment, administration, and therapy of the individuals, and of that cohesive unit, the group itself. (Parker, "Poetry as a Therapeutic Art," Poetry Therapy, p. 163)

This definition includes the primary functions of the therapist. It should be added that the optimal therapist should be skilled at finding the appropriate balance between his own leadership and his own followership. Erickson and Lejeune attribute the success of their group at Gowanda State Hospital to the fact that the groups were free flowing, with the group leaders only minimally directing the group while maximally encouraging the participation of the patients. (Erickson and Lejuene, "Poetry as a Subtle Therapy," Hospital and Community Psychiatry, Feb. 1972, pp. 56-57)

Traditionally, a patient can become threatened if the therapist shares his own self-exploration, his own craziness. Too much and/or ill-timed self-disclosure on the part of the lecturer or therapist is difficult for the patient to handle. When a lecturer or therapist questions his own sanity, his own competencies, his own sexual attractions, especially within a group context, the patient loses touch with the reliable person who had been there as a "model" for him. The "all-knowing" therapist, or lecturer, becomes not knowing, and some of the safety and security in the relationship disappears. There are certain kinds of self-disclosures that the patient does not want to hear about the therapist. These are difficult for the patient to handle when

he himself is trying to come to grips with many of the same questions. In such cases, he needs the "stability" of the therapist to ground him and reassure him. Also, self-disclosure too early in a group can impede self-disclosure on the part of patients.

In a more humanistically oriented group, the therapist is more self-revealing and open about himself. This often facilitates a patient's getting in touch with himself. Rather than becoming threatened by the self-exploration and self-disclosure of the therapist, the patient welcomes the therapist as a fellow journeyman on the road to growth and self-awareness.

For a more comprehensive discussion of the Poetry Therapist, turn to Chapter Seven.

### Some Problems in Hospital Settings

Some of the problems faced in running groups in a hospital setting have already been mentioned. They are: shifts in audience, groups meeting soon after shock treatments, patients who are under great emotional stress, educational differences in the group, presence of attendants, the fact that lecturers leave soon after they speak. There are additional factors which are peculiar to a hospital setting and population.

1. Sensitivity to sex and death. Some patients are particularly touchy on these two subjects. Kramer admonishes that while these topics should not be ignored, they should be handled judiciously. Bearing in mind the "iso-

principle," Erickson and Lejeune shared this initial concern over serious, tragic and death poems but found that they proved valuable offering an ideal opportunity for the leader to discuss a range of human moods and feelings, including depression, and to show that members can be stimulated by artificial or unreal experiences. Patients, especially those with suicidal histories, often introduce them and find them helpful.

2. Exhibitionism. Many patients crave attention in one way or another. Usually exhibitionistic patients are visible before a group begins and can be sensitively dealt with by the therapist before the group. On some occasions, when exhibitionists have disrupted groups, the groups have apologized to the therapists after the session. (This concern speaks primarily to lecture groups where the therapists involved with the patients are not the same people as the lecturer coming into the hospital to speak.)

3. Choice of words. Kramer points out patients' heightened sensitivity towards words. "While not seeming careful, one must take great care with vocabulary at all times." (Poetry Therapy, p. 205) Patients who are mentally ill, he says, are keenly aware of hidden and double meanings. Words pertaining to mental or emotional disturbances should not be used. Again, though, patients may use words pertaining to emotional craziness. (Pattison, Poetry the Healer; Robinson and Mowbray, Poetry Therapy) Carl Whitaker and others might take issue with Kramer. Whitaker uses language freely and, contrary to Kramer, makes frequent references to a person's own craziness. Where

there are double meanings, he is adept at hearing simultaneously on both levels. He allows for the meanings in the words and facilitates the patients communicating that meaning. (This difference in orientation could reflect individual difference in background and training. Kramer is a Ph. D. professor of English, Whitaker is an M. D. professor of psychiatry and practicing therapist.)

It becomes obvious as we begin to examine different contributions in the field that there is a definite distinction between lecture groups which meet once or twice and have a large attendance and on-going groups. The process is different; the goals are different. Some of the differences which contribute to the success of each should be pointed out.

### Large Lecture Groups

1. A creative figure. The fact that a lecturer is a "celebrity" acts as a drawing card for patients. They are able to have personal contact with the lecturer, a breath of fresh air from the outside world.
2. A semi-classroom atmosphere. Especially with younger patients, there is a familiarity about a classroom. And when there is no forced recitation, patients can reassess earlier environments where recitation was required.
3. Variety of format. Evening programs in hospitals are varied (national programs, media programs, theme programs, participational programs). This makes each session unique and more exciting for the patients.



4. Freedom of discussion. At the end of any presentation by the lecturer there should be at least a half an hour for discussion. It is at these times that patients, often even the more quiet ones, get involved and show a real originality of thinking. Some who participate have never spoken before a group of people before.

5. Voluntary basis. All participants who attend lectures should come on a voluntary basis, indicating that they want to be there and are not "expected" to be there.

6. Original work. Kramer mentions the highlight of several evenings in a hospital setting where, rather than have a guest lecturer or poet come in and read, patients read their own poetry. Oftentimes these groups have numbered over 100 people. The excitement of this kind of involvement is different from that of listening to a speaker and then getting involved by asking questions. Such large lecture groups for the most part are not oriented towards the writing and expression of the patients attending the lecture. However they do serve to spark both interest and effort in the area of writing and communication, and as a result much material does get generated by those who attend. (Kramer, "The Use of Poetry in a Private Mental Hospital," in Poetry Therapy, pp. 200-211)

### Small On-Going Groups

The dynamics in a smaller group are different from those in a larger group. Because there are less people, there is more individual air time.



The result is that patients get more undivided attention. The people conducting smaller groups have different training as well. Parker (Rolland S. Parker, "Poetry as a Therapeutic Art," in Poetry Therapy) makes certain assumptions in considering strategies within a group.

1. The therapeutic encounter is but a small proportion of the entire week. "Art is long and life is short."
2. Observation teaches that disturbed behavior is largely inflexible, despite the varieties of emotional pain and maladaptation that bring a patient into therapy. Behavior change is a lengthy process even with "well-motivated" patients. Here the writing of poetry where a patient did not previously write is a marked change in behavior per se.
3. A therapist must cope with the patient's favored style of adaptation. The therapist should be on the alert that creativity may serve the process of resistance and may not enhance growth and change. (An example, cited by Edgar and Hazley, is a student who used poetry to enhance his self-esteem rather than to alter his behavior.)
4. The therapist creates an appropriate climate for patients to get involved. The therapist should facilitate patients confronting their emotional difficulties by helping to create a trusting, supportive and safe environment for the patients to explore their feelings. Parker cites Fultz who sees the patient as "one who must become engaged in a 'doing' rather than a 'being done to'" (Fultz, A. F. "Music Therapy," Psychiatric Opinion 3:32-55, 1966)

(Again, the emphasis is on process.) He also cites Naumberg who says that as the patient is able to understand the meaning of his own symbolic art, "he is able to help actively in his own psychotherapy. . . and his dependence on the therapist is gradually reduced." (Naumberg, M. "The Nature and Purpose of Dynamically Oriented Art Therapy," Psychiatric Opinion, 3:5-19, 1966) Leedy, Edgar, Hazley, Levit and many others concur that involvement by the patients enhances the therapeutic process, and this can only occur when the therapist creates the appropriate atmosphere.

5. The therapist is aware of group process. The focus on group process has been mentioned in reference to Erickson and Lejeune. Buck and Kramer ("Poetry as a Means of Group Facilitation," Journal of Humanistic Psychology, vol. 14, #1, winter, 1974) give an excellent account of the thematic progression of a group over the duration of its life together. In their discussion they state that sharing poetry proved relevant to the concerns of Jourard (1971) with self-disclosure, Maslow (1968) with self-actualizing growth and spontaneity, and Rogers (1961) with immediacy and acceptance of feelings and experience. Their concept of group theme development was influenced by French and Fromm's (1964) "focal conflict hypothesis" and Whitaker and Lieberman's (1964) "group focal conflict" as well as group dynamics emphasis of Bion (1961).

6. The therapist emphasizes the "here and now." Emotions and interactions within the group should have priority over early memories and family histories.

7. The therapist keeps group activity in a state of flux. The therapist's behavior should be qualitatively different from that of the members of the group. His interventions should stir up feelings, and should keep the group moving and alive. In working with schizophrenics the therapist should be careful that his behavior does not confuse rather than help the patient. (Parker's view seems contradictory to the statement which follows. On the one hand he gives patients control over their own interactions and praises this, and on the other hand he is saying that the therapist knows what is best for his patients and has ultimate control over them.)

8. The distinctive part of group therapy is the interactions between patients. The essence of group therapy is what goes on between the group members themselves. This consists of free expression of feelings between participants. Parker cites Schulberg who, in working in the Watts region of Los Angeles in 1965 said, "I wouldn't have believed that they would listen so intently to each other's work. . . they listen and are moved." (Parker, in Poetry Therapy) Yet, rather than giving the patient responsibility for his own growth and development, he posits that the patient's resistance to self-awareness should be the therapist's chief target. Although he promotes group interaction, Parker still leaves the therapist in charge. He says the therapist

should be available for support, to help clarify feelings and to facilitate interaction.

9. Individual and group psychotherapy has value. Parker promotes a combination of therapy sessions. He sees Poetry Therapy as an adjunct therapy which facilitates expression but which is not responsible for the real working through the issues.

Some of the literature spells out why poetry is an advantageous tool for use in therapy. David Forrest ("The Patient's Sense of the Poem," in Poetry Therapy, pp. 231-259) points out some of these.

#### Advantages of Poetry for the Patient

1. Order and authority. To the unhappy and disordered patient, poetry offers the order of language in which authority may be granted for wish-fulfilling statements.
2. Portable brevity and memorability. Poems are less cumbersome to carry around than books. And the fact of memorizing a poem oftentimes gives a patient increased self-confidence and a sense of mastery.
3. Conventions and patterns. Like rituals and prayers, poetry offers a cultural solution to a situation.
4. Conflicted and covert expression. The language of poetry, often complex and secret, allows for the expression of feelings which otherwise might not be expressed. Similar to dreams, the imagery and sound of poems



may modify or even contradict their overt meanings, thus allowing what Ferreira describes in schizophrenic speech as "the much looked-after opportunity to say in a piece of his mind about a relationship the nature of which he could not state publicly." (Ferrarra, A. J. "The Semantics and the Context of the Schizophrenic's Language," Arch Gen Psych (Chicago) 3:128-138, 1960) Another covert expression is the expression of hostile or "unacceptable" feelings in jibberish or secret language known only to the writer. This allows for release and expression yet protects the patient as well.

5. Language as gesture and action. For patients who need more than just words to express a feeling or dilemma, who may need body language or acts, poetry offers something akin to action. As Blackmur described "the outward and dramatic play of inward and imaged meaning." (Blackmur, R. P. Language as Gesture, 1935, p. 6) and when E. E. Cummings said that 2 plus 2 equals five. For schizophrenics who believe in the magical omnipotence of words, that things are no sooner said than done, poetry is heady stuff and can be overindulged in.

6. Appropriate tone. Patients may find adequate expression of a mood that they had otherwise been unable to make the appropriate emotional response to a given feeling.

7. Poiesis and metamorphosis. Forrest cites Arieti's discussion of the similarities between poems and schizophrenic patient's thoughts. "Poetry



is language made memorable by the establishment of linguistic order for the authority it may confer on wish-fulfilling statements, and poesis is the same process believed in to such a degree that it is taken literally, so the wish said is considered done. Metaphor is one thing said in terms of another to suggest a likeness between them, and metamorphosis is the same process taken literally so the two things are considered identical or interchangeable. Thus both poesis and metamorphosis involve word magic." (Forrest, Poetry Therapy, p. 255)

#### Therapeutic Function of a Poem

Jackson (Evalene P. "Bibliotherapy and Reading Guidance," Library Trends, Oct. 1962, 118-122) points to three processes which occur in Poetry Therapy groups which correspond to therapy.

1. Identification--an adaptive mechanism by means of which the reader (hearer) largely unconsciously increases his esteem for himself by affiliating with other persons.
2. catharsis - an uncensored release of emotion.
3. insight--emotional awareness of motivation.

Parker (in Poetry Therapy) similarly sees three prime ways that poetry effectuates therapy:

1. the process of creation

2. insight and empathy
3. expression and catharsis

Chapter Eight discusses the therapeutic function of a poem in more detail. Much of the discussion is based on literature in the field. So rather than repeat at length here what is set forth later, the writer suggests that the reader interested in the therapeutic function of a poem in Poetry Therapy turn to Chapter Eight.

Most of the articles mentioned above described settings where the therapist selects the poems to be read in the Poetry Therapy group. Following Leedy's "isoprinciple," some of the following questions may be asked in helping to evaluate the appropriateness of poems.

#### Appropriateness of poems to be read

1. What feeling or emotion does the poem express? Is the feeling easily identifiable? Will it be therapeutically valuable for the group to identify with this feeling?
2. What feeling, emotion or idea will the poem help the group express? Will the poem facilitate that expression?
3. Does the poem encourage a creative response? If the poem has a specific form or style, can the group use it to respond creatively to the poem?
4. Are the words, symbols and figures of speech in the poem understandable with a minimum of ambiguity? Is the main feeling or topic of the

poem clearly stated? Does the style of the poem help convey the feeling?

(Luber, Raymond, "Poetry Therapy Helps Patients Express Feelings,"

Hospital and Community Psychiatry, June, 1973)

### Proponents of Writing of Poetry

Luber is one of the few contributors to the field who explicitly emphasizes both the reading of poetry and the writing of poetry as important in the therapy process. He says, "I feel that the opportunity for writing is crucial, because it allows patients to express feelings they may initially hesitate to reveal in the group. Also it allows them to organize their feelings and provides a creative experience." (p. 387) The organization of diffuse feelings makes them manageable. Luber stresses the importance of the writing, the process of writing, rather than any finished product. His interest is in the feelings and thoughts experienced not on the form, style or poetic ability of the writer. As a result, he found that patients were more willing to share what they had written. Luber collected material written by the patients. If a patient did not want to hand in what he wrote, that was respected. All materials were returned to the writer. Luber is one of the few published poetry therapists who has combined expressive therapies. He alternates his poetry therapy group with an art therapy group. And group members were encouraged to combine modes of expression.

Kenneth Koch (Wishes, Lies and Dreams) clearly takes Poetry Therapy into the classroom and suggests many exercises for use in eliciting feelings from students and getting them to write. Other educators who are interested in bringing personal growth and awareness into the classroom also present exercises available for use in groups: Composition for Personal Growth, by Hawley, Simon, and Britton, Here and Now II: An Approach to Writing Through Perception, by Fred Morgan, and Writing as a Process of Discovery, by Edward Jenkinson and Donald Seybold, Styles and Structures: Alternative Approaches to College Writing, by Charles Kay Smith, and Working Without Teachers, by Peter Elbow are five additional examples of sources rich with exercises for use in classes and groups. Pattison (E. M. Pattison, "The Psychodynamics of Poetry by Patients," in Poetry the Healer) strongly recommends having exercises in your head but not planning how a group will run in advance. This allows for a more spontaneous group and demands that the leader take the group where it is at rather than programming it in a specific direction or on a specific theme.

#### THE USE OF POETRY BEYOND POETRY THERAPY GROUPS

The healing force of poetry is being used in many ways in addition to Poetry Therapy groups. In North Carolina Dr. Paul Whitaker used poetry in internal medicine in the treatment of coronary disease, diabetes, ulcers, cardiac arrhythmias and psychosomatic illness. (Whitaker, Paul and Ruth,

More than Medicine, 1969)

Poetry is being used to help people prepare for and contend with a variety of situations--such as loneliness, suicide, death and depression. Husbands are reading poetry to their wives in the labor room in preparation for the delivery of their babies, patients about to undergo surgery are being read poems. Poetry is being used in dentists' offices, in prisons, in schools, social agencies, nursery schools, occupational therapy classes as well as hospitals, clinics and homes.

A troubled person often sings a song, for--as the Eskimos knew--songs are akin to poetry. He sings the same song throughout his lifetime. And although he may sing as he lives, it may also be said that he lives as he sings and can live in new ways if he learns to sing a new song.

SUMMARY

The bulk of this section is grounded in a traditional medical model orientation. The emphasis seems to be placed on the therapist doing something to and with the patient. The research and guidelines seem based on traditional conceptualizations of what therapy is.

This is indicative of what has been written, and published, in the field and is not necessarily indicative of the way all poetry therapy groups are being conducted. There are many practitioners who are doing creative and very successful groups but who have not taken the time to write about their



experiences. The author has met many of them at conferences. Some are involved in prisons, old age nursing homes, half way houses, etc. These are the non-academicians who believe in the "doing" and say to hell with talking about it. These are the people who are working off of their instincts and intuitions--and not necessarily off of post-graduate training. Not to give them credit would be a gross over-sight, for the work they are doing is equal to the "published" accounts of Poetry Therapy groups.

## CHAPTER FIVE

### POETRY AND THE SELF: WHAT THE POETS-- KNOWN AND UNKNOWN--HAVE TO SAY

#### INTRODUCTION

In the preceding chapters we have looked at different dimensions of Poetry and the Self. We began by exploring historical and anthropological pre-institutionalized foundations, then turned to more institutionalized, theoretical and practical foundations, and finally, in the preceding chapter, reviewed the research in the field of Poetry Therapy. These are but some of the dimensions of Poetry and the Self.

It would be a gross over-sight to ignore what the poets themselves have to say on the subject. For more than any other group, the poets can speak first-hand about the direct relationship of Poetry to the Self. Not to allow them to speak for themselves would be in direct contradiction to a major premise of this dissertation--that we are all poets and have something to say if we will just let ourselves be.

This chapter bridges the gap between the "known" poets (who are read in many Poetry Therapy groups) and the less known poets (who are frequently writing in Poetry Therapy groups). Poets are people; people are poets; people are people--poets are poets. Whether they are published or not, their messages are the same.

First the author will excerpt several letters received from three people she considers poets but who are "unknown" to you, the reader. Nevertheless, known or unknown, recognized or unrecognized, published or unpublished, they still speak. Then we will turn to the more recognized poets with whom you are probably familiar. They too speak.

#### WHAT "UNKNOWN" POETS HAVE TO SAY

1. The following four excerpts are from letters received from a man in a group therapy marathon. During the group he shared some of his poetry; his poetry was very touching. When the author selected the topic of Poetry Therapy to write on, she contacted Tom and asked him if he would write a short blurb on what meaning poetry had for him in his life. Since then they have been carrying on a kind of correspondance sharing ideas and poems. Tom is a beautiful poet. He is as yet unknown and unpublished. But he is still very much a poet with something to say--his own song to sing.

Excerpt from letter from Tom--January 21, 1974

Hearing from you was a really good feeling because we hadn't written for so long and because I've also been doing some things with poetry that I want to write you about. You may of course read more of my poems and use what you want in your dissertation, if any of them are fitting. I've written more since I last saw you and as I glance back over them right now I see a change in them which must reflect a change in me. The ones I wrote last spring were strong and heavy in many senses. The later ones are lighter--more fragile and more telling. Then the bone and now the marrow.

I wrote some things I call "Circles" last spring after reading Laing's "Knots". . .

Writing poetry has been very helpful to me. I absolutely cannot lie in my poetry, so I have to scratch around and dig hard to find the truth because I so often don't know what I feel until I write it. Isn't that incredible? When I re-read my poems or journal entries I get sharp and valuable insight into myself. The poems are written to myself. No one reads them except me. But I don't feel they are too "personal"--they are just me and if someone wishes to read them--the way you are--then I am happy to let you because I feel good about you. I remember disliking Leedy's article when I read it last summer because it made my creations, my art--my poems--into "medicine" and I didn't want them to be "therapy." But now I see how my creative art can be therapeutic. When I wrote and re-wrote my "Circles," it wasn't until I had stated it precisely that I understood it precisely. So it really was therapy.

(I don't feel my experiences of reading poetry were ever very valuable therapy.). . .

Another thing about writing poetry is that it is the one real way I have of tuning in at all to my subconscious. I can only rarely remember my dreams. In my writing, though it is a conscious act, it is, for me anyway, the release of deep unconscious feelings. Ah, well, enough of that.

You flatterer! Of course you can read my poems.

Excerpt from letter from Tom--February 15, 1974

I'm writing more. I want to be a good poet. The hardest thing for me to accept about myself is that I can write well--I want so much to write good poetry that for a long time I've been afraid of trying for fear of failing. I am slowly accepting that part of myself. It is strange that it is easiest for me to

accept my bad stuff, but hardest to accept the good parts of me. I want very much to keep writing to you. Send more poems if you write.

Excerpt from letter from Tom--about a month later

After reading your poems I finally understand how much of me is revealed in my poems by how much of you is revealed in your poems. I am now a little frightened about how open I've been. I didn't know how much I'd be telling you. Or maybe I did.

Excerpt from letter from Tom--March 12, 1974

You know, something bothers me about calling it poetry "therapy." By calling it therapy, you imply that there is a disease to be cured by the aid of poetry. To me, that says that the creative art is a neurotic art or at least the fulfillment of a neurosis. That is wrong. Poetry, if it is poetry, is a non-neurotic, positive, affirmation of being alive. I think many creative people are "neurotic," but that does not mean their art is neurotic. So when I write, it is not "therapy" because if it is, then it is the manifestation of my neurosis. When I write, it is the manifestation of my creative impulses. I think many people can be "helped" by having them learn to write down their feeling. But that is not poetry. What do you think?

Some examples of Tom's poetry follow:

curious  
to sit  
at this wobbly  
unfamiliar  
round-table  
and write of  
my children's  
funerals



Mrs. Cross

I don't think you'd understand,  
Mrs. Cross,  
Why I puked out your kitchen door  
Spitting green bourbon  
Into the snow,

Nor this feeling that  
I will tremble  
Like an eye closing  
When they tell me soon  
Of my son's death  
Or my daughter's.

To a Student

your death  
was not so hard

it was the death  
of that part of  
me  
that was in you

that is  
agonizing

7:45 AM

Now  
I must wrap  
My tender  
And vulnerable  
Self  
Again

For seven hours  
In paper-thin coatings  
To appear  
Before my students.

What if they knew  
How thin  
The Coatings?

## Burnt Church III

So the only way is to attach yourself to nothing you can lose I mean anything at all wife house children because all can go in a flash and leave you in the road with your thumb out for a ride to anywhere and then wishing you had gone the other direction because no direction or distance has measure in time or feeling and so what is assessment worth at 32 years of age 4 months but to know I haven't got it together to love because if you love the way I did making demands on her soul not her heart and murdering trust by needing it so badly then you get fucked over by your neighbor and if you build a house it turns to ash inside of you with the sun streaming through the rented panes and if you have kids they die and oh yes we started asparagus can you imagine looking ahead three years does it mean loving half way and protecting yourself I haven't learned that and trusting snicker the husband is always the last to know though he knows first always.

to remove  
one's self  
from  
love

one pulls  
off the petals

and listens  
for the sound  
they make

as they  
hit  
the  
ground



## Preparation For My Son's Death

And so, Joshua Darius,  
Brown-eyed boy dying at three,  
I must go on without you.  
That is difficult, my son,  
For a son gives a father  
Reason for building  
And reason for joy.  
I feel the enigma,  
Ancient as David the King,  
Of father-killing-son-killing-father,  
And study if there's solace  
In that human act of death-reunion.  
I will scatter brown Vermont earth  
On your three-foot box,  
And learn the burial rite---  
The awkward peace of empty arms.

The more you take,  
the more I give.

You're taking, because I'm giving.  
I'm giving, because you're taking.

You are telling me to take.  
I am telling you to give.

As long as you take, I'll give.  
As long as I give, you'll take.

You hate your taking, but can't stop it  
because you hate my giving.

I hate my giving, but can't stop  
because I hate your taking.

To stop your taking,  
I'd have to stop my giving;  
But I can't do that  
because I'm trying to make you happy.  
I think by giving more you'll be happy.  
In trying to make you happy  
I make you unhappy,  
Because I make myself unhappy by my giving.

I give  
You take

I give more  
You take more

So  
We are both unhappy.

He fell in love with his image of her  
Which was what he thought he wanted  
And what he thought he needed.  
But unfortunately it wasn't what he  
                    wanted or needed  
Because it was only an image.

When he found out that the image was not her,  
But only his idea of what he wanted and needed,  
He wanted to get rid of her  
But he didn't know that he wanted to get rid of her.

So his knowing and not knowing  
Made him do two things at once.  
When this happened he became frozen  
And could do neither.

His needing to get rid of her  
And his saying he wanted her  
Made her not want him  
So she left.

## Rejection

I won't ask you  
Because I think you'll reject me.

You might not reject me  
But then again you might.  
I don't dare ask you  
Because I might lose.

But maybe what I really fear  
Is that you wouldn't reject me.  
If you didn't reject me  
Then I'd have to respond to you  
Which I think I want to do  
But really don't want.

So actually  
It is I who reject you  
Not you who reject me.  
My non-action is action.

My fear of your rejecting me  
Is really my fear of the possibility  
Of having to respond to you.

I  
only know  
you  
insofar as  
I know  
myself



2. The following is part of a letter from a client the author saw in a counseling relationship at a Mental Health Center. They met once informally since her termination over a year ago but have carried on a very sporadic correspondence since then. Joyce does not consider herself a poet, nor does she write poetry. But she writes poetically, and like Tom, has her own song to sing.

As I was reading about your dissertation topic-- Poetry Therapy--it sounded very interesting and it made me think of a song that is very meaningful for me, and in some ways a form of poetic therapy. It describes not only my feelings about you, but also about the turning point in my life (therapy) when I began to grow. I remember telling you that when the therapy was over, and you were no longer with me in a physical sense; you and our relationship would always be a beautiful part inside me. This is something that never goes away. Sometimes, when I feel weak or unsure I remember the gentle way you touched me when times were difficult and the strength I felt. I remember that from the very first day I saw you--there was always a smile. The song I am making reference to is "I won't Last A Day Without You." It means to me that the seed you cultivated in me that was at a very stagnant point has begun to grow and that each day it blossoms more and more, because part of you became part of me. I found the best--you showed me how to see the best in myself and in others as well. It means that you are always near, and because the awareness of life you helped me find is as close as the gentleness of a soft breeze on my face, or the touch of a friend's hand in mine.

The song Joyce referred to was enclosed in the letter:

### I Won't Last A Day Without You

Day after day, I must face a world of strangers where  
 I don't belong, I'm not that strong.  
 It's nice to know that there's someone I can turn to  
 who will always care, you're always there.

So many times when the city seems to be without a  
 friendly face, it's a lonely place.  
 It's nice to know that you'll be there if I need you and  
you'll always smile, it's all worthwhile.

When there's not getting over that rainbow,  
 when the smallest of dreams won't come true,  
 I can take all the madness the world has to give,  
 But I won't last a day without you.

Touch me and I end up singing, troubles seem to up  
 and disappear.

You touch me with the love you're bringing  
 I can't really lose when you're near,  
 When you're near my love.

If all my friends have forgotten half their promises  
 They're not unkind, just hard to find.  
 One look at you and I know that I could learn to live  
 without the rest, I've found the best.

3. Finally, the last excerpt is from a paper belonging to Deborah,  
 a graduate student in a Poetry Therapy group, fall 1974.

Everything I've been doing this semester is integrated,  
 because I'm integrated. I see my patterns of expression  
 in dance, poetry, drawing, clay, and in my interactions  
 with people. It's been unbelievably exciting! I really  
 do make sense even though I've usually doubted it! I'm  
 learning to trust my body, the emerging imagery of  
 my psyche, and not to fear those unknown parts of me  
 which might emerge.

A major conflict I've dealt with this semester is the role of silence/verbalization in my life. I've become more aware of its causes and manifestations in my movement, in my word imagery. I've seen how my words about noise are usually negative and my written images of silence are positive. I've been working out this conflict through dance, mime, drawing and clay. At the same time I write about the experiences of these other media in poetry or prose. Each balances the other. It's been a semester of seeking balance: in expression, in feeling/cerebral, in distribution of energy. Poetry therapy has helped me achieve these balances.

It would be interesting to witness a dialogue between Tom and Freud.

What would Freud's response be to Tom's statement

. . . something bothers me about calling it poetry "therapy." By calling it therapy, you imply that there is a disease to be cured by the aid of poetry. To me, that says that the creative art is a neurotic art or at least the fulfillment of a neurosis. That is wrong. Poetry, if it is poetry, is a non-neurotic, positive affirmation of being alive. I think many creative people are "neurotic," but that does not mean their art is neurotic.

And what would Jung's response be to Joyce's statement "It means to me that the seed you cultivated in me that was at a very stagnant point has begun to grow and that each day it blossoms more and more, because part of you became a part of me."? And wouldn't it be exciting to hear Deborah address an audience of the APA making an argument for the integration of the Creative Therapies into more traditional programs!

## WHAT KNOWN POETS HAVE TO SAY

The following pages include excerpts from poets and critics about the nature of their craft and art. Such quotations are endless in number; these are but a few. They speak for themselves.

### 1. The Place of Poetry

The people which ceases to care for its literary inheritance becomes barbaric; the people which ceases to produce literature ceases to move in thought and sensibility. The poetry of a people takes its life from the people's speech and in turn gives life to it; and represents its highest point of consciousness, its greatest power and its most delicate sensibility.

(T. S. Eliot: Introduction to The Use of Poetry and the Use of Criticism, 1933)

Poetry cannot cure cancer nor put an end to fire, famine, and flood. But it can provide a fusion of relaxation and excitement without the penalties attaching to either. To a greater degree than the other arts, it can reveal the conditions of living. This should help us to amend them. (Babette Deutsch, Poetry in Our Time, 1956)

### 2. Poetry

Poetry is the spontaneous overflow of powerful feelings. . . . (William Wordsworth)

Poetry is the best words in the best order.  
(S. T. Coleridge, Table Talk)

Poetry may be defined as a way of remembering what it would impoverish us to forget. (Robert Frost)

Poetry is a form of speech for the better expression of emotional ideas. (Herbert Spencer, Essay, "Origin and Function of Music")



Poetry is a precision instrument for recording man's reaction to life. (Louise MacNeice)

Poetry. . . is the attempt to imagine, in terms of the transitory forms of the present in which a generation lives, the universal nature of man's being. (Stephen Spender)

Poetry is the expression of the emotion caused by an intense realization. (S. R. Lysaght)

Poetry is the language in which man explores his own amazement. (Christopher Fry)

Poetry is. . . a way of using words to say things which could not possibly be said in any other way, things which in a sense do not exist till they are born (or re-born) in poetry. (C. Day Lewis)

Boswell: "Then, sir, what is Poetry?"

Johnson: "Why, sir, it is much easier to say what it is not. We all know what light is, but it is not easy to tell what it is."

Poetry is a rhythmical form of words which expresses an imaginative-emotional-intellectual experience of the writer's, and expresses it in such a way that it creates a similar experience in the mind of his reader or listener. (Clive Sansom)

Poetry is the stuff that poets write. (Clive Sansom)

The experience of poetry, like any other experience, is only partially translateable into words. (T. S. Eliot, Use of Poetry and the Use of Criticism)

We find poetry by divination--if at all--rather than by definition. (Clive Sansom)

The meaning of a poem is not something else but itself, and that self is not the sum of the meaning of all the words, but the blend and fusion of them. In the alchemy of poetry the words form not a mechanical but a chemical mixture. (Katherine M. Wilson, Sound and Meaning in English Poetry, 1930)



In all poetry there should be more than the author himself is aware of: the question of what the author meant or what a poem meant to the author when he was writing it, is itself a meaningless question. . . . In really creative writing the author is making something which he does not understand himself. (T. S. Eliot, "The Aims of Poetic Drama," Adam, 1951)

Poetry. . . acts in a divine and unapprehended manner, beyond and above consciousness. (Percy Bysshe Shelley)

Poetry is the harnessing of the paradox of earth cradling life and then entombing it. (Carl Sandburg)

Aristotle believed poetry to be a "think inspired." In the Poetics he adds it "implies either a strain of madness or a happy gift of nature."

Words do not have either-or meanings in imaginative poetry: they have and-and-and meanings. That is how poetry works. (Hilary Corke, Letter to the Listener)

The business of words in prose is primarily to state; in poetry, not only to state, but also (and sometimes primarily) to suggest. (William Livingston Lowes)

This insight, which expresses itself by what is called Imagination, is a very high sort of seeing, which does not come by study, but by the intellect being where and what it sees; by sharing the path or circuit of things through forms, and so making them translucent to others. (R. W. Emerson, Essay on "The Poet")

The attempt to make poetry serve a cause or interest is likely to deprive it of the freedom without which it cannot arrive at its particular kind of truth. For interests and causes see existence through blinkers; they distort being in order to achieve their ends. Poetry cannot take sides except with life. (Stephen Spender, Life and the Poet, 1942)

Extract poetry from anything you please; it lies in everything and everywhere. (Gustave Flaubert)

Poetry can communicate the actual quality of experience with a subtlety and precision approachable by no other means. (F. R. Leavis, New Bearings in English Poetry)

Poets stick to nothing deliberately, but let what will stick to them, like burrs when they walk in fields. (Robert Frost)

Poets write, not to tell others, but to discover and understand for themselves. (Author unknown, quoted from Sansom)

Do we not see that we are inarticulate? That is what defeats us. It is our inability to communicate to another how we are locked within ourselves, unable to say the simplest thing of importance to one another, any of us. . . that makes our lives those of a little kitten in a wood pile. . . . That gives the physician . . . his opportunity. . . . The girl who comes to me breathless, staggering into my office, in her underwear a still breathing infant, asking me to lock her mother out of the room; the man whose mind is gone--all of them finally say the same thing. And then a new meaning begins to intervene. For under that language to which we have been listening all our lives a new, a more profound language, underlying all the dialectics offers itself. It is what they call poetry. That is the final phase. (William Carlos Williams)

When we study poetry intellectually, we must think of its effect on us and try to account for it; but we should not forget that if the poem is a good one the poet probably wrote it under the stimulus of some overwhelming powerful emotional urge, and some of the poet's emotion may be passed on to us by processes that are not conscious. Poetry is more akin to magic, prayer, prophecy and myth than to knitting or fretwork; to look at it purely from the formally technical point of view and never surrender to it, is as misleading as to wallow all the time in undefineable emotion about it. (Marjorie Boulton, The Anatomy of Poetry, 1953)

It is a test (a positive test, I do not assert that it is always valid negatively) that genuine poetry can communicate before it is understood. (T. S. Eliot, Dante, 1929)

Some writers appear to believe that emotions gain in intensity through being articulate. Perhaps the emotions are not significant enough to endure full daylight. (T. S. Eliot, "Rhetoric and Poetic Drama," The Sacred Wood, 1920)

I did not exist to write poems, to preach or to paint, neither I nor anyone else. All of that was incidental. Each man had only one genuine vocation--to find the way to himself. He might end up as a poet or a madman, as prophet or criminal--that was not his affair, ultimately it was of no concern. His task was to discover his own destiny--not an arbitrary one--and live it out wholly and resolutely within himself. Everything else was only a would-be existence, an attempt at evasion, a flight back to the ideals of the masses, conformity and fear of one's own inwardness. (Hermann Hesse, Demian)

Dancing in all its forms cannot be excluded from the curriculum of all noble education: dancing with the feet, with ideas, with words, and, need I add that one must be able to dance with the pen? (Nietzsche, Things the Germans Lack)

The train of imagery wanders at its own sweet will, now trudging in the sober grooves of habit, now with a hop, skip, and jump, darting across the whole field of time and space. This is reverie or musing. (Williams James)

Metaphors and similes are poetic lies--lies that reveal truth more vividly than does any literal statement. (Maxwell Nurnberg)

On several occasions the scratching and spluttering of my pen awoke me from my somnambulistic poetizing and distracted me so that it suffocated a little product in its birth. I had a particular reverence for such pieces, like a hen for her brood of chickens pipping around her. (Goethe)

In a symbol there is concealment and yet revelation: here, therefore, by silence and speech acting together, comes a double significance. (Carlyle)

### 3. The Poem

The poem's existence is somewhere between the writer and the reader: it has a reality which is not simply the reality of what the writer is trying to "express," or of his experience of writing it, or of the experience of the reader, or of the writer as reader. (T. S. Eliot)



One cardinal fact about great poetry. . . is that its main value lies in a process, not in a result. . . . We do not understand a great poem till we have felt it through and as far as possible recreated in ourselves the emotions which it originally carried. (Gilbert Murray)

It is never what a poem says that matters, but what it is. (I. A. Richards)

We do not know what poetry is. (T. S. Eliot, The Use of Poetry and the Use of Criticism)

A picture (poem) is never beautiful if it is not honest, and to the extent that it is honest, that is, represents the immediate, deep and original perceptions and experience of the poet, it will have at least the beginnings of beauty. That is why the work of children, when it is an expression of their simple and honest feelings, is almost always beautiful: any line one makes as a free, spontaneous person will have in it the beginning of grace and rhythm. The harmony, balance and rhythm which are the principles of the universe, present in the movement of the stars as well as atoms, and underlying our concepts of beauty, are likewise present in the harmony of rhythm and balance of the body as well as other aspects of the self. But at the moment the child begins to copy, or to draw to get praise from adults, or to draw by rules, the lines become rigid, constricted, and the grace vanishes. (Rollo May, Man In Search of Himself)

A poem does not originate out of an impulse to communicate. A poem is what happens when a poet re-discovers, for himself, the reality we have lost sight of, because, to use Shelley's metaphor, it has been overlaid by the veil of familiarity.

The process, however, is not one of rediscovery and subsequent transmittal in a poem. The poem itself is part of the rediscovery. In making it, the poet learns what it is that he has rediscovered. Thus a child, when it begins to speak, learns what it is that it knows. And as a child will talk to itself, with no one around to hear, so in the poem the poet may be said to be talking to himself. He has established communication with his own being, and therefore potentially with others. (John Hall Wheelock, Poets of Today, 1954)

#### 4. The Poet

What is a poet? He is a man speaking to men; a man, it is true, endowed with more lively sensibility, more enthusiasm and tenderness, who has a greater knowledge of human nature, and a more comprehensive soul, than are supposed to be common among mankind; a man pleased with his own passions and volitions, and who rejoices more than other men in the spirit of life that is in him; delighting to contemplate similar volitions and passions as manifested in the goings-on of the Universe, and habitually impelled to create them where he does not find them. (William Wordsworth, Preface to second edition Lyrical Ballads, 1800)

Isn't it rather that a poet is a peculiar piece of mechanism which has its sensitiveness and emotions geared to language? One may feel something deeply; his whole being is affected by it, but he remains silent. Another, in the same situation, may feel less deeply in the human sense--his attitude may even seem strangely remote and impersonal--but it finds expression in poetry. Indeed one might say that the essential difference between the poet and other men is not that he feels more deeply, but that he feels more deeply and consistently in words. (Clive Sansom)

The poet, then, must feel in images: he must grasp the connections between things--but grasp them emotionally, rather than logically, and he must be capable of seeing one thing in terms of another. Now if we consider those three abilities, we realize that there is a certain innocence, a child-like nature common to all of them. Imagination demands--and not only from the poet--a quality of innocence. (C. Day Lewis, "The Nurture of the Imagination")

Compared with him, the ordinary man suppresses nine-tenths of his impulses, because he is incapable of managing them without confusion. He goes about in blinkers because what he would otherwise see would upset him. But the poet through his superior power of ordering experience is freed from that necessity. Impulses which commonly interfere with one another and are conflicting, independent, and mutually destructive, in him combine into a stable poise. He selects, of course, but the range of suppression which is necessary for him is diminished, and for this very reason such suppressions as he makes are more vigorously carried out. (I. A. Richards, Principles of Literary Criticism, 1924)



The poet cannot think too deeply, if he thinks through the imagination. (John Livingston Lowes)

The poet is neither an intellectual nor an emotional being alone; he feels his thoughts and thinks his sensations. (Elizabeth Drew, Discovering Poetry, 1933)

I feel strongly and I think strongly, but I seldom feel without thinking or think without feeling. (S. T. Coleridge, Letter, 17 December, 1796)

The dullest of clowns tells or tries to tell himself a story, as the feeblest of children uses invention in his play; and even as the imaginative grown person joining in the game at once enriches it with many delightful circumstances, the great creative writer shows us the apotheosis of the dreams of common men. (John Keats)

And I believe the poets; it is they  
Who utter wisdom from the central deep,  
And listening to the inner flow of things  
Speak to the age of eternity.  
(Robert Lowell)

A poet has died young in the breast of the most stolid.  
(Stevenson, substantially from Ste. Beuve)

Every child thinks naturally in the way in which the poet must try to think later.

Imagining is in itself the very height and life of poetry.  
(Dryden)

"The Author's Apology for Heroic Poetry and Poetic License"

The poet stands among partial men for the complete man and appraises us of his wealth, but of the commonwealth. (Emerson, Essays, "The Poet")

A poet participates in the eternal, the infinite, and the one; as far as relates to his conceptions, time and place and number are not. The grammatical forms which express the moods of time, and the difference of persons (tenses and persons of the verb) and the distinction of place, are convertible with respect to the highest poetry without injuring it as poetry. (Percy Bysshe Shelley)

The poet picks the flowers without knowing their names, and holds them out to us, to our joy. Then much later comes the botanist who discovers what kind of plant it really is. What was at first prized merely for its beauty, is now disclosed as a source of knowledge. (Silberer)

The poet seems to present the phenomenon of a highly developed mind working in a primitive way. (G. E. Woodberry)

Poet and novelist have an immense advantage over even an expert psychologist in dealing with emotion. For the former build up a concrete situation and permit it to evoke emotional response. Instead of a description of an emotion in intellectual and symbolic terms, the artist "does the deed that breeds" the emotion. (John Dewey, Art as Experience, 1958)

A being, like all the rest of mankind, on a planet swarming with his fellow creatures, teeming with life, thronged with hordes and herds of his brothers, and yet a being living in an indestructible loneliness. . . . A being essentially inexplicable and inexpressible, yet struggling passionately to express and explain himself, to convey the unique quality of his human consciousness, of his traffic with the worlds of brain and blood. (Elizabeth Drew, Discovering Poetry, 1933)

To be a poet is to apprehend the true and the beautiful; in a word, the good which exists in the relation subsisting, first between existence and perception, and secondly between perception and expression. (P. B. Shelley, A Defense of Poetry, 1820)

As for expressing nobody-but-yourself-in-words, that means working just a little harder than anybody who isn't a poet can possibly imagine. Why? Because nothing is quite as easy as using words like somebody else. We all of us do exactly this nearly all of the time--and whenever we do it, we're not poets. (E. E. Cummings, "A Poet's Advice to Students")

If a man is a deep writer, all his works are confessions. (R. M. Rilke, Notebooks of Malte Laurids Brigge)

The poet takes note of nothing that he cannot feel emotionally. (Thomas Hardy)

What every poet starts from is his own emotions. (T. S. Eliot)

The struggle--which alone constitutes life for a poet--to transmute his personal and private agonies into something rich and strange, something universal and impersonal. (T. S. Eliot)

## CHAPTER SIX

### THE POETRY THERAPY GROUP: WHAT IT IS AND HOW IT FUNCTIONS

#### INTRODUCTION

As can be seen from the preceding chapters, and especially Chapter Four, the Review of the Literature, there are many approaches to Poetry Therapy, and there is no "one way" to run a Poetry Therapy group. It is mandatory that each person who runs such a group assess his own strengths as a facilitator and therapist and adapt his own style of working. For people shopping around for a group to join, it is equally mandatory that you respect and feel comfortable with the orientation and style of the person leading the group.

This chapter will help clarify what some of those differences in style and orientation are. It is intended for a non-professional audience who is eager to learn about, and maybe join, a Poetry Therapy group. It is also intended for a beginning therapist who is struggling to define his own preferred framework.

In many ways, breaking into the field of Poetry Therapy is difficult. There is no "bible," no Perls of wisdom to guide the therapist in the How-To's of Poetry Therapy. In fact, it is hard to find many sources that discuss

in detail the specific dynamics of Poetry Therapy groups. Most relate the outcomes and share some of the poetry that is written in a group. Few sources prepare a beginning therapist for what might occur when a group starts. And few sources even try to define Poetry Therapy for the non-professional audience.

In many ways, breaking into the field of Poetry Therapy is easy. Because there is no "bible," the only way to discover what the field is about is to discover and formulate your own theory by running a group. (The certification process for Poetry Therapists is described in the following chapter.) It is nice that there is no "dogma," for whatever works works. However frustrating it is to have only "after the fact" descriptions of experiences substantiating the fact that Poetry Therapy works, it leaves the field wide open for exploration and experimentation, creativity and sheer fun.

Few articles address themselves to the dynamics of Poetry Therapy groups. The author tries to pull together some observations made through journal readings and through her own experience in running groups and workshops. While many of the sources mentioned in the bibliography, and especially those mentioned in Chapter Four, have contributed to her thoughts and formulation, most of the following points are hers, and with several exceptions, she will refrain from citing sources both out of exhaustion with the footnoting process and because she is as good a source and re-source.



## PSYCHOTHERAPY AND POETRY THERAPY

As with the general area of counseling and therapy, there is the question of how effective psychotherapy is. What is accomplished in therapy that might not be accomplished in normal living? The growing mass of evidence seems to support the conclusion that:

the average effects of therapeutic intervention (with the average therapist or counselor) are approximately equivalent to the random effects of normal living without treatment (control groups, or what has been traditionally labeled "spontaneous" improvement) (Truax and Carkhuff, "Toward Effective Counseling and Psychotherapy: Training and Practice, 1967)

Other studies (Levitt, B. E. "The Results of Psychotherapy with Children: an Evaluation," Journal of Consulting Psychology, 1957, 21, 189-196), (Eysenck, H. J. (ed.) Behavior Therapy and Neurosis, New York: Pergamon, 1960), (Mink, O. G. and Isaacson, H. L. "A Comparison of Effectiveness of Non-directive Therapy and Clinical Counseling in the Junior High School," School Counselor, 1959, 6, 12-14), share in the conclusion set forth by Matarazzo ("Some Psychotherapists Make Patients Worse!" International Journal of Psychiatry, 1967, 3, 156-157) that

the evidence now available suggests that, on the average, psychotherapy may be harmful as often as helpful, with an average effect comparable to receiving no help.

Similarly Allen Bergin (A. E. Bergin and S. Solomon, "Personality and Performance Correlates of Empathic Understanding in Psychotherapy," paper presented at APA meeting, Philadelphia, September, 1963) concludes an

exhaustive evaluation of over 200 studies of therapeutic outcomes with a call for a moratorium on "a large proportion of the traditional therapy currently practiced."

Our faith is that whatever is powerful in traditional therapy resides in the work of a minority of its practitioners. . . there is little reason to reinforce or reassure the ordinary practitioner of psychotherapy, for we expect future research to show that his labors must be revised toward matching the behavior of a few successful peers who actually obtain most of the therapeutic results. (Oden, Thomas C. "A Populist's View of Psychotherapeutic Deprofessionalization" Journal of Humanistic Psychology, vol. 14, No. 2, spring, 1974)

The preceding quotations are included in an effort to suggest that new and more creative approaches to therapy and growth are needed. These sources speak to the argument that traditional therapy as it has been practiced may not be as effective as peer therapy or no therapy at all. The author reads these with a slightly different pair of glasses--i.e., that we not necessarily abandon psychotherapy per se, but that we take from its practice what is helpful to individuals and generally go about it in new and more creative ways. Poetry Therapy is one possible solution.

#### POETRY THERAPY: TECHNIQUE OR THERAPY

Poetry Therapy is both a therapy (with purposes and goals) and a technique. There are groups which are primarily Poetry Therapy groups; these groups use poetry as a main focus. And there are therapy groups

which use poetry as a secondary technique when it seems appropriate. For example, Gestalt therapists might use poetry in achieving purposes of Gestalt Therapy. Or, Gestalt therapists could conduct a Poetry Therapy group and utilize Gestalt techniques. Both are possible.

Poetry Therapy can be applied as a technique to any other therapy; and other therapy techniques, such as Gestalt, can be applied to Poetry Therapy. In writing about Poetry Therapy it is difficult to keep the distinctions clear at all times. For, if a poem is being used in a group, no matter what its orientation, Poetry Therapy is taking place. It would be nice if it were possible to set out a complete set of purposes of Poetry Therapy as a therapy that would apply to all therapy groups at all times. Such a statement is impossible, for the purposes of one therapy orientation are not always in conjunction with the purposes of another. Poetry Therapy as a technique is more adaptable to specific therapy orientations.

There is no one set of purposes of Poetry Therapy. Each individual therapist has his own purposes according to his own training. And there is no one set of assumptions as to Why and How Poetry Therapy works, for each therapist brings his own set according to his individual orientations. However, there are many overlapping assumptions. In Chapter Eight the author states many of her own assumptions about How and Why Poetry Therapy works. Many of these are shared by other Poetry Therapists.

## POETRY THERAPY: TWO SCHOOLS

### Adjunct Therapy

There are many people practicing Poetry Therapy who consider it as an adjunct therapy, i.e., as a therapy in addition to regular on-going therapy. Those who take this view see groups as times to generate awareness and feelings but not necessarily work them through.

### Therapy

Others practicing Poetry Therapy consider it as a therapy in its own right, i.e., as a time and place to both generate and work through feelings and awareness.

The fact that there are two distinct schools makes references to Poetry Therapy somewhat fuzzy at times, for it is not always clear if distinctions are being made between the two distinct, and exclusive, orientations.

### FACTORS WHICH COMPLICATE A SIMPLE DISCUSSION

It is difficult to spell out in a simple fashion exactly what the format and process for a Poetry Therapy group is. Specifically, there are three areas which complicate such a discussion. First, there is the difference in orientations of the therapist, i.e., whether he views Poetry Therapy as a total therapy or as an adjunct therapy; second, there are the different kinds

of groups, i.e., large lecture groups which are one-shot groups and smaller, but not necessarily so, on-going therapy groups; and third, the difference in focus and process between groups which emphasize reading of poetry and those which emphasize writing. Aspects of these differences have been discussed and will be discussed at length, and related threads will weave in and out of the discussion that follows.

#### WHERE GROUPS ARE BEING RUN

The January-February 1972 issue of The Sciences, a publication of the New York Academy of Sciences, notes that more than four hundred therapists and a great number of agencies now practice Poetry Therapy.

Some of these institutions are:

Post-Graduate Center for Mental Health, New York  
 Gracie Square Hospital, New York  
 Meadowbrook Hospital, New York  
 Pilgrim Street Hospital, New York  
 Project Teen-Aid, OEO, New York  
 Poetry Therapy Center, New York  
 Manhattan Street Hospital, New York  
 Jacobi Hospital, New York  
 Crownsville State Hospital, Maryland  
 Dixmont State Hospital, Pittsburgh, Pennsylvania  
 Indiana Guidance Center, Pennsylvania  
 New York Board of Education  
 El Camino Hospital, California  
 Langley-Porter Hospital, California  
 Institute of Pennsylvania Hospital, Philadelphia  
 Gowanda State Hospital, Helmuth, New York  
 Slippery Rock State College  
 San Francisco General Hospital, California  
 McLeans Hospital, Belmont, Massachusetts



Hillside Hospital, Glen Oaks, New York  
 Cumberland Hospital, Brooklyn, New York  
 Mid-Way Counseling Center, New York  
 Long Island University, Brooklyn Center  
 University of Massachusetts, Amherst  
 Odyssey House (N. Y., Mich., Utah, N. H.)  
 (Poetry therapist listed on staff)  
 University of Florida, Gainesville  
 Dowling College, Suffolk County, New York  
 Lutheran Medical Center, New York

## STRUCTURE

### Number in Groups

Group size varies from group to group. Some one-shot lectures given by noted poets are often large, numbering over 100 people. Most on-going groups average between 5-10 people. This, of course, depends on the circumstances of the group. For example, Roger Lauer describes a group that met from 1967-1970 at the Langley-Porter Neuropsychiatric Institution in San Francisco. This one group, meeting from 1-2 hours a week, ranged from 3-40 people. (Lauer, 1972)

Group size also varies upon the orientation of the group. Where groups are a substitute for individual or group therapy, i.e., when Poetry Therapy is not seen as an adjunct therapy, ideal size is smaller than groups which are seen as an "adjunct" therapy. Adjunct groups can be larger, for it is less important that each individual have group time and attention. Where more individual attention should be given, groups should be smaller. Where groups are established to generate feelings and awareness rather than to work

through specific issues and problems, more people can participate. In such cases, feelings are worked through more thoroughly in on-going individual or group therapy sessions.

### Length of Groups

Poetry Therapy groups range in length depending again on the circumstances of the group. Most sessions last from one to two hours, with some academic institutions including theoretical sessions in a third hour. In most hospital settings and clinic settings, groups last about 1-2 hours.

Over time, groups last from one session, to weeks, to months, to years. In many academic settings, groups run according to the school calendar. In many hospital settings groups run, as at Langley-Porter, for a period of years. Of course, where groups run for this length of time, the populations is continually shifting, and there is no one "group" that is identifiable.

Most groups meet once a week; some meet twice a week. But this does not mean that nothing gets read or written during the interim time. On the contrary, much time is spent by individuals outside of the group on reading and writing, thinking and feeling.

### THREE KINDS OF POETRY THERAPY GROUPS

#### Emphasis on Reading

1. Large Groups. Many groups, especially in hospital settings, are more lectures or "readings" than groups. Poets or guest lecturers are brought in and address a large audience consisting of patients, attendants, doctors, nurses and other hospital staff. Such guest speakers have little responsibility to the group as a whole. They are ignorant of specifics about individual patients. Case histories of people attending the poetry session are not relevant.

While the emphasis is on the reading of such poetry, more takes place during the approximately two hours that the group is together. The lecturer, poet, must make an initial selection of what he intends to read during the evening. He has to be aware of the appropriateness of the poem for the context in which he is reading. He should be aware of the themes, language, abstractness, concreteness, tones and feelings of poems that he intends to read. And after having read, he should be able to make an evaluation of his readings: how were the poems received, what was the effect on the total group, on individuals, did the readings trigger constructive discussion afterwards, were any requests made by individuals attending the session?

As was mentioned earlier, it is advisable for lecturers to be able to spend time with those who have attended the session on a more informal basis. Patients who have to be shuttled back to their wards immediately upon the conclusion of the lecture lose something from the evening and are reminded of their status within the hospital. In addition, ideas and feelings which may be triggered during the evening may go unanswered, denying patients the opportunity to test their intellectual capacities and sense of appropriateness of time and place at working through feelings.

2. Small Groups. A second kind of group, usually smaller in size, is one where the therapist comes prepared to read several poems to start off discussions and to start an exploration of feelings, thoughts, identifications. Selection of poems, as mentioned above and as described more fully in Chapter Four, again is important. Discussion generated off of poems read by the therapist is crucial to the life of the group; this is especially true in smaller on-going groups where a core number of participants meet regularly. For it is in these discussion that patients begin to open up and explore their own experience and feelings.

#### Emphasis on Reading, then Writing

A third kind of group, usually a smaller group, begins with the therapist reading a poem, develops into a discussion of feelings, and frequently ends with patients writing something of their own. Where there

is this sequence of reading, discussion and writing the transition from reading to writing is a critical one. Functionally, the therapist plays an important role. He should be aware of how to facilely move the group from a verbal inter-change among group members to a time spent more in communion with oneself. He should also think about how best to encourage individuals to write for themselves, by themselves, at times outside of the group. The therapist faces a constant dilemma in such a group--how to find the proper balance of reading "known" poets and those poems generated by group members in and outside of the group sessions. Finally, discussion, reaction, feedback, and "work" with and among patients are all important elements of such a group.

### Emphasis on Writing

1. The emphasis. Some Poetry Therapy groups use the writings of "known" poets only secondarily, if at all. The major focus of the group is on the group itself and what may emerge from the group, both verbally and written. Groups which emphasize writing by the patients have dynamics and problems in common with the other three categories of groups; they also have problems unique to themselves. Finding the balance between "poetry" and "therapy" could be said to be a common problem. In groups where the writing is stressed, the purpose of the group is less clear. Is it a kind of creative writing group? Is it a therapy group? Where does one stop and the other begin? How active should the leader be in "getting people to write"



versus waiting until something gets written? How laissez-faire can a group leader be while still facilitating his group and yet not giving up responsibility for his group? (This would be true of all four categories.) Should a leader come to a group meeting with a program set up in his mind, exercises which will generate feelings and awareness, or should he have his "bag of tricks and exercises" available but use them "spontaneously." There are some people who suggest that the more structured a group is, the more "work" gets done, as participants don't have to spend time struggling to define itself and its boundaries--as in a t-group. They feel that with greater structure provided by the leader, the participant will have more freedom to explore and discover for himself within that structure, in often new and unexpected directions. Others feel that complete relaxation of all structure is more than adequate, and as in group therapy a theme or topic will emerge.

For any group which is using writing as a vehicle for its growth, the problem arises for the leader of how and when to get people writing. Should he provide the exercises that generate emotional issues, or should he let things flow and then at a peak moment of feeling in the group suggest an exercise, like five minutes of writing, as one way to capture the feelings in the room. Once an entire group has spent time writing individually, whether five minutes or forty-five minutes, the question then arises of what do you do with the poems (prose, etc.) that get written? This is no easy question to answer.

2. The Tension. It raises the question more acutely of "is this a Poetry Therapy group or a Poetry Therapy group?" This depends on the context of the group, the expectations of individuals coming into the group, and initial contracting. If emphasis is placed on encouraging people to write then it may be advisable to encourage as many as are willing to read what they have written. This opens up everyone at least a little to the other group members and allows for them to see that many of their perceptions and feelings are shared. If emphasis is placed on encouraging people to deal with what they write, to "work" on the issues that are raised or addressed in a poem, then much more time has to be taken for one individual at a time, allowing him to warm up to working on the issues, establishing trust, getting into the issues, and then getting out of the issues in some way that brings closure to the work. Meanwhile, what about the other group members? When one person is focused on, what is the role of other group members? This, in part, depends on the orientation of the leader. If the leader is the prime person working with the person who wrote the poem, other group members may feel uninvolved and "bored." If the entire group becomes involved, or even a few people, a real working through of a problem may not occur due to interruptions and people coming at an issue from different perspectives. Another dilemma, when time is taken at the end of a group to write, what is done with poems that get written? Should they be handed in for the therapist? Should they be read in the total group immediately? Should they

be saved for the following session as a way to begin the group? Should they be considered private? The overall question behind much of this discussion is how can we best use the vast amounts of material that get generated in Poetry Therapy groups. Maybe a simple answer is--we can't.

3. Publications. In many hospital settings, hospital newspapers have started up with patients taking prime responsibility for the running of the paper. This includes gathering materials, selecting which poems should be published, editing, typing, printing, collating, advertising, and distributing.

Two examples of such publications are the Mirror, a patients' magazine published every three weeks, averaging about 24 pages, published at McLeans Hospital in Belmont, Mass. This magazine included about 5-10 poems, continuing installments of a novel, movie reviews and other articles of current interest, 1-2 short stories, 3-6 illustrations, a statement of the editorial policy, a cover and an end piece. Patients were responsible for soliciting new material and for writing thank-yous. Here patients by working together learned to share responsibility and learned to work together as an organization. There is no simple answer as to whether this was a task force or a therapy group. (McDowell, David, "Bibliotherapy in a Patients' Library," Bulletin of the Medical Library Assn., 59, July 1971, pp. 450-457). The second example, at the Institute of the Pennsylvania Hospital, The Tatler, was initiated in 1960. Modelled after The Illuminator, which dated back to 1843 and was a hand-written literary journal, The Tatler took on many forms.

It started out as a newsletter spreading information about activities going on within the hospital. When announcements of events came from the patients rather than from the hospital authority, attendance increased. Initially The Tatler staff was entirely made up of patients. Over time additional "staff" was included, this time hospital staff: occupational therapist, nurses, and a resident psychiatrist. Eventually, the staff included the whole hospital community. Profile of the paper changed on numerous occasions. The newspaper became more of a literary work where any type of literary writing was accepted. A poet was taken on to the staff, and poetry predominated. The success of The Tatler was evident. The monthly journal of twenty to thirty pages was read by a growing number of people. Now, in addition to the patient population, the medical staff, Board of Directors, members of the women's auxiliary, and other community organizations were among the readership. Among others, a newspaper editor and an English professor became regular subscribers. (S. Sue Robinson and Jean K. Mowbray, "Why Poetry?" in Poetry Therapy, pp. 188-199)

Throughout the literature, examples of poems that have been written in Poetry Therapy groups are included. Volumes could be filled with such poetry. Although tempting to include such examples, only one poem will be included at this point. The following poem was written in prison and is from a currently unpublished anthology of poetry compiled by Chris Fanta of the Harvard Medical School.



## THE NIGHT BEFORE CHRISTMAS

'Twas the night before Christmas and all through the ward,  
The patients euphoric with thorazine snored.  
The keepers locked up every door in the joint  
And joined in gin rummy, a penny a point,  
When over in "max" there arose such a clatter,  
I threw my restraints to see what was the matter.  
There in that well-lit barbed wire yard  
A bristling patrol of Security Guard  
Advanced on a fellow all dressed up in red,  
Who stood slightly dazed in the wreck of a sled.  
"Policemen. How lucky," the fellow assayed;  
"For I fear I'm in desperate need of some aid.  
I was flying along on my annual cruise  
When my radar and radio both blew a fuse.  
My directional finder was miles off the beam,  
So I jettisoned my reindeer and caught the jet stream.  
An air pocket caught me in the mountains somewhere,  
And much to my shame I crashlanded here.  
I must find a phone," he warmly entreated,  
"I've an urgent mission that must be completed."  
The cops looked around with a shrug and a wink:  
"And who," asked the sergeant, "are you, do you think?"  
He showed them his gift bag, his beard white as snow,  
And favored them all with a loud "HO HO HO."  
He kicked up his boots and waved a red sleeve;  
"Who else would be out dressed like this, Christmas Eve?"  
"Who else, indeed," cried the cops in a panic,  
"But a stark raving mad paranoid schizophrenic.  
Quick, get the doctor, the Stelazine get,  
A straight jacket, handcuffs, attendants, the net."  
They seized the old fellow and whisked him inside;  
He was clapped in restraints and stripped to his hide.  
They x-rayed his chest and checked his incisors  
And filled up his veins with five tranquilizers.  
"Cut off the hair from his chin and his head  
And mark him "Reduction"--no gravy or bread."  
The doctors observed him with much agitation:  
"He's clearly psychotic, with weird hallucination,  
Keeps screaming this bit of delivering toys  
And spreading good cheer among girls and boys."



The Rorschach recorder and T.A.T. tester  
 Declared him a potential child molester.  
 The clinical psychiatrist diagnosed it a trauma  
 Incurred when a reindeer frightened his mama.  
 They locked up his sleigh and impounded his packs  
 Of shiny new playthings, and locked him in max.  
 If you're ever down on the hospital grounds  
 Enjoying a tour of its preordained rounds,  
 There's a skinny old fellow with short silver hair  
 Loaded with Thorazine, propped in a chair.  
 The guide in a whisper will say with a pause,  
 "And that poor old devil thinks he's Santa Claus."  
 (As told by a fellow patient) by Howie Dooin from  
The Insider, 12/65)

#### Further Discussion of the Dynamics Within A Poetry Therapy Group

As can be seen from the above discussion, there are many dynamics which are not specialized to any one of the three major categories of groups: reading group, reading and writing group, writing group. There is much overlapping. So, rather than repeat for each category, the following discussion will be more general; some topics will not apply to all categories.

In all groups, and especially where the number of participants is smaller and the group is ongoing, the therapist/leader must be aware of many things going on at any one moment. He should be aware of the individual needs within the group; he should be aware of the group interactions and group needs; and he should have a sense of where the group is headed. If he is providing structure and exercises for group meeting, he must have an idea of how effective his exercises are at generating awareness and feelings.

In general, he should be versatile and either make up an exercise or deal with a situation in a creative way "on the spot."

Much of the following discussion is an outgrowth of the writer's own experience running groups at the University of Massachusetts. One group was made up of a total of nine people: two female (graduate student) leaders, one female graduate student, one male graduate student, four female undergraduates, and one male undergraduate. "Our group" or "we" refers to this group experience. "We" also may refer to the author and her co-leader.

### Clear Contracting and Group Dynamics

Clear Contracting is essential to the success of a group. We found that the tension between Poetry Therapy and Poetry Therapy could have been less abrasive had we been clearer initially. We were fuzzy in delineating what the group was to be, and group members, because there was no clear class description, were equally fuzzy about their own expectations. The result was that we were constantly trying to find the balance between poetry and therapy. At times we would spend the entire group session focusing on one or two people. Then the following week we would virtually request that people come prepared to share the mass of writings that had been accumulating over the weeks. We all felt the bind of wanting the best of both worlds and found 2-1/2 hours every week not enough to deal in depth with both worlds.

How we could have initially contracted differently, we were not altogether sure. For the benefit of the undergraduates who had never been in groups of any sort before and whose education consisted of lectures and large classes, the shift to a small class where they talked about themselves was a shock in itself. They really didn't know what to expect, and we (leaders) were a bit naive in expecting them immediately to take responsibility jointly with the group and define it and set out reasonable expectations. The "therapy" side of our group was something new in itself for them, and we did an inadequate job of initial contracting with them. We did spend much of our first session together talking about what the group would be. Together it was decided that we (leaders) would initially take more responsibility for structuring the group by providing some exercises to generate awareness and feelings, structuring in writing time every session, sometimes 25 minutes at the end and sometimes five minute spot-writes at times when there was a lot going on in the room, working with poems that were written, and processing afterwards. We made clear that over the duration of the group, we hoped that it would begin to run itself and that enough would be going on that less and less structure would be needed. This, in fact, happened.

Clarifications the writer would make from the beginning would be to state that the group will be both therapy and poetry, and that we will constantly be struggling with the balance of the two during the life of the group. (Obviously such struggle for the balance would not be appropriate

for a group of schizophrenics.) This needs to be stated and restated again during the group. We would require everyone, ourselves included, to keep a journal (thoughts, feelings, words, phrases, dreams, conversations, etc.) for the duration of the entire group. We would strongly suggest that everyone try to write something every week outside of the group--a poem, a dream description, a mood--and bring it to the following meeting. In that way, we would always have material to work with. (But, it is hard to harness the creative spirit, and we wouldn't want to risk losing it by trying to have it there when we want it there. Spirits are not so tame and manageable.) We would also add the option of bringing in something by an outside author they like. This keeps members involved while not forcing them to create. We would stress group inter-action as being important to the group, and, for the benefit of those who have never been in groups, would reiterate this periodically. In an educational setting, we would require a final paper of some sort (assessing own poems, growth, development, what meaning the group had, issues, whatever) of everyone. In this first group we failed to do this, and we lost a great deal of learning in not having everyone spend some time alone drawing together the experience.

In a second group we conducted, despite our initial efforts to clarify expectations before the group even started and our efforts at clear contracting, we encountered many dynamics similar to the first group. The second group, numbering eleven, was made up of graduates and undergraduates, those



with group experience and those without group experience. There were: two female graduate leaders, one graduate female, three undergraduate females, and five undergraduate males. Again we faced the tension between Poetry Therapy and Poetry Therapy. Initially we structured the groups with exercises and shared much material that was generated off of these exercises; but we found that the exercises were getting in the way of real interaction within the group. So, we stopped providing a structure and allowed the group to interact and work with itself. As a result we lost much material that was being written outside of the group. We did require final papers to enable students to pull together the group experience and to work further on issues that they had focused on in their journals. These final papers evidenced the fact that much more was written outside of the group than ever was shared in the group.

Of course, if the group is in a hospital or non-university setting, this would not be as important a requirement--although it might.

The function of poetry within a hospital group is slightly different than a university group. In hospitals, the needs of patients are different. There is more need for therapists to take greater responsibility in bringing structure into the group. This could mean selecting poems to read or preparing a series of exercises. Where the therapist selects poems to read and then reads them, he has to make the delicate transition from the meaning of the poem for the writer of the poem to the meaning of the poem for the



person hearing the poem. Which is more important? How can a group talk about both dimensions of the poem? It is important that patients be able to differentiate their own feelings and meanings from those of the writer. It does serve a purpose for the patient to see how another human being extricates himself from his own turmoil. Yet, we shouldn't lose focus of the meaning and intention for the writer. In terms of the patients and their own issues, the meanings that they establish for the poem are really most important.

The therapist should be skilled in group process and should be able to facilely tap the different identifications with the poem that people have in the group.

In Poetry Therapy groups, whether the focus is on reading, writing, or both reading and writing, people talk about themselves metaphorically. The therapist should have a keen sense and tolerance for symbolic interaction, and he should know how and when to pin-point, clarify and force a person to make the transition to real rather than symbolic terms. The therapist should also be able to help a group member gain a distance and perspective on himself through his writing. Over time, themes and patterns become evident (to other group members as well, not just the therapist), and these are valuable to work with. The intensity of poetry and the "meaning of the moment" changes with time, and it is helpful to have this pointed out. In all, the therapist/leader should be flexible in his role of organizer, structurer, therapist, leader, participant, teacher, learner. Ideally the

more group members can assume these same roles, the more worthwhile and growthful the group will be.

Writing is a very risky process for many people. And more frequently than not, people have "blocks" or "fears" about committing anything to paper. The making of a feeling tangible and permanent often feels like a major commitment. Group members should be encouraged to take that risk. The therapist can help in several important ways. First, by simply being aware, hopefully through his own experience, of the risk, pain and anguish that often go into writing, he is more sensitive. When suggesting exercises, the therapist/leader should be careful in his choice of words. He should suggest or invite people to try the exercise, and afterwards invite them to read what they have written, but not demand or require. The voluntary aspect of groups is important, and more often than not, people will eagerly want to share their creations when they feel safe.

This leads to a very important point. In a Poetry Therapy group, as opposed to an English class, it is the process of writing and the content of what is written about (man's own experience) that is of prime interest, and not the product of the completed poem. Therefore, there is no room for judgement of quality of a poem or critique of meter, wording, spelling, or general structure. We are less interested in a form of the poem than in the form of the person writing the poem; we are less interested in the style of the poem except insofar as it reflects some aspect of the style of the writer.

So, again, it is important to encourage a person to share what he has written, but not require same. This implicitly is showing the respect for the person rather than regard only for what is written.

In this sense, should a poem be criticized? (Are poetry criticism courses worth taking?) Our answer is NO to the first question. We feel very strongly that a poem should be encouraged and validated, or rather the writer of the poem should be validated for writing and sharing.

Our reasoning is this: What we observe in others and in ourselves is very unique. After reading a poem recently written, we are so intimately connected to the poem that we can barely differentiate ourselves from our poem. Especially with very feelingful poems, there feels like little difference. So any "criticism," no matter how literarily constructive, feels like a criticism of "ME," And it hurts, and "I hurt," and we are less willing to share the next time.

Similarly, when we observe/hear others reading their poems we note something very unique. When they finish we realize that the focus of our attention is not on the poem that has just been read but on the person who has read the poem. And that person is vulnerable and raw and open. We feel and see intense embarrassment in ourselves and in others after reading a poem-- eyes cast down, not knowing where to look or whom to look at, not knowing how others will react to the poem which speaks from our insides. That embarrassment is sheer vulnerability--for it is at such times that there is

nothing left to hide. It's all right there. We are identified with our poem, right there, feeling very noticeable and unable to hide. (See example in Chapter Eight of Joe.) That vulnerability should be respected and treated gently, for it is at such times that the writer/reader is at his most fragile self. Some patients because of this painful sensitivity bring their poems to share but will not read them themselves.

### Ways of Working with a Poem

There are many ways of working with a poem, and no one way is necessarily better than any other. It really depends on the therapist. Timing is the important element. A formula might be--

(therapist)	(group member)
Timing + sensitivity + an emotionally charged issue =	
productive work	

The author's own preferred style is to proceed gently and supportively suggesting that always more can come from continued work with what is written. This can be done explicitly or, better, implicitly.

Chapter Three described several orientations to working with poetry: Freudian free association, Jungian association and mental wanderings, looking at themes, symbols, etc., gestalt, etc. Not all methods are appropriate at all times, and it is necessary for an eclectic therapist/leader to be judicious about how and when he works. There is a delicate balance between the "Here and Now" focus that exists immediately after a poem is read and the

possible "There and Then" focus of where work on the poem might lead.

There are other ways to "work" with a poem that has been read rather than just the therapist working with the person who read his poem:

1. A psychodrama could be suggested as one way to continue the mood or feeling tones expressed in the poem. This would involve more of the total group.
2. The entire group could split into dyads, or triads, and share what each has written off of an exercise or during the week or during a writing time. The difficulty with splitting into dyads is that it is often difficult to come back from the intimacy of the dyads to the total group. In dyads, everyone has air time, and everyone has attention. That doesn't always happen in a larger group.
3. In a more experienced group, perhaps a training group, members could work with each other in dyads or triads and then could meet as a total group afterwards to share, not the specifics of what went on during the dyad, but the process of how the poem and person were worked with.



4. If a group is interested in learning different styles and modes of working with a person in a Poetry Therapy group, there are many variations on the theme of a fishbowl where one person works with another and the rest of the group watch, process and give feedback.
5. Or teams of people could work with a client-member, or people could work when they felt ready in a piggy back fashion. It is important to add that there is a delicate balance between really dealing with the person as client in a responsible way and then taking time afterwards to process and learn from the educational training side of the experience.
6. Other possible models for working with a poem could be incorporated into a "teaching of counseling" course where the poetry therapy group is used fundamentally to teach basic counseling skills.

#### After "Working"--What then?

Just as the time immediately after a person reads his poem is one of fragility and vulnerability--i.e., a crucial time for the therapist to know what to do--so the time immediately after working with a person and his poem

is a crucial time. It is assumed that the therapist/leader came to some resolution or closure with the individual concerned. But what about the rest of the group? Especially where the interaction has been primarily between the therapist/leader and one other person, the rest of the group could be in one of many places. They could be bored and uninvolved, they could be confused by the process and way the therapist worked, they could be fearing themselves to be that exposed in front of a group of people, they could be eager to jump in and give "advice," they could be very touched by the person involved and feel that they had shared in an important and intimate moment, and they could be identifying to such a degree that they themselves are in need of some support and attention.

In the groups we have conducted, we never found the "right" way to always be together after the focus of attention had been primarily on one person. And throughout the literature, there is virtually nothing written on the actual process of working with poems that are written and then what follows. One crucial point to add is not whether the therapist focuses on the poet or not, but how long he does and how exclusive it is of other group members.

The author would like to suggest one model for the "after the work" point in the group's life. Essentially, it is a model used after work in a psychodrama group. When the therapist and "patient" have finished working, there probably will be a silence of some sort (awkward, eager, embarrassed,

intimate, emotional). If this process is established before hand, other group members will have a vehicle to deal with whatever it is that they are feeling at that delicate moment. That process involves a short statement, maybe 2 minutes, from every group member (or maybe any group member who wants to). The focus of the statement is not to continue working with the person who has just worked. The focus is on the individual group members and what is going on inside of each at that moment. Very frequently this involves a process of identification with the person who has worked. What gets communicated with this kind of identification is essentially the message "I have the same problem. You are not alone." This helps take the burden of the focus of attention off of one person and shares it among all, each becoming aware of the other group members and what is going on inside of them as well. It is not a feedback session, but rather a time for others to share a part of their own, often vulnerable, process. This model also serves another very important function, for it allows the therapist to know what is going on inside of everyone and points out individuals who need attention and continued work.

#### SUMMARY

The author has tried to pull together some ideas about what a Poetry Therapy group is and how it functions. Because so little has been written about the process, this is only a partial description.

There are three basic kinds of Poetry Therapy groups: Where the reading is most important, where both reading and writing are important, and where the writing and expression is most important.

The dynamics of working with poems, individuals and the group are dependent on the therapist/leader's preferred style and training. There is no one way to run a Poetry Therapy group. The most effective way to run a group should be a constant question in the group.

Virtually nothing has been written about the how's of working with individuals in a group and then the how's of working with the group afterwards. Maybe as journals fill up with the poems that get written off of Poetry Therapy groups, readers will feel surfeited and will start demanding more of the writers of such articles.

Throughout this chapter I have spoken about the Poetry Therapist as functionally being very important to the Poetry Therapy group and how it functions. Although I have included many of his specific functions and sensitivities here, the Poetry Therapist deserves a chapter of his own.

## CHAPTER SEVEN

### THE POETRY THERAPIST

#### INTRODUCTION

What is a Poetry Therapist, who can become one, what are some of the qualities necessary, how is a Poetry Therapist different from a regular therapist, and how can a person become a Poetry Therapist and be certified?

These are all good questions and ones that are frequently asked.

Unfortunately, because the field is still in its infancy, there are no simple answers. And there is no one person to whom we can turn. The Association of Poetry Therapy in New York comes the closest to being the main source to answer such questions. They are responsible for certifying Poetry Therapists. Yet, even they acknowledge that it is difficult to be certified as a Poetry Therapist, and they encourage people to go out and conduct groups whether or not they are certified. So, when talking about What and Who a Poetry Therapist is, there is a definite fuzziness in the author's own mind as to whom she is referring. Generally, she is not restricting the term Poetry Therapist to designate a certified Poetry Therapist.



## LEADERS OF POETRY THERAPY GROUPS

An additional question can be asked: are leaders of Poetry Therapy groups necessarily Poetry Therapists? They are not necessarily one and the same person. A leader of a group can be a lecturer having very little contact or interaction with the group itself. This person may not be a Poetry Therapist.

There seem to be three categories of leaders of Poetry Therapy groups: the lecturer and poet, the person who sees Poetry Therapy as an adjunct therapy, the therapist who sees Poetry Therapy as a therapy in its own right. In the second two categories there is the added distinction of whether the therapist focuses on the poetry or whether he also is open to utilizing the group process to enhance personal growth and self awareness.

A) Many hospitals invite guest lecturers or poets to read their works and conduct one or two hour lecture/discussions. (Kramer, in Poetry Therapy) Such speakers, not necessarily considered Poetry Therapists, are responsible for sharing of themselves through their writing and their craft. For the most part they address large audiences where there is little interaction among the people attending the session. Little is shared of/by the patients themselves, and there is no real reason for the lecturer to feel responsible for those in the audience. His role is, in a sense, to be a model-- to allow patients to see another human being who has dealt with his own feelings and experiences through poetry. He also can supply numerous

examples from literature of others who have extricated themselves from the mire of emotional confusion and distress typical of so many creative minds.

B) There are two categories of people who consider Poetry Therapy as an adjunct therapy: those who are themselves trained therapists, and those who are not trained in therapy but who may be poets, English teachers, nurses, librarians, etc.

Many psychotherapists have discovered the effective use of poetry in the therapeutic process by accident and have incorporated Poetry Therapy into their practice quite by chance. These therapists use poetry as a technique to augment their other therapy training. Frequently these same therapists conduct Poetry Therapy groups in addition to their on-going therapy groups. Many, but not all, of these groups are run on a "medical model" principle with the therapist addressed formally as Doctor or Mister, with patients bringing in poems for approval by the therapist. Poetry, in such cases, is seen as part of the patients "cure." However, the real work of therapy occurs not in the larger group context, but rather in individual therapy.

Frequently, psychiatrists are interested in the patient's productions as expressions of their unconscious conflicts and feelings--although this is not universally true. The therapist's problem is not only to analyze the inner struggles of the patient but to develop the patient's capacity for creative synthesis. Psychiatrists who consider Poetry Therapy as an adjunct therapy often keep the real work of therapy restricted to the therapy sessions and

allow for a less intensive experience in the Poetry Therapy group.

The second category of leader who considers Poetry Therapy as an adjunct therapy are those people who are not trained in therapy skills but may be English teachers, nurses, librarians, poets, and others. Many of these people enjoy the involvement of Poetry Therapy groups and feel that they help people to gain access to new and exciting and creative parts of themselves. However, when it comes to really working in depth on any of the issues that may get generated or focused on during the group, they prefer to leave that kind of work to professionals trained in therapy.

C) There are two categories of people who consider Poetry Therapy not as an adjunct therapy but as a therapy in its own right. The first is the therapist who feels competent to handle whatever emerges from the therapy group, from poems which patients bring to the group, to the interactions within the group. He considers himself both therapist and group facilitator. His therapeutic expertise has the added dimension of facilitating the process of group inter-action and communication. Medical background and history, although of interest, are less important than "here and now" feelings which arise in the group. When and if he brings in poems to be read and discussed by patients, he does not offer meanings for the poems but instead elicits what meaning the poem has for the members of his group. He may choose to run his group almost as a creative writing group; in such cases he may come prepared with exercises to generate awareness and feelings. Yet, no

matter what he comes "prepared" for, he is always ready to deal with the group and its issues wherever it might be at a given moment.

The therapist with group facilitation skills does not necessarily consider his task to be one of analysis of the inner struggles of the patient. He sees himself as enabling the patient to begin to analyze and synthesize for himself.

Szasz points out that people who see themselves as group facilitators tend to reject the medical model as an ideological frame of reference and sociological prototype for behavior change. This means no longer referring to "patients," "mental illness" and "treatment"--much of the pejorative and objectivized language of pathology, as well as an elitist perception of knowledge. (Szasz, The Myth of Mental Illness, 1961) Group facilitators are helping to bring personal growth out of hospitals and into other settings; they are helping establish a growth model orientation rather than a sickness-health model.

The second category of leader who considers Poetry Therapy not as an adjunct therapy is the person who has gone through a training program for Poetry Therapists. Parker (in Poetry Therapy) cites F. Tyson, "Therapeutic Elements in Out-Patient Music Therapy," Psychiatric Quarterly, 39:315-327, 1965:



Obviously, not all psychotherapists have the interest, knowledge, skills or aptitude to develop a useful program utilizing poetry or the other therapeutic arts. We will have to rely on an increasing supply of specially trained therapists. These will be recruited primarily from among persons who wish to assist others yet cannot or do not wish to complete full professional training. Poetry therapists ought to possess that degree of dispassionateness and freedom from excessive interpersonal anxiety characteristic of successful psychotherapists.

### Training Poetry Therapists

Because of the growing interest in Poetry Therapy and the belief that the technique can make a significant contribution to mental health programs, it seems necessary to propose both graduate and undergraduate courses to provide specialized training leading to certification in Poetry Therapy.

Such training, which would result in more widespread use of Poetry Therapy techniques, would represent a practical utilization of fundamental relationships between literature and the psychic processes.

Rollo May states:

Many of us made the odd discovery in those college days that we learned a good deal more about psychology--that is, man and his experience--from our literature courses than we did from our psychology itself. The reason, of course, was that literature could not avoid dealing with symbols and myths as the quintessential forms of man's expression and interpretation of himself and his experience. ("The Significance of Symbols" in Symbolism in Religion and Literature, 1960, p. 13)



In 1933 Jung noted:

What is of particular importance for the study of literature in these manifestations of the collective unconscious is that they are compensatory to the conscious attitude. That is to say that they can bring a one-sided, abnormal, or dangerous state of consciousness into equilibrium in an apparently purposive way. (Modern Man in Search of a Soul, p. 165)

And S. I. Hayakawa adds:

The greater resources one has for achieving and maintaining adjustment, the more successful will the process be. Literature appears to be one of the available resources. . . . Even as one's physical health has to be maintained by food and exercise, it would appear that one's psychological health too has to be maintained in the very course of living by "nourishment" at the level of affective symbols: Literature that makes us feel that we are not alone in our misery; (emphasis mine) literature that shows us our own problems in a new light; literature that suggests new possibilities to us and opens new areas of possible experience; literature that offers us a variety of "symbolic strategies" by means of which we can "encompass" our situations. . . . The ordering of experiences and attitudes accomplished linguistically by the writer produces, in the reader, some ordering of his own experiences and attitudes. The reader becomes, as a result of this ordering, somewhat better organized himself. That's what art is for. (Language in Thought and Action, 1964, pp. 149-155)

and Robert Graves called poetry "mental medicine," a "form of psychotherapy" for the neurosis of poets and the culture they express and address.

(from Morris Morrison, "A Defense of Poetry Therapy, in Poetry the Healer)

What is needed is a new curriculum that would embrace training in both psychology and literature. This would legitimize, in a sense, the connections mentioned in the above quotations between psychology and literature. Edgar and Hazley set forth a curriculum for the training of Poetry Therapists. (Kenneth Edgar and Richard Hazley, "A Curriculum Proposal," in Poetry Therapy) Their feeling is that there need be no departure from conventional training in clinical psychology insofar as standard courses are concerned, but the courses in literature would need to be specifically designed not only to provide the necessary background but also to make the therapist aware of the symbolism and psychological themata in poetry.

Where therapists will be selecting poetry to read to their groups, he must have an extensive knowledge of the literature of poetry and a grasp of varying thematic scopes in the field.

As yet there is no one school which has developed a program of training for Poetry Therapists. Many give courses both on an experiential and theoretical level. Indiana University in Pennsylvania where Edgar and Hazley teach offer ongoing courses; Grand View College in Iowa is hoping to establish an undergraduate speciality in Poetry Therapy, and Lesley College Graduate School in Cambridge is adding a course in Poetry Therapy to its growing program in the creative therapies.

Proposed Undergraduate Study

It is suggested that someone desiring to become a Poetry Therapist major in either English or psychology, and minor in the other, and that as many of the following courses be included as possible:

Psychology

General Psychology  
 Developmental Psychology  
 Social Psychology  
 Abnormal Psychology  
 Personality Theory  
 Introduction to Clinical Practice  
 t-group, Group Dynamics

English

General Semantics  
 Classical Literature  
 World Literature  
 British Literature  
 American Literature  
 Shakespeare  
 17th Century Poetry  
 Romantic Movement  
 Contemporary Poetry  
 Introduction to Literary  
 Criticism  
 The Contemporary Novel

It is also suggested that as an undergraduate, a student should take a wide variety of courses in the arts such as music, history of art, etc., in order to have a broad overview of themes as they are developed throughout the world and throughout different disciplines. Some sort of practical experience is suggested as well for the undergraduate so he can familiarize himself with the kinds of people and dynamics he will encounter as a Poetry Therapist. To prepare him for becoming a Poetry Therapist, simulations and group exercises should be arranged to help him become at ease with his own role as a group leader and facilitator.

### Proposed Graduate Study

As in the undergraduate program, an ideal graduate program would blend courses in psychology and literature. Ideally, if an instructor's primary training has been in literature, he should acquire both practical and academic experience in psychology as well. Team teaching techniques are suggested so that courses are not too heavily literature oriented or too heavily psychology oriented. An institution which develops expertise in both psychology and literature will have many side benefits and will model a transdisciplinary approach to education.

It is important that a graduate program be flexible so as to allow the student to select those courses he wants to take. And as undergraduate majors are so widely varied throughout the country, a student should be able to assess for himself what courses he should take to fill out his graduate academic program.

### Suggested courses: Area of Psychology

1. Developmental Psychology: 3 credits

A comprehensive study of the principles of psychological development in the individual from conception to old age.

2. Abnormal Psychology: 3 credits

A systematic study of the full range of psychological functioning from the basic and accepted normal to the most extreme manifestations of pathology.

3. Psychology of Personality: 3 credits

A study of the significant experimental and clinical findings regarding the major theories and manifestations of personality.



4. Social Psychology: 3 credits

This course studies the interactions of people, the functioning human reacting to social pressures with his own biological and psychological make-up.

5. Projective tests: 3 credits

The purpose of this course is to provide the therapist with a working knowledge of the major projective tests such as Rorschach, MMPI, DAP, TAT, etc. It is not designed to make the poetry therapist skilled in administering these tests, but to enable him to understand a diagnostic report submitted by clinicians.

6. Techniques of Psychotherapy: 3 credits - 12 credits

A survey of various forms of psychotherapy: Freudian, Rogerian, gestalt, Jung, psychodrama, transactional analysis, R.E.T. This course, or combination of courses is intended to be as comprehensive as possible giving a sense of the inherent value of each of the orientations.

7. Group Psychotherapy - 3 - 9 credits

Sequences of this course should include a group experience as a participant, either a group therapy group or a t-group. In addition, theory of group development and relevant issues should be explored. Issues of group leadership are fundamental, and a practicum experience where the student can experience himself in a leadership position is recommended. In addition, group observations and group critique are also recommended to sharpen a student's observing skills and knowledge of what to do in a specific situation.

Suggested Courses: Area of Literature

1. Language and Behavior: 3 credits

A study of the social and psychological aspects of language as it relates to human behavior. Course will include considerations of the difference between appearance and reality, between self-concepts and actuality as expressed through language symbols. Focus on how the use of language may determine, change and affect personality development, contact with the real world, and self-cognizance.



2. Psychology and Literature: 3 credits

Course will relate psychology as it relates to literature. Will include a study and discussion of recent critical works that look at psychological themata in literature and the influence of psychology on literature.

3. Psychological Themes in Poetry: 6 credits (two semesters)

An intensive analysis of poetry with a concentration on the general themes of specific writers. Jungian archetypes and other recurring symbols throughout literature. It is an aim of this course to provide the students with a general knowledge of poems which can be selected for use in Poetry Therapy groups focusing and releasing feelings recurring around specific problems.

4. Seminar: 3 credits

Concentration for this course will be placed on an individual project. Possible formats for this course could be using a case study method and requiring that students select the appropriate poems for use in a given situation. Seminar should be flexible to meet the needs of the students.

The above courses should supply the student with a basic foundation in theory and practice in Poetry Therapy. It is suggested that as much practical experience be incorporated into a student's program as possible. Optimal learning will come from experiencing Poetry Therapy both from leadership and participant perspectives and talking about the dynamics and learnings that take place. It is encouraged that as many practicum experiences and internship experiences be available as possible. Hopefully, the academic institution offering the graduate program will have access to a hospital, clinic or otherwise suitable institution in which to conduct a group.

Throughout the country there are already certified programs in dance, art and music therapy--why not Poetry Therapy? Hopefully as

programs such as the above get started and as attention is drawn to the growing field, there will be many such programs.\*

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\*Much of the above discussion comes from Edgar and Hazley's article "A Curriculum Proposal" in Poetry Therapy.

STANDARDS FOR CERTIFICATION OF POETRY  
THERAPISTS AND RELATED MATTERS:  
A PROPOSAL

FORWARD

Since poetry therapy as a recognized modality has been accepted by the healing professions as a valuable adjunct in the treatment of emotional dysfunction, it is the intent of this document to protect the public by setting standards of qualification, training, and experience for those who seek to engage in the profession of poetry therapist.

Teachers, librarians, counselors, and others not licensed by the state to practice therapy but who in the judgment of their various facilities have been authorized to adapt the uses of poetry therapy to their practice, must understand that theirs is an adjunctive role. Their understanding of the salutary and rehabilitative value of poetry does not represent a displacement of medical authority.

STANDARDS FOR THE CERTIFICATION OF THE  
POETRY THERAPIST

What is Poetry Therapy? Poetry Therapy is the use of poetry in the treatment of emotional disorders. The trained poetry therapist serves as subordinate to the attending physician in a program designed to assist the patient to a greater understanding of himself and the world about him, resulting in a more effective adjustment to society and better mental and physical health. Periodic evaluations, it is understood will be conducted by the acting psychiatrist and the staff to determine the effectiveness of the procedures employed by the therapist.

With Whom Is Poetry Therapy Used? Poetry Therapists customarily work with subjects attending an accredited facility for the treatment of mental disorders. Patients may range from the maladjusted and schizophrenic child to the disturbed adolescent to the various types of adult mental illnesses to geriatric cases, wherever behavioral modification is medically prescribed. Poetry may also be used in work with the mentally retarded, the cerebral palsied, the crippled, the blind, and those with multiple handicaps. Poetry therapy may be used in schools where students give evidence of emotional dysfunction. No program may be pursued unless it is monitored by a supervising psychiatrist, clinical psychologist, or mental health worker with comparable qualifications. Some poetry therapists may work in their own offices with patients referred by psychiatrists or other medical specialists who will continue to act as consultant to the therapist.

What Are the Opportunities for Poetry Therapists? The value of the arts in therapy continues to find greater recognition with each succeeding day. Already more than 600 hospitals and similar institutions employ music therapists. According to the National Association for Music Therapy "Undoubtedly there are many more who would like to have music therapy but there are not enough therapists." The demand exists throughout the United States and students from foreign countries are now coming to the United States for training in music therapy. More than half the states have Civil Service classifications which provide for music therapists.

What Are the Personal Qualifications for Poetry Therapists? Emotional stability is very important. The therapist, as a person, understanding himself as well as his fellow-man, is often as important as the modality he employs in treatment. There is no substitute for a genuine feeling and desire to help others. Patience, tact, understanding, and a healthy sense of humor are indispensable. The therapist must work well with other medical personnel without exaggerating his own importance in the therapeutic team.

What Educational Preparation Is Necessary for Poetry Therapists? A trainee in poetry therapy should have graduated from an accredited college with a degree in the humanities or the behavioral sciences. Equivalent credit may be granted for a combination of completed college courses and experience in a recognized institution. Recommended are studies in sociology, anthropology, psychology, art, music, and literature. There should be evidence of concentration in poetry covering the primitive, the classical, the post-renaissance cultures as well as the modern and avant-garde writing. The trainee must also provide evidence that he has been accepted into a mental health program as a volunteer or salaried employee under professional supervision.

What Is the Association for Poetry Therapy? Poetry therapy predates all current attempts to provide mental healing. Evidence exists of its use in preliterate times and in surviving primitive societies. The Greek philosopher, Gorgias, compared the effect of poetry on man's soul to the expulsion of evil humors from the body. Plato and Aristotle speculated on poetry as a healing modality. Freud referred to the poets as "valuable colleagues." "In the knowledge of the human heart," he wrote "they are far ahead of us common folk, because they draw on sources we have not yet made available to science." A considerable body of literature is available today on the structured use of bibliotherapy and poetry in public institutions, in schools, and in private practice in mental health programs. The publication of Poetry Therapy in 1969 by J. B. Lippincott and Company focused public attention on the work now



being done in this area and its future promise. Shortly thereafter the Association for Poetry Therapy was officially incorporated in the State of New York to set standards for the certification of future poetry therapists, to serve as a center for mutual exchange in new developments in poetry therapy and to provide for annual conventions where papers devoted to recent research may be presented and workshops set up for the exploration of new techniques.

#### Who May Become Members of the Association for Poetry Therapy?

There are two categories of membership. The first is reserved for psychiatrists, psychologists, social workers (MSW), nurses (RN), guidance counselors, registered rehabilitation counselors, occupational therapists, recreation therapists, educators, and librarians. The second category, that of associate member, includes professional poets and lay people not in the aforementioned groups, who are concerned with furthering the promotion of poetry therapy as a valuable resource with multiple applications both to the prevention and treatment of mental illness.

What Are the Requirements for Certification? Honoring the grandfather clause validation is allowed to those certified prior to February 1, 1973. Hereafter, no applicant may be granted a certificate as poetry therapist unless he meets one of the following requirements: (1) He presents evidence of holding the degree of doctor of medicine or a doctorate in clinical psychology or has been licensed to practice psychotherapy in the State of New York. (2) He has completed two years of supervised training under approved auspices--one year as trainee in poetry therapy and an additional year as intern in poetry therapy and have completed the course work hereafter.

To obtain designation of trainee in poetry therapy the applicant (1) must present proof of graduation from an accredited college, (2) or achieve equivalence through other study programs and experience, and (3) must have been accepted as a volunteer or salaried employee in an educational, rehabilitation, or mental health facility where he will be trained in poetry therapy under the supervision of a psychiatrist or registered psychologist.

What is the Role in Certification? The Association for Poetry Therapy incorporated in the State of New York will continue its policy of certifying qualified practitioners to pursue the vocation of poetry therapist according to the requirements set down by the standards committee. Anyone so certified may represent himself as a poetry therapist by adding the letters C. P. T. to his name.

As stated, all certifications granted before February 1, 1973 shall be deemed valid. After February 1, 1973 no certification shall be made except to those applicants who fulfilled the requirements set down in this document, which shall be attested to by the committee on certification. The committee shall be made up of three members appointed by the president of the Association



for Poetry Therapy. It shall include one psychiatrist, one licensed psychologist, and a representative from the field of education.

After February 1, 1973 no person may represent himself as poetry therapist by adding the letters C. P. T. unless he has fulfilled all qualifications for certification, attested to by the signatures of the certification committee.

**Fees.** The following fees shall be paid in connection with certification:

1. application for certification as poetry therapist: \$15.00
2. application for designation as intern in poetry therapy: \$10.00
3. application for designation as trainee in poetry therapy: \$10.00
4. application for renewal of any foregoing certification: \$10.00
5. all fees are nonrefundable and shall be deposited in the treasury of the association.

**Privileged Communication.** No certified poetry therapist, intern, or trainee may disclose any information he may have acquired from persons consulting him in his professional capacity that was necessary to enable him to render services in his professional capacity to those persons except:

A. With the written consent of the client, In the case of death or disability, of his personal representative, other person authorized to sue, or the beneficiary of an insurance policy on his life, health, or physical condition;

B. That a certified poetry therapist shall not be required to treat as confidential a communication that reveals the contemplation of a crime or harmful act;

C. Where the person is a child under the age of sixteen and the information acquired by the therapist indicated that the child was the victim or subject of a crime, the therapist may be required to testify fully in relation thereto upon any examination, trial, or other proceeding in which the commission of such crime is a subject of inquiry.

D. Where the person waives the privilege by bringing charges against the therapist, intern, or trainee.

**Separability Clause.** If any section of this document, or any part thereof, be adjudged by any court of competent jurisdiction to be invalid, such judgment shall not effect, impair, or invalidate the remainder of any other part thereof.

(Morris R. Morrison, executive director of the Association of Poetry Therapists (APT) chairman of the Committee on Standards and Certification. Association of Hospital and Institution Libraries Quarterly, Summer/Fall, 1973, Vol. XII I, No. 3/4)

## CHAPTER EIGHT

### TOWARDS A HUMANISTIC THEORY OF POETRY THERAPY

#### INTRODUCTION

Throughout the dissertation the writer has stated repeatedly that individual therapists should assess their own strengths as a therapist and conduct their groups accordingly. This chapter is my own personal self-assessment. For this reason, because this is a chapter where I am speaking, I will refrain from using the usual and accepted dissertation reference to "the author" and "her" style. It is inappropriate and awkward. This chapter is my chapter. It is about me. I feel that it is an example to other therapists to make such statements about themselves and their own styles of leadership and therapy. I should be and am accountable for all that is stated herein. Every therapist should be so accountable for his own work.

I have footnoted frequently throughout this section to give the reader evidence that others agree with me. For the most part, I have kept this section free of specific references in the main text for I see this chapter as my statement of my own assumptions, groundings, and process in conducting Poetry Therapy groups. Footnoted references appear in the bibliography.

I see this chapter not as a final culmination to my dissertation but rather as an integral step in developing and articulating my own theory of Poetry Therapy. The depth that I could, and should, devote to each section would make the chapter into a book in itself. This is only a beginning at a formulation. It is a first attempt to make explicit many of my own implicit groundings, many of which have been mentioned specifically in previous chapters. It is a moment for me to assess and take responsibility for what I do when I conduct a Poetry Therapy group. In writing this chapter I will be taking time for me, taking time to assess what I do, and taking time to ask myself why I do it. It is my hope that by focusing on my own assumptions, impulses, instincts, and intuitions, that in writing them into some cohesive theory, I will discover, affirm, and assert my own author-ity as a Poetry Therapist.

In beginning to build my own theory, it is necessary to look at the assumptions made as I conduct a Poetry Therapy group: first, my assumptions about the Nature of Man, for these have direct bearing on how I facilitate a Poetry Therapy group; second, my assumptions about the Nature of the Group Process; (It is my hope that my assumptions about the Nature of Group Process are consistent with my view of the Nature of Man.) third, my assumptions about the Role of the Therapist, fourth, my assumptions about Poetry Therapy groups, and finally my assumptions about how a poem functions in Poetry Therapy. These assumptions lay a fundamental ground-

work. Finally, by giving some examples of working within a group context, I explicate why I work in certain ways.

My assumptions about man have certain implications for the way I work in a group. For example, I have a basic trust in the human organism, its innate sense of timing and readiness for learning, growth and change. If I can be myself in a group, modeling, in a sense, my own readiness to learn and grow, maybe I can help others be themselves, discover themselves, grow themselves. I will try to separate out my assumptions about the Nature of Man from the implications they have for my own behavior as a therapist. Many of these same assumptions underlie statements made about aspects of Poetry Therapy in previous chapters. They should be made explicitly.

#### Assumptions about the Nature of Man

A) Man has an innate potential to question and learn about himself. He is naturally curious about himself and the world in which he lives. He naturally reflects on himself and his own experience.

B) Man has an innate propensity to grow and change. He is a self-actualizing and self-potentiating being. He unconsciously defines himself, makes key decisions and directs his experience in areas where, as an organism, he will grow and learn (sometimes unexpected things).

C) Awareness comes organismically and in its own time. Personal insights happen to an individual when he is ready for them. If he is not open



to learn something about himself, a person won't "see" it or won't "hear" it from any outside source. Self-discovery is the best learning.

D) The Self is probably the most relevant topic to study. Learning about one's own process enables a person to be continually opened to his own experience. A person can learn to read his own clues to growth. He becomes more comfortable with the flux of the world from moment to moment and is able to see that the process of change can be beneficial and growthful. A human being is a human becoming; he is part of an ongoing process, an ongrowing process.

E) It is within Nature's balance and pulse that man needs times of nurturance and assimilation before further growth may occur.

F) Man has limitations; he lives within those limitations. He lives most happily when he has identified his own limitations and learns to live within them. Growth involves the testing of extremes (limitations) of continuums of behavior, resulting in integration.<sup>1</sup>

G) Man establishes meaning for himself. That meaning is most self-fulfilling when it is self-imposed, self-affirmed, self-asserted, confirmed and owned. Self-affirmation gives the staying power and depth to one's power to be. There is a risk and struggle integral to the process of self-affirmation,

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<sup>1</sup>The goal of therapy, according to Jung, is to learn to live our lives within our own limitations.



self-assertion and self-acceptance.

H) Growth is cyclical; an individual encounters old issues and patterns within new frameworks throughout his life, yet each encounter is a "new" encounter.<sup>2</sup>

I) Growth is a personal and individual journey; yet human beings share much in common. There is a collective and a universal influence on man's life beyond his immediate control. This is not necessarily within his immediate awareness.

J) Creativity, self-reliance and independence are all enhanced when self-criticism and self-evaluation are primary and evaluation by others is secondary.

K) Man is essentially a social animal and needs nourishment, support, and validation in order to grow.

L) It is necessary to have an environment conducive to learning about oneself in order to grow. An optimal growth environment would be supportive, challenging, and non-threatening. The reason for this is that learning which involves looking at oneself, learning which involves a change in self-perception, can be threatening and may be resisted.

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<sup>2</sup>We shall not cease from exploration  
And the end of all our exploring  
Will be to arrive where we started  
And know the place for the first time. (T. S. Eliot)

M) New behavior feels awkward and alien, a sense of "not-me," a sense of vulnerability. Such behavior can help an individual to stretch his perceptions of himself, to grow, to change. When a person grows and moves from point A to point B, he feels different, in a new place, with a new self-world image, with an enlarged identity. He may feel unrecognizable to himself and in need of recognition from someone outside of himself, to confirm that he is indeed the same person. A person needs an atmosphere of safety, protection and acceptance in order for the firm boundaries of the self to relax.

N) An individual's perceptions of himself differ from other's perceptions (experience) of him. Although they may "appear" to be the same, or similar, they are not.

O) The use of poetry is inherent in the very nature of man.

Rather than discuss the above assumptions individually in depth, I want here only to set them forth in hope that they will help lay the groundwork for how I work as a Poetry Therapist. The same is true for the sections that follow.

### Assumptions about the Nature of Groups

A) Learning about oneself can and does occur in a group setting. The more people there are in a group, the more reference points there are for the group member to learn about himself. People learn (to grow) by seeing others grow; people become more self-reflective as others around them

share of themselves.

b) Inter-action is an important part of group process. Feedback that members of that group give one another is important. Individuals in a group are responsible for themselves and their own learning and growth. Every member has impressions and perceptions of every other member. There is no one "right" way to perceive any other individual. Nevertheless, it is important that those perceptions be shared with the individual. It is then up to him to sort out what is useful for his own growth and development.

C) Members of groups often play certain roles (functions) for the group. When one member confronts another member, there is frequently a third party whose perceptions are supportive for the person being challenged. Groups can be very supportive.

D) People serve and help each other in a group. The therapist is not the only person in the group who facilitates growth and awareness. Groups are resources of individuals with innate skills and sensitivities to one another.

E) Because individuals grow in their own time, and because they grow where they need to grow, no two groups are ever the same. However, there are certain commonalities from group to group, certain patterns of group development. These vary from group to group and depend on the structure, or lack thereof, of each group.

F) Contracting is important for the functioning of a group. When group members do not know the parameters for behavior, they are less clear with themselves and with others. Therefore, it is important that group members have some sense of the nature of the group (i.e., whether it is a highly structured group or an unstructured one, what individual responsibilities and expectations are from themselves and from each other, including the therapist). Defining limitations for groups and individuals within groups, can be as powerful and as freeing as defining limitations for individuals.<sup>3</sup>

G) Group climate is important to individual and group growth. A climate conducive to growth and awareness is supportive, trusting, and nourishing.

H) Groups often reflect the facilitator's issues. This is not always a conscious choice on the part of group members. If the facilitator shares openly his own issues, the group can be more conscious about its own direction and focus. Individuals can also stay clearer about their own issues and direction.

I) Poetry Therapy groups have much in common with other therapy groups.

J) The tension in emphasis between poetry and therapy in a Poetry Therapy group is functional. Finding the balance between poetry and thera-

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<sup>3</sup> Personal communication with Susan Campbell.

peutic inter-action of group members is a healthy process; it contributes to and enhances self-awareness, self-direction, responsibility for self, and response-ability towards others.

### Assumptions about the Role of the Therapist

A) The therapist has much to do with setting the initial mood or climate for the group. Contracting and clarifying expectations is an important part of group beginnings, for it is during these moments that the mood, tone, and process are set for the group's development. The therapist can help clarify individual goals and group goals.

B) He relies on the individual's desire and potential to learn about himself as the motivational force behind significant insights.

C) He regards himself as a flexible resource to be utilized by the group.

(1) He has the skills available to be active and facilitative of growth and learning. He has the training and experience of dealing with emotional issues, he is skilled in group process, he is able to be structured or non-structured--depending on the needs of the group, he is able to give feedback to individuals.

(2) He is also able to sit back and be seemingly inactive: he can allow the group process to take care of itself, and can allow group members to assist one another. (3) He is able to model a participational kind of learning where he shares of himself, feelings and thoughts, in ways which do not demand nor impose but represent simply a personal sharing. In sum, he can flexibly



take the lead, follow, serve and wait. He doesn't have to be "active" in order to be effective as a therapist.

D) As a climate conducive to self-exploration becomes established, he can become increasingly a participant-learner and member of the group and less the person responsible for the initial structure and organization. In so doing, he can be self-revealing, modeling the struggle to grow, and risking himself.

E) He models response-ability to group members, yet allows and encourages them to take responsibility for themselves. He models caring "about" other people, yet refrains from caring "for" them. He models dependability of relationship and inter-action, yet refrains from encouraging dependency. In essence, he is modeling taking responsibility for his own actions and own growth.<sup>4</sup>

F) The therapist should recognize and accept his own competencies and his own abilities. If he feels uncomfortable or un-able to deal with certain feelings or emotions which may arise, he should openly express those feelings. He should only deal with those areas where he feels qualified and trained to be responsive to the needs of the group members.

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<sup>4</sup>The crucial point is that I confront the patient as one human being to another, analysis is a dialogue demanding two partners, Analyst and patient sit facing one another, eye to eye. The doctor has something to say, but so does the patient. (Memories, Dreams and Reflections, p. 131)

G) Throughout the group, he remains attentive and alert to the expressions and needs of group members. He should have the ability to have complete free attention for the members of his group and be responsive to them. As therapist, his main function is to facilitate and be responsive to the growth of the members of the group. His own growth is secondary. His own issues, although present, should not be the prime focus of the group in that they interfere with the work of individual group members. He should responsibly have a place to work his own issues outside of the group he is leading.<sup>5</sup>

H) He should help provide a climate for the client to become more in touch with himself, more aware of himself, more able to affirm himself. He should witness, encourage, prod, challenge, support, feedback, confront, and validate members of the group.

I) He should try to hear the group member, not just his words. In working with poetry, he should be able to see the person behind the poem.

#### Assumptions About Poetry Therapy Groups

A) Responsibility is related to creativity; for if you start to get in touch with yourself as a responsible agent, you will get in touch with yourself as a creative agent as well. You will begin to own your own potential and

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<sup>5</sup>The psychotherapist, however, must understand not only the patient; it is equally important that he should understand himself. (Memories, Dreams & Reflections, p. 132)

power, your own creativity and own responsibility.

B) By using your own poetry, rather than the poetry written by others, you discover your own power. Even the comment of, "I've never written a poem before, but look at what I wrote," is indicative of a new awareness of creative potential. It may be only a few lines, but the feeling of satisfaction and self-worth implied when a poem is self-appreciated is therapeutic and growthful. It is a potential building block for an individual to begin to feel his own potential and his own power.

C) By using your own poetry, rather than the poetry written by others, you raise issues which are important to you. Dealing with poetry written by others is less threatening than dealing with your own poetry. Dealing with your own poetry is more essential, for it is your own voice speaking about your own issues.

D) People are more willing to work where they have an investment. There is more investment with poetry written by members of the group rather than by 'known' poets.

E) Part of the process of a Poetry Therapy group is struggling to find the balance between the poetry and the therapy. People have a hard time integrating the two terms because they are struck in dichotomies. People see poetry as one process and therapy as another. Both involve similar processes; they involve getting a person in touch with his own power.

F) Initial structure and process for interaction suggested by the therapist can help create a supportive environment. After the group has begun to operate on its own for a while, the structure can be relaxed, and the group takes more responsibility for itself.

G) Poetry sharing and poetry exploration can be therapeutic in and of themselves. Size of groups which share and read can be unlimited. However, where individual attention is given to the poet, patient, optimal size of groups is smaller--thus allowing for more air time, more attention to specific needs.

H) There is no one way to run a Poetry Therapy group. Groups are dependent on two major variables--the makeup of the group and the orientation of the therapist. The therapist can emphasize the reading of poetry and/or the writing of poetry. He can structure the group, he can stop the flow for writing time, he can rely on the group to structure itself, he can go without a structure and without exercises. He can share his own poetry, or choose not to.

I) There is no optimal duration of a group. One session workshops have therapeutic results, and poetry therapy groups meeting for a semester or a year have beneficial results as well. Groups can meet intensively for a day or a week, they can meet for several hours once a week or month. Growth, learning and insight occur in all situations. The group will probably be most effective for individual members if the therapist has assessed his own

preferences for what kind of group he runs.

Some Assumptions About How a Poem  
Functions in Poetry Therapy

A) Poetry gives us a new vehicle for expression and release. In addition to verbal and non-verbal, we have writing. There is safety in the privacy of a poem. A person can risk on paper when he cannot yet risk in person. He can often write his feelings when he cannot say them or express them in any other way. This provides him with a release.<sup>6</sup>

B) Poetry is a vehicle to control feelings which often seem to control us. In putting feelings on to paper, a person, for the moment, is in charge of those feelings, and is not overcome by them. For those living with dis-ease, there is momentary ease in the writing of a poem. A poem enables the writer to express the chaos which he may feel. He is able to step outside of the chaos which seems to be controlling him.

C) Poetry allows a person to see himself. When a person puts his feelings on to paper, he can distance himself somewhat from their intensity. He can leave them and come back to them--rather than be haunted by them.

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<sup>6</sup> Give sorrow words; the grief that  
does not speak,  
Whispers the o'er fraught heart  
and bids it speak.  
(Shakespeare)



In putting himself into his poem and onto the paper, a person can really look at himself and can become his own therapist. He can see patterns in his poetry over time and can take responsibility for those patterns.

D) Poetry can help clarify feelings. The process of writing a poem can serve to help a person clarify exactly what he is feeling. It demands that he finds words to articulate and express those feelings, where they might otherwise just be felt.<sup>7</sup>

E) Poetry can help facilitate communication. A poem can be shared as a way to share a feeling. Then a conversation can occur about the feeling. Or a poem can be written to clarify a feeling, the feeling can be talked about, and then the poem shared. Or the poem can still help clarify the feeling, but may not need to be read because the writer is now able to communicate directly.

F) Poetry can alleviate a feeling of isolation by the feeling of common sharing. Feelings of loneliness, alienation, strangeness are common themes of poetry. When one member of a group shares a poem expressing such feelings he helps other members to see that he is not alone, that many share similar feelings. There is a sense of universality and commonality.

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<sup>7</sup>Grief brought to numbers  
cannot be so fierce,  
For, he tames it, that  
feters it in verse.

(John Donne)

G) Poetry can help a person find direction where before he saw only chaos. He will no longer be overwhelmed by the furies within, if he can discern patterns and themes that thread his writing and his life. He can see a direction through what before seemed muddled and overwhelmingly chaotic, he can see his issues and begin to deal with them.

H) Poetry can provide momentary peace and comfort. To know that peace is possible, if for only a moment, is comforting to someone accustomed to dis-ease, to experience relief from the confusion that is me. How often are we comforted by the words of a song?

I) Poetry is a catalyst. Often hearing a poem written by someone in a group serves as catalyst for another group member to tap his own feelings. It gets him involved, gets him in touch with himself.

J) Poetry can help people get in touch with their experience. Poetry facilitates awareness.

K) Symbols in poetry are metaphors of the Self. By paying attention to symbols in a poem, we can learn more about ourselves. Symbols should be cultivated, evoked, and nourished.

L) The reading of other peoples' poetry maintains a split between one's inner and outer self.

M) The writing and reading of one's own poetry is more interesting.

N) Poetry helps resolve inner conflict.

The preceding pages of assumptions are only beginnings at explicating my own theoretical grounding. I could expand each section. However, this is only a beginning formulation. These pages set a framework within which I work. I see myself as a humanist drawing primarily on Perls and Jung. We are all poets if we will just give ourselves permission to be. As Jung said, "Poets are spokesmen for the world." We are all spokesmen for our own individual worlds, and, surprisingly, we may find that our worlds are very similar.

Others substantiate my feelings about the importance of writing in therapy.

The next thing most like living one's life over again seems to be a recollection of that life, and to make that recollection as durable as possible by putting it down in writing.

(Benjamin Franklin)

THERAPY AND THE WRITTEN WORD:  
WHAT SOME THERAPISTS HAVE TO SAY

Harvey Widroe and Joan Davidson in an article entitled "The Use of Directed Writing in Psychotherapy" (Bulletin of the Menninger Clinic, 25, 1961, pp. 110-9) give a justification for the use of writing in therapy. "Under duress some people express themselves more easily in writing than in speaking, even when circumstances provide apparently sympathetic listeners." They see evidence of this in letters, short stories, poems, and even suicide notes. They mention that fast talkers may slow down while writing, this gives them more of an opportunity to evaluate details and leads to important insights which they might not have were they not to take the time to write. Writing outside of the therapy hour, they add, significantly alters the course of treatment. In a study at San Francisco General Hospital patients wrote accounts of their daily activities. These accounts were then used in the therapy hour. This not only demanded a certain amount of discipline on the part of patients, but also showed the patients that the therapist was interested in everything the patient did in his daily routine. In working with schizophrenics, Widroe and Davidson had unexpected results. They discovered that writing became an important way for patients to communicate with one another.

In contrast to verbal therapy, writing uses durable symbols. The patient can encounter these symbols time and again, can modify them and can witness the changing and growing affective dimensions of his therapy. An



example is given where writing specifically helps a homosexual. They say that when the homosexual writes "talked with Mary" that he "may experience intense, unpleasant feelings; but upon rereading the same phrase several times may find the words more acceptable and the response to their implications less disturbing." (Ibid.)

There are many examples of the use of correspondence, a form of written communication, as a part of the therapy process and as the primary mode of communication. Freud had an extensive correspondence with Fleiss, and in his letters were written associations to his own dreams which formed an important part of his own self-analysis. His "Analysis of a Phobia in a Five Year Old Boy" was in part correspondence with the boy's father. And he also carried on a correspondence with a woman who was concerned over her son's homosexuality. ("Psychoanalytic Psychotherapy Conducted by Correspondance" International Journal of Psychoanalysis, 1952, 38:32-50)

In his article Alston mentions other important correspondances. Grotjahn, he says, describes an exchange of letters with an adolescent girl after 1/2 hour of analysis because of an absence of both patient and analyst. The patient initiated the correspondence, Grotjahn states, "to gain time with the patient, to support and encourage her, to keep her going, and to stay in contact." At the end of a year, the patient returned for 200 additional hours of analysis. Grotjahn says that in addition to keeping the patient going, there



may be no great effects except that it is easier to return to treatment after an absence. He adds,

In terms of a transference neurosis, we may express the possible therapeutic value of such correspondance. . . . It is possible for a limited period of time to maintain by correspondance certain transference relationships. . . . only general interpretations can be given. . . . It depends upon the patient's resistance how much the patient can accept of such interpretation, and therein lies the great hindrance of correspondance, and the limitations of it. Resistances cannot be properly analyzed by interpretations in letters.

Karl Menninger is another who writes that in his experience as a therapist he is convinced of an improvement as a result of letters written to people. In Love Against Hate he writes:

Psychiatrists realize from clinical experience what poets have proclaimed in inspired verse, that to retreat permanently into the loneliness of one's own soul is to surrender one's claim to life.

Alston comments on the difficulties of letters as a mode of communication. There is a time lapse, a delay in the mails perhaps, and letters are not answered, feelings are not answered, at the moment of their greatest strength. No vocal cues are given, hence letters are subject to misunderstandings. And letters are written, oftentimes, for an audience, so the purity of feeling may be slightly altered. On the other hand, therapy might be impossible if not continued as a correspondance.

David Farber provides us with a unique example of the use of writing in psychotherapy. Farber incurred deafness while already practicing psycho-

therapy. Where he had been able to communicate verbally with his patients, he could no longer hear them. So he established a correspondence with them, they writing to him, and he responding verbally to what they had written. He would have them free associate on paper. Farber would sit near or opposite his patients (depending on whether they were writing by hand or typing) so he could better see them. All of his patients had normal hearing and many of them were not seen prior to his deafness. Farber was not convinced that this form of therapy is better or as good a method of therapy. He felt that whether the patient writes or speaks makes little difference. In an article entitled "Written Communication in Psychotherapy" Farber makes the point that good listening on the part of the therapist, is not a function of merely physiology, but of the whole imagination, or the inner ear. Being but off from the world of sound, he says, sharpens sights. (Psychiatry, 1953, 16:363-374)

THERAPY AND THE WRITTEN WORD: THE USE  
OF POETRY WITHIN A PSYCHOANALYTIC FRAMEWORK

Of all the arts, poetry could be said to come the closest to the therapeutic hour in psychoanalytic terms. There are many parallels. Poetry and therapy both: have a beginning and an end, both use pre-conscious and unconscious material to probe for inner meanings, both place an emphasis on verbal communication to express material in a conscious form, both seek means to resolve inner conflict, both use free association (word association)

and exploration within an atmosphere of privacy and confidentiality, and usually, but not always, both have psychological insight as a goal. Involved in each is catharsis, personal insight and creation of a safe place to explore wishes, realities and dreams. Symbolization, condensation and displacement all help turn the "frightening" unconscious into something acceptable and manageable. Each uses metaphor. And both processes are ended by the major person involved, the poet and the patient. The poet decides that his poem is finished; the patient decides that it is time to terminate the therapy relationship. The entire process of both poetry and therapy is a movement towards psychological freedom.

The use of a poem within the psychoanalytic framework is similar to that of a dream. (Pietropinto, Anthony. "Exploring the Unconscious Through Nonsense Poetry," in Poetry the Healer; Crootof, Charles. "Poetry Therapy for Psychoneurotics in A Mental Health Center," in Poetry Therapy) Used within this orientation, it is a kind of projective phenomenon which the therapist uses to help classify and diagnose the patient through the patient's tendency to project and identify. When a patient presents the therapist with a poem he has written, he presents a metaphorical embodiment of the poet's unconscious and preconscious emotional conflict. The specific images, ideas, and metaphors constituting the inspiration and inception of the poem are themselves but metaphors for personal conflicts. As Albert Rothenberg says:

It is interesting that the initial idea and inspiration of poetry could be considered analagous to symptoms. Like symptoms, initial ideas and inspirations represent an impulse or conflict and its defense together. In this light, the poetic process and psychotherapy follow an analagous sequence. Patients usually begin psychotherapy with some symptoms or complex of symptoms. These symptoms are disguised expressions of impulses, conflicts and the defenses against them. The symptoms are gratifying in some respect because they reduce anxiety but are also painful enough to cause the patient to seek help. During the course of therapy, the patient finds new symptoms, accepts the ones he has and is able to function with them, or else he achieves insight and presumably the symptoms are no longer necessary. Roughly, this sequence is similar to the schema for the poetic process. . . . The ultimate fate of inspirations and inceptions of poems--that is, learning to live with them, moving to new ones, or rejecting them entirely--depends, to some extent, on the type of insight the poet actually achieves. ("Poetic Process and Psychotherapy," Psychiatry, vol. 35, August 1972, p. 244)

## THERAPY AND THE WRITTEN WORD

### General Discussion

Much has been written about the use of writing in psychotherapy. This discussion is included because it is important to view historically the fact that psychiatrist, psychologists and counselors have been using directed writing in the therapeutic process more than is commonly known. Writing, as it is discussed here, is not the writing of a formalized poem but is more loosely defined and includes correspondance, journal entries, letters to oneself.



It is important not to limit the concept of Poetry Therapy to what we traditionally understand poetry to be.

It is not always easy to separate the poet from his poem; it is their inter-action--the How, the Why, and the When--that is of interest. Rilke once said that "if a man is a deep writer, all his works are confessions." (The Notebooks of Malte Laurids Brigge, 1949) It is this deep writer who is so involved with his writing that he virtually is one with what he is writing. There is a curious and unique fusion of subject and object, of outward and inward, that approaches the "isness" of being. Writing, as I use it here, refers to this process of writing rather than the product of writing. The process is the dance of the writer with what he is writing, the constant flow and rhythm of the process with the focus on the "self" (of the writer) and on what is being said about that self in the process of articulating it on paper. Writing and therapy allow for the "I" to e-merge and merge. Whether a subjective poem, a metaphorical description of a tree, or a simple journal entry, writing is a time spent thinking, feeling and communing with oneself. It is a legitimization of the subjective process which so frequently gets set aside in the rushrush daily routine of so many people. Writing is also a self-permission to try to communicate and express feelings to another.

The effort to put into words is a clarifying process, and moods, fleeting feelings and impressions get solidified, articulated and, for the moment, defined. Emotions which sometimes control us are, for the moment,



controlled. What was subjective becomes, for the moment, objective. This process of objectifying the subjective allows for a distancing to occur from possible preoccupations. By writing and getting "it" out, by getting what feels like the "me" out, a person can leave that preoccupation with that "it" aside, on the paper, and come back to "it" again. He can write at his own time, without the feeling of being pressured to produce, for he is not producing but is participating in his writing. The fact that what he articulates gets set down on paper and is hence a "product" is only a product of that moment, a witness to the individual's own unique history (his-story). This effort to make visible (audible) is similar to much that takes place in therapy. In poetry (writing), hopefully as in therapy, those names and labels are only temporary and can grow and change as the individual grows and changes. A major part of writing is the novel-ty of writing one's own story, of discovering one's own author-ity by becoming a scientist (from the Latin Scio--to know) about oneself.

In the following section I will give an example of the way I work with writing in a Poetry Therapy group. I relate the following incident primarily within the context of Gestalt theory. I choose to do this because of the influence Gestalt has played on my own development as a therapist. I feel that the following discussion illustrates how I work and why I choose to intervene in certain ways. It is my hope that the assumptions set forth earlier in this chapter are consistent with my behavior in a group.

### EXAMPLE AND DISCUSSION OF APPLICATION

Although Perls does not give specific examples of how he might work with a poem or something that has been written, I would like to include an example of working with a piece of writing using Gestalt techniques.

Gestalt is a good example of NOW based theories (as opposed to Freud who focuses on THEN, past and childhood). In Poetry Therapy groups there are many now's: there is the now of the process of writing, of the process of reading what was written, of facing the content of what was written, of feeling self-conscious and awkward and vulnerable after having read something written. Each of these now's involves important material which can be the focus of a client's work.

At this point I would like to give an illustration of how Gestalt can be used in a Poetry Therapy group. Joe is a graduate student in a mixed graduate-undergraduate group conducted at the University of Massachusetts during the spring 1974 semester. I include what he wrote at the first group meeting to show how the theme of anesthetization and numbness repeats itself as the client's NOW.

Written Exercise, Session #1, Joe

I wear a cloak of amusement (I am frustrated by my words, stumble over them, because they try to be "poetry" not "nice".)

Back to the amusement--I am careful in lots of ways. I am amused by the tentativeness of Judy and Pat--I knew I would be--and have been--tentative too. I am amused by the youth of the class. Safety in my age. (How terrible that I have come to that, yet it is better perhaps than my adolescent heart-wrenches). I am protected well. I will not even sign up for this course, so I have the freedom to leave any time.

Two questions--What am I protecting and is it necessary. ((Yes, I know all the therapeutic questions (yes I like to think in asides [How clever I am.] ))

There is an impulse that is with me now and other new times in the past. The impulse (fantasy?) that I will find a beautiful woman who will find me irresistible. Further back and more general--I am accepted or rejected by a bunch of kids. The protection is relatively the same superiority, amusement.

What is interesting is that I have reached a point where it happens easily and without emotion. It is becoming character, style. It is becoming benevolent--I can reach out from my safety and touch and share most intimate parts of me. Even my nakedness is somehow safe. Good or bad? Both! Bad because it numbs me to be protected. I am anesthetized--No, I am being "poetic" again: start over, Joe. I want to reach to the point where I can risk mutually.

During Session #4, Joe seemed concerned about the question of mutuality in his life and how people perceived him in terms of the mutuality felt in the group. Realizing he could check it out with other group members, and encouraged to do so: The following transcript was recorded.

Joe: I really am feeling afraid to ask, afraid to look at people.

(Although Joe desired feedback about how mutual his interactions had been with people in the group, it was unclear whether he was asking for feedback or not. When he finally asked, he did so in a very quiet voice and very tentatively, not really making a direct statement about what he wanted. Joe then proceeded to elicit and receive feedback from members of the group. Discussion centered around something that Joe had read the week before and upon the fact that he left right after reading what he had written--before people had time to respond to the beauty of what he had written and how it had moved them. He had avoided receiving the feedback, had avoided any eye contact.)

Judy: I have a suggestion for an exercise for you, and that would be to read something that you have written, and maybe to read it to one person and then to maintain eye contact afterwards. Because I remember the first session, you were really aware of your own process of looking down and sort of being embarrassed, and last week the same. And to be able to stay with the feelings that flow after you have read. Do you want to try that?

Joe: Looking away is like saying "I don't want to put you on the spot", but if you choose to comment, I would like it. . . . Perhaps it's a reaction to my own pushiness. I think what I wrote is really on this issue. I feel a problem just choosing someone to look at to do this. I think I want to choose you. I feel a kind of hesitancy.

Judy: In you or in me?

Joe: In you.

"Stopping: Stopping myself from talking, from rescuing, from taking responsibility.

Stopping: from letting myself cry--from saying I need.

I say my needs will not be met--  
So I don't talk of them.

The need to feel connected--  
to know that there is a friend who really cares.  
Someone who I can call up late at night and who wants to listen.  
(Not during group when it is safe and proper,  
but at midnight--half asleep.)

Not connected with others--the other side  
is not needing that contact. Stated positively  
it means finding resources within myself.

There is a great numb space within my chest."

Judy: What are you feeling right now?

Joe: I'm feeling in touch with my emotions.

Judy: Can you put words to that?

Joe: Almost like letting go of something and crying. Looking at other  
people and looking at you, for example, instead of. . . (mumbled)

Judy: And now? (pause) Where did it go?

Joe: I guess like part of it went into the whole business of loving, in the  
group that's what you're supposed to be doing.

Judy: So you're performing?

Joe: That's not right. It's like there is a genuine measure of safe caring  
that you can give and receive.

Judy: Are you getting what you want, what you need?  
Are you aware that you looked away when I asked you that?

Joe: (nodding)

Judy: What are you feeling, Joe?

Joe: A numbness.



Judy: Can you be your numbness ?

Joe: It feels like novacaine. Joe releases me. New ???, and activated directly by the brain.

Judy: Do you know when Joe releases you ?

Joe: When he's feeling bad, when he's feeling lonely, sad.

Judy: How do you help Joe ?

Joe: I comfort him. Take away the loneliness and the sadness. Give him the strength to face whatever he has to face. To face the Reality. Because life goes on and keeps doing things.

Judy: Sounds like you're really important to him.

Joe: Yeh. Otherwise he'd have to go run around. The thing is that there would be nobody there to rescue him. It's better that he has me. He really wants to be rescued.

Judy: Can you tell him that you are there for him--when he needs you ?

Joe: I am there, and sometimes when you don't need me.

Judy: Can you say that again ?

Joe: I am there when you need me--and sometimes when you don't need me. But you do need me.

Judy: Can you say that again ?

Joe: But you do need me.

Judy: Can you say both of those together ?

Joe: I am there whenever you need me, and sometimes when you don't need me. But you do need me a lot of the time.

Judy: Can you say that again ?

Joe: But you do need me a lot of the time.

Judy: Do you think that you could say that to some of us here?

Joe: I am there whenever you need me, and sometimes when you don't need me. But you do need me a lot of the time.

Judy: And to someone else.

Joe: I am there whenever you need me, and sometimes when you don't need me. But you do need me a lot of the time.

The thing I flashed on was being intelligent and being bright. Cerebral. It works the same. . . .

But what I want to say to Joe is that you are going to have to give up running away and wanting to be rescued if you want to give up not being so strong. (pause)

Judy: Where are you now?

Joe: . . . that. . . (mumbled)

Judy: Are you aware of how you just broke contact with us? (eye contact) (pause) I felt the mutuality of your needing and being able to fill needs when you were saying the sentence to us. And I just felt you retreat and break that contact when you broke the eye contact. And then that mutuality stopped.

Joe: I have been trying to deal with living for me. Doing the things as I want to do them. Discovering who I am, alone. And it's been a kind of grimness. And I just realized that the grimness was that part of me saying I don't want to give up the hope of rescue. If I give that up, I'll be out in the cold. And what I've been doing is being cold and numb.

Judy: I haven't felt you cold and numb in this class. I have felt you very open and warm, and giving and taking.

Joe: I really appreciate that.

Judy: That clarifies for me what I was feeling, Joe, when you were reading and looking at me. That what I was feeling towards you was "I really see you". And that I didn't have to comment on the poem. The poem wasn't what I was seeing, it was you. And that's the vulnerability that I think we all feel, after we have read something. That we are all open, and that people have seen into our souls in a way, and for me, there's an embarrassment, and a rawness, and a delicate fragileness. There is almost a pleading in the eye contact of "treat me gently".

What I worked with in this excerpt was Joe's shifting NOW. First, his focus on mutuality, then feedback, then what Joe wrote, then where he was after reading what he wrote. I tried to tie into this work clues he had given earlier in the group: "performing," "anesthetization," being "cerebral," desire for "mutuality," I tried to help Joe focus on what he was experiencing, what he was aware of, and what he was feeling--his NOW. Another concept which Gestalt uses is HOW (Perls, Gestalt Therapy Verbatim, p. 43) (rather than WHY). I also try to help Joe see HOW he played a part in breaking contact, breaking the mutuality that he desired. I saw this happening in several ways--leaving the week before directly after reading what he had written thereby preventing feedback and looking down and breaking eye contact with other members of the group.

An important concept in Gestalt Therapy is taking responsibility for yourself, or as Perls says, "wiping your own ass." This means getting to a place within yourself where you are your own support system and you don't need to rely on environmental support. Joe, initially in session #4, was hinting at wanting feedback from people, but he was not taking responsibility for himself and asking for it. The hinting is an example of his relying on his environment to pick up the hint. He finally did ask for feedback, and at this point, after he had taken the responsibility for his own actions, I suggested what Polster (Polster, Erving & Miriam. Gestalt Therapy Integrated, 1973, p. 112) would call an "experiment." The suggestion was to read what he had

written and be fully aware of himself afterwards. I saw my role as therapist to reflect back to him what and how I saw him acting at that point.

### FURTHER DISCUSSION OF GESTALT APPLICATIONS

So much more can be done with Gestalt and poetry than is evidenced in this brief illustration.

That Gestalt is a verbal therapy is important. That does not mean that a Gestalt therapist would not encourage a client to act out a poem or a dream. But precisely because it is verbal, there are many obvious ties with poetry as a mode of expression. Gestalt implements a dialogue form of working out some problem, a top-dog under-dog conversation. This could easily be done poetically, or, where a poem is about a situation where two sides are set forth, a dialogue could be directed for the client to either speak or write.

An important concept in Gestalt is that of "foreground," what sticks out as primary for the client. (Perls, Verbatim, p. 60) An aspect of poetry which I call a Gestalt look at words, a technique utilizing the concept of foreground, is something that is unique to a real awareness of listening and looking at what is said or written. In listening, I allow for a flexibility in my hearing. If something is said, and I assume it in its usual meaning, I am not being flexible. Examples of this: "here and now"--"hear and now," "key-hole view"-- "key whole view," "of course"-- "of coarse," This ties



in with the written word when I automatically visualize how something is spelled: strangers--straingers, wonderful--wonderful, atonement-at-one-ment, togetherness--twogetherness or togetherness, aloneness--all-oneness, realize--real eyes. These are but some of the poetic license I take with words by applying automatically the Gestalt concept of foreground and background. I see what emerges, my foreground, from words.

Another "word" oriented tool is something I call a "Barometer Poem." Again, this uses the concept of what is foreground for a person or group. At times when feelings and emotions are in need of eliciting, or clarifying, or when I as leader of a group want to find out where group members are, I introduce the Barometer Poem idea. I simply ask for a one word statement descriptive of the feeling or mood of where individuals in the group are. An example: incomplete, drifting waiting, reaching, motion, moving, cramped. These were reorganized by a group member into:

incomplete waiting  
 cramped drifting  
 reaching motion  
 moving?  
 how, without you?

The focus of this session was termination. It was our last session together as a group. I include the Gestalt look at words and the Barometer Poem idea not because they are introduced by Perls and the known Gestalt therapists, but because they are extensions of the Gestalt theory.



Finally, as mentioned earlier in the section on Freud, dreams are very similar to poems. And a poem can be "worked" in a way similar to a gestalt dream. All parts of the poem are parts of yourself, in some way. A client can "be" all parts of his poem as he can "be" all parts of his dream. Similarly, a client can enact his poem, he can make it come alive by bringing it into the present tense and feeling in the NOW what might have been felt in the past. This makes the dream/poem much more alive and meaningful for the dreamer/poet. In a sense, this makes the metaphors come alive. When a dreamer or poet speaks as if he were the tree, he becomes that tree, he is that tree.

The example of Joe emerged during the group. It shows how I went about working with him reflecting back what I saw, and helping him stay in touch with himself moment to moment. This example came from a group which was fairly structured. We started off each session with specific suggested exercises. We spent time writing and then time sharing what was written. Before giving other exercises for a Poetry Therapy group, I want to mention alternative structures for groups.

#### ALTERNATIVE STRUCTURES FOR POETRY THERAPY GROUPS

Formats for Poetry Therapy groups depend upon the therapist's orientation. They also depend upon the make-up of the group. For even when I may want to impose a structure, or exercise, on a group, the group may decide that they do not want to go with my suggestions. I find it necessary

to be flexible in asking them to do an exercise. There is a great deal of give and take in leading such a group.

One alternative format for a Poetry Therapy group is a totally unstructured group. This has an emphasis on interaction, almost like a t-group, or on individual issues, like a more traditional therapy group. In this kind of group the therapist imposes no structured exercises on the group. If poetry is shared, the sharing is initiated by one of the group members. Or the therapist may suggest that people write and share their poetry. This kind of group has no specific exercises to energize or focus group members or get them writing.

Another format is a poetry sharing group. Here people who have been writing poetry come to share what they have written. This kind of sharing has incredible therapeutic results, as individuals hear poetry very much akin to their own. This helps them take the risk of sharing their own poetry. Poetry Sharing groups go beyond simply sharing what is written. Time can be spent with individuals in dealing with their issues and feelings. The role of the therapist here is to be attentive to the feelings of the group members and have free attention to help them work on whatever emerges.

The groups I have run have been quite highly structured. This is partially because I have done many short workshops requiring an intensive kind of experience for participants. However, I have tended to structure semester long groups as well. Frequently I will suggest a writing exercise

at the beginning of a group. We will spend time writing individually, myself included, and then those who want to will share and work on their poems. During a group, when there is a lot going on in the group, I may suggest a 5 minute write. My reasoning is that at such times there are so many things happening that there is a lot of material for individuals to write about. These 5 minute writes can be shared or not. Frequently when such writing time is not shared immediately, what is written eventually does get shared, sometimes weeks later. This has confirmed my feeling that taking time to write when a lot is going on in the group helps people to write. Oftentimes, they are afraid to write. But such "private" time reinforces that writing doesn't have to be "letter perfect" in order to express something important. Jotting notes, phrases, words can be helpful.

I find my orientation shifting. I am becoming less structured and providing less exercises for groups. Sometimes exercises get in the way of a group growing together, and I am now beginning to experiment with being less structured in groups. The results are that more "talking" takes place, almost like a t-group or therapy group, and the "poetry" may be temporarily lost. However, as members feel more comfortable with one another, they begin risking sharing what they have written, and the poetry and therapy come back into balance. The process is exciting. The group essentially runs itself; I act as a resource facilitator and member. My experience, at this time, with this kind of structure, or non-structure, is limited. I hope

to expand at some later time on results of this kind of group.

The results that I do have now are based on the more highly structured groups which I have been running. I still believe in the usefulness of suggested exercises, but I am in the midst of reassessing how and when to use them.

It seems appropriate to include at this point a sample design of a five day workshop for a small group. This is part of my theory, part of my application.

MODEL DESIGN FOR A 5-DAY WORKSHOP:  
EXERCISES FOR USE IN POETRY THERAPY  
GROUPS

As mentioned earlier, the Poetry Therapist should have a vast wealth of experience and knowledge of possible exercises to facilitate growth and awareness in his group. However, these should not be used indiscriminately and at whim, or regularly, but should be either intentionally planned for in response to a specific need or available for spontaneous use.

Exercises are helpful in expanding awareness and in focusing the patient in ways he might not otherwise focus himself. Ideally, the therapist is calling attention to the shifting NOW, the process of the group or the individual. The most successful exercises, whether planned or spontaneously improvised, use the feelings which are present in the group at any given time. For example, an exercise on "Strangers" or "Beginnings" would realistically go at the beginning of a group rather than half way through a group or at the



end. Similarly, focusing on an embarrassing situation would be inappropriate early in a group when the level of trust had not yet been built up. An exercise on "Endings" is most useful at the termination point for a group and not at the beginning when people are just beginning to establish relationships within the group.

The following are exercises used in a five day workshop. I will include appropriate rationales behind the exercises in some instances to give a fuller idea of why I might choose to use that specific exercise. I am assuming a knowledge of group process and group development on the part of the reader, so I won't dwell on the group development side of the choice of exercises. Where I have them, I will include some examples of what has been written off of these exercises to give the reader an idea of their effectiveness.

It is important to add that these exercises are taken from a variety of sources, often changed to suit a group's needs, often modified, often improvised and made up on the spot. There is no one right way to introduce an exercise. It is important for each therapist to find his own right way, his own words, in his own style.

My own sense is that introducing by invitation or suggestion to try an exercise is more effective than demanding that everyone "do it." People respond more to invitation than to demand performance. Also, I establish early in the group, like the first session, that no one has to read anything out loud. However, I encourage, and wait, and encourage again--if necessary--



and sometimes even ask someone if they have been writing during the week or have something that they would like to share. This may seem pushy, but I believe that, at times, we are hesitant to take the step of saying "I have something to share, listen to me." We often need an invitation to speak or read. And the invitation can be turned down; the patient has the right to say that he doesn't care to share what he has written. The invitation shows an interest, especially in the more silent members of a group, but not a command. I have also thought about the possibility of having carbon paper available for use during group writing times. Much good material is written at these times and it is important to know what is going on in individuals. Were I to implement this idea, I would be making an implicit and explicit statement that I, as leader/therapist, have the right to read everything that is written, that it should be turned in to me. As of yet, I haven't been able to make that statement. I don't believe it to be true. As a result, I have not read or heard much of the material that gets generated in my groups. Although it may be my loss, I feel that it is the group member's gain as he learns that there is privacy in writing, there can be intimacy in writing--and the world of writing is his own to use as he wants, when he wants. I hope that group members learn to take responsibility for themselves and are helped to find and believe in their own author-ity in their lives.

It is my hope in including the following design that these exercises will suggest others in your mind. I also include some additional exercises as possible alternatives. It is important to add that this is one possible design, one that I have actually followed. There are many alternatives for a workshop.

### MONDAY:

1. Share expectations of class: self, others, me. Contracting: personal goals for workshop, professional reasons for taking workshop; Personal experiences with writing/poetry: how I have used it for myself, experiences (good/bad) with writing in my past, teachers who have helped/hindered my own enjoyment and excitement with writing, how well I feel I express myself, how I feel about reading and sharing what I have written with others.

### 2. WARMUP EXERCISES:

Excellent for use in a workshop group or with a group of people who don't know each other very well.

(a) Find a partner and get to know each other for five minutes. (If the workshop is in an academic setting and people are prone to talk shop, interrupt them and remind them to get to know each other as people not in terms of jobs.)

(b) Introduce your partner to the total group using an image or a metaphor that comes to mind. (The bulk of what is shared in private dyadic conversation is not shared with the entire group. Each partner finds an appropriate image or metaphor that summarizes the essence of the five minute conversation.)

This exercise is good to get people thinking in terms of images--image-ination, in the truest sense.

### 3. STRANGER EXERCISE

This exercise gets people in touch with the Here and Now, the fact that we are all strangers to one another. We each have initial impressions of one another, have feelings about being here, the newness, the strangeness, of new faces and new situations. We each have memories of deja vu experiences of other times we have been in similar situations of greeting a new group of faces. We have outward masks we wear protecting our inner selves.

The tension between the feelings of strangeness and familiarity keeps us where we are (physically and psychologically) or propels us to move on. Our first emotional experience upon entering any new surroundings, whether it be the planet earth or a new classroom is the experience of the unfamiliar--unfamiliar walls, faces, windows. . . at such times, we also question how familiar we are to ourselves (are we still strangers to ourselves)--how will we react? is it scary or exciting or both? what does it feel like? what does it smell like? how does it look? We are, I am sure, all familiar with the experience of "the first time" whether it be the first time we enter a room or the first time we see a new face--and the realization that we never see it the way we saw it the first time again--it is a unique experience. So, too, our first day together will never be repeated. If this is the first time you have seen me, you will never see me again in just this way. The first time is a kind of birth holding pain and wonder.

Let's take advantage of this first time and write, not necessarily in poetry (the importance is to get people writing--anything) about anything you want to--this experience Now, another that sticks out in your memory, a perfect first time fantasy, how you may be feeling right now, whatever you want.

Variations: This same theme can be focused on in many other ways. Kenneth Kock (Wishes, Lies, and Dreams, Random House, 1970) "I have been a stranger. . . until" or "I feel strange when. . . but I feel at home with. . ."

Or introduction of a poem such as Longfellow's:

Ships that pass in the night, and  
                   speak to each other in passing.  
 Only a signal shown and a  
                   distant voice in the darkness.  
 So on the ocean of life, we pass  
                   and speak to one another,  
 Only a look and a voice; then  
                   darkness again and silence.

Share what is written. Creation of group, building trust, building bridges among participants. Probably outcome of most of writing is fear of judgment and evaluation of what is written as expression rather than intended as a finished product.

4. "I DON'T KNOW. . .ABOUT YOU"

The following exercise is one which is structured and limited in focus. There is great freedom within structure; and although the focus of the exercise is on the statement "I don't know. . . about you," the opportunity to fill in the blanks allows for variety and personalization. The directions for the exercise are very important. Two important points: person A is making a statement about what he does not know about his partner. He is not asking a question. As a result, person B is not put on the defensive, nor put on the spot. The second important part of the direction is that person B is not allowed to respond to any of A's statements, however tantalizing they may be. This generates a lot of responses, or feelings of responses within B which are used later in the exercise. The purpose of the inter-change is to stimulate feelings and awareness. Whatever gets stimulated is used as material for a writing exercise following the brief interchange. Time suggestions are flexible.

Directions:

(1) Find a person that you don't know or don't know well. Designate person A and person B.

B is to be listener whose sole function is to listen to A. A has one sentence which he is to say and then complete to B. The sentence is "I don't know \_\_\_\_\_ about you." Variations on this statement can be used where needed. For example: "I don't know your name, I don't know why you are here, I don't know anything about you, I don't know the hardest decision of your life."

A repeats this sentence to B for about 5 minutes filling in with whatever kinds of statements he desires.

B cannot respond to any of A's statements.

After five minutes, reverse roles, and B makes the statement "I don't know \_\_\_\_\_ about you" to A.

(2) Individually, spend 5 minutes jotting down words, phrases, notes, sentences about the feelings you had while making the statement "I don't know \_\_\_\_\_ about you" to your partner.

What kinds of areas were you willing to be openly curious about?

What were your limits, boundaries, in terms of stating your ignorance about another person, your interest, your concern? What did your statements say about you? Would your statements be fun to respond to? Which of your statements would you like to answer for yourself?

What was the role of silence during the interaction?

What were your feelings at those times?



(3) Individually, spend 5 minutes jotting down words, phrases, notes and sentences about the feelings you had while your partner addressed himself to you. Which areas did you want to respond to? Which were the areas that sparked your curiosity about your partner? about yourself?  
 What questions do you wish he had asked you but didn't?  
 What questions were you glad not to answer?  
 What were your feelings when there were silences?

(4) Circle the key words, phrases and feelings which seem most important to you.

Make a list of opposite feelings, words (like discomfort--comfort). Add modifiers to both the circled words and to the list of opposites.

(5) Spend a few minutes playing with these key words, phrases, feelings and their opposites and their modifiers. Experiment with taking the modifier from one feeling or word and putting it on another. And write down in some loosely defined "poem" whatever emerges from this. (example: millions of nothing, blue wind, sucking clouds)

(6) Share in your original dyad. (people are often hesitant to share immediately in a larger group, and there has already developed a beginning relationship and trust within the dyads.)

(7) Share in total group. (It is amazing to see how many different kinds of "poems" get generated by this simple exercise.)

Examples:

Thoughts germinating within,  
 scratching to get out  
 of the shell of fear.  
 Curiosity and intrigue  
 supply warmth and moisture  
 for the growing seeds.  
 They wish to break out  
 bearing their lovely fruit of sharing. (LB)

You came to me  
 indirectly  
 like the spilt milk the cat  
 just happen to see  
 before it was  
 wiped up. (LB)



Excited, I doubt. Doubtful, I'm excited.  
 My, what a mixture. Do they blend? Oh yes,  
 throw in a pinch of feeling. Deep breath.  
 Here, take my doubts and excitement and give me  
 a gift. . . You. I want to know your  
 excitement and doubts. (BH)

I felt sweaty feelings  
 amidst silence where intimacy  
 was neither sufficient nor even there. (BJ)

I am friendly with strangers  
 when I don't know them  
 I am strange with friends  
 when I don't know them  
 It's strange that I am friends with myself  
 when I don't know me. (TT)

We never met before.  
 I said "About you I don't know. . ."  
 And listed all I didn't know.

You looked at me intent  
 A stillborn tear twinkled  
 In the corner of your eye.

If I ask you if  
 You've wept  
 Bitterly,  
 May I also ask you  
 If you have fillings  
 In your teeth? (CS)

Silent One

Still body  
 Warm face  
 Yes, why not  
 His jumping mind  
 Stopping my binding categories  
 I rushed to remember  
     my freedom  
     my fears

Questioner

Still body  
 Warm face  
 I lost my freedom  
 I thought I knew much already  
 I regretted too late  
     to ask about the secrets.

(CL)

Knowing searching, endless sameness  
 Calmness tension, a matter of mind. Or is it?  
 Responding face  
 Stone-face  
 Both still wondering. People talk, and still I am wondering  
 I don't know. This about you. . .  
 I feel exciting, twisting out of these words,  
 I am finally implanting myself in. Fuck it.  
 Clamness of meditating aftermath.  
 Acceptance of self. I'm a bay.  
 In poem in Vermont near water falling.

(RR)

Not having to have to  
 Answer to ask is  
     better  
     cleaner  
     greener  
 Relief in a 'springing  
     twang  
 of twigs exploding  
 green tips tickling  
 the once tense membrane  
 with their now sprung  
 once beat tension  
 Asking asking  
 Loose swinging  
 Arms sweeping  
 Asking  
 Twig fingers reaching  
 Twig fingers touching  
 Asking the floor  
 Asking the top and the sides  
 Asking the roundness of another  
 Not saying not screaming  
 Not whining  
 Not sucking in  
 Not holding  
     or grabbing  
     or tearing  
     or ripping  
     or hiding and moaning  
 Just asking asking  
 Sweeping away with  
 Asking (SS)

A frequent reaction to the above exercise is amazement. "But I've never written a poem before!" This is the beginning--for many the beginning of loosening a bound creative outlet, the beginning for others of feeling good about something they produce themselves.

Frequently, when a less structured topic is assigned, a person balks and comments on some sort of writer's block or inability to express themselves and be articulate or coherent. I use that data and suggest that they try to take a good look at the block.

#### 5. WRITER'S BLOCK EXERCISE

If a person comments on having a writer's block, have them write a description of that block so that others can see it, smell it, taste it, etc. Or if a person, like a teacher or parent, played a significant role in blocking an individual or discouraging him from writing, have that person write a letter to that person telling him/her how they feel about having been cut off from the expressive outlet of writing.

(or change "writing" blocks to  
"writer's" blocks, if you wish)

I've come upon a writing block; they're about 3 cubic feet, made of black polystyrene--a stiff plastic--and shiny. Some writing blocks come dull, but the ones that are shiny, you can see your face in; these latter blocks permit some, at least initial movement of the pen. Dull writing blocks have pointy corners as practically all blocks do, and keeping in mind that they are 3 cubic feet and; black (or some other dark color); and made of polystyrene--a stiff plastic, they do have doors like their other, shiny brothers. Once inside, the doors eventually you might find that it is quite wordy; the air is doughy, sort of, with them. The shiny blocks give you a little bit of an edge over the dull ones, as you can see yourself in them as well as other things and people--as much as black polystyrene--a stiff plastic, and 3 cubic feet of it, will permit you.

These writing blocks are not as big, however, as let's say mental blocks (which may or may not have doors), Communist blocks (which come without keys) or city blocks, or whatever else may touch us or bother us to the point of having to write about them. (DS)

#### 6. What's in a name?

Names have a great deal of power and influence over our lives. Names, usually, are given to us rather than being self selected. This exercise is intended to focus attention on individual's identity via a close scrutinization of his own name. Many leading questions can be addressed, to the participants: What is your full name (first, middle, last)? Where

does the name come from? Were you named after anyone in particular? What expectations go with your name? What do the individual names mean (consult back of dictionary or the Bible). If you are a junior or a III, what does that feel like? Have you ever thought of changing your name? What would you rather be called? Why? Are there any historical or literary figures with your name? Movie actors or actresses? Is your name ever misspelled? What are nicknames for your name? Do you like being called by a nickname? Is there a connection between your astrological sign and your name? If you are married, how do you feel about your new name (if you changed it), and what has become of you as you wore your old name? If you are divorced, have you kept your married name, or changed it back?

These questions and others can be used to generate attention to one's identity as felt in a name. For one's self is found somewhere in one's name.

Examples written after focusing on one's own name:

Since birth, I've been called Ward Ghory, though full baptized and certified name is Edward James Ghory.

I spoke with my paternal grandmother on the afternoon she died and she told me what has become this story. A long time ago, in the years before Christ, in the area that is now the Middle East, there was an agricultural society divided into four classes: a ruling class, a priest class, a landowner class, and the peasants. All the priest class had the same name--what has become Ghory from the Arabic. Ghory in Arabic means "priest." Time passed, and there was a revolt in which the priests overthrew the kings and stepped into the ruling position. The name Ghory gradually came to mean priest-king. My father's cousin Aemile, who is now Prime Minister of Jordan, has kept a detailed family tree that traces the family (men only--women are not included, among other reasons, because they leave the family) back to 1600, and with some gaps back to 900. I am the eldest and only son in the direct line of descent.

There's a tradition that the eldest son is named after his paternal grandfather. In addition, each father names his son the inverse of his own name. So, my grandfather's name is Edward Joseph, my father's name is Joseph Edward. The James is the first hint of American corruption and comes from my mother's only brother. The direct line of family descent reads Edward-Joseph-Edward-Joseph back until the



point when it starts reading Esau-Yusef-Esau-Yusef.

The link that makes this tradition so immediately powerful is the coincidence of birthdates. My birthday is May 29, my father's birthday is May 29, his father's birthday is May 29. I was born 3 minutes after midnight. One part my mother has played in this whole pageant was holding her labor for those extra minutes that started this story. (WG)

### On Being a Deborah

When I was born it was a natural thing to assume I'd be called Deborah. I was named after a great uncle. His name was not Deborah, but his Hebrew name--Yehoodis--(an inadequate transliteration) was taken by my parents from the memory of him, and given to me. My full name is Deborah (or Debora) Ann without an e. The addition of the "e" on "Ann" was an interesting if an altogether insignificant change in my name. But it is significant. Quite. As you will see later. I still do not know how my parents got "Deborah Ann" from my Hebrew name Yehoodis Yechavid (this last one sounding something like David--my name would've been David had I come out as a boy).

I feel sometimes that my name has grown into me. I cherish it, I get quite angry when someone misspells my first, middle, or last names; all of which always get misspelled. Can't people take a few seconds to ask! They never misspell my social security number which is 026-40-2969, and totally lacks the rhythm, and depth of Deborah Anne. I like my first name the best of all three. Deborah was a prophetess in the Bible; she was a wise judge and a leader of her people. I am ashamed to say I know nothing more about Deborah. Maybe because I just didn't want to know. I just wanted to be my own Deborah. But when I think of a Deborah, I think of a strong proud Jewess, a pioneer woman, a mother of strong children--strong herself--an ancestor, a continuer. I tried getting people to call me Deborah instead of Debbie. But they don't, or if I give my name verbally to a bank, let's say, they start spelling it De-bra, like a bosom support for large women.

My middle name underwent an "e" change. It seemed that all Deborah's were named Deborah Ann. I sought to find a new middle name, but there weren't any around I liked which could go together rhythmically with Deborah. And Ann was a salvageable name perhaps. So the change came in ink. I wrote down Ann with an "e". Put it with Deborah, and thus became Deborah Anne. Deborah means a "bee"; Anne means "grace". (DAS)

TUESDAY7. PEOPLE SEE ME AS. . . BUT I REALLY AM. . .

This exercise helps people get in touch with assumptions about how they see themselves and how others see them. Initially people write down abstract categories in terms of self-perceptions. We have a lot to learn from the ways others see us. This exercise is borrowed from Kenneth Kóch.

(a) Have people fill in the blanks of "People see me as. . . but I really am. . . ."

(b) Share in dyad or total group.

## Example #1

People see me as	touching	but I really am	feeling
	teaching		learning
	leading		following
	outgoing		shy
	sure and confident		unconfident
	woman		little girl
	little girl		woman
	out of control		in control
	in control		out of control
	strong		weak
	patient		impatient
	contributing		interrupting
	professional		wondering if I can do it
	satisfied		unfulfilled
	independent		dependent
	available		unavailable
	trusting		trusting
	telling the truth		lying
	involved		lover
	lover		involved

(JP)

## Example #2

People see me as steady, even rigid  
 But really I am often in process  
 between poles of inner pain

People see me sometimes as quiet, aloof  
 But really I am reflective.

People see me as invulnerable  
 But really I am highly vulnerable.

Example #3

People see me as a repositful kitten when I'm really a seething lion  
 People see me as Veal Cordon Blue when I'm really a crunchy apple  
 And they see me as blue velvet when I'm only muslin and flax.

8. NAMING EACH OTHER

As in Exercise #2, we have a propensity for image-ination which we don't use as much as we could. The following exercise helps individuals become aware of how we tend to view each other and the world in terms of images and associations.

(1) Either sharing verbally, or each person having a piece of newsprint taped to the wall with his/her name on it, name each other using the following categories, and others:

animals  
 colors  
 musical instruments  
 seasons  
 tastes  
 drinks  
 smells  
 historical figures  
 mythological gods/goddesses  
 fruits  
 objects  
 flowers  
 books  
 etc.

(2) Take one of these objects or categories and write a description of yourself. (This can also be given as an out-of-group assignment. For example, find a tree which describes how you feel and write a description of that tree.)

The following is an example which illustrates how revealing having projections can be about who we really are but may be afraid, or not able, to state clearly. A seventh grade class was asked to select a tree "which describes how you feel" and write a description of that tree. How much more

we can learn from this description written by a girl in the class than we probably would learn by asking her about herself.

It stands silent out in the open. A very small delicate tree that looks as though you could tip it over simply by breathing on it. It is very vulnerable, for no matter which way you turn there is no protection from attackers. It is very odd compared to others for this time of year. Instead of turning many different colors, this particular tree is still green. What few leaves it has are still dark. It mostly was planted for decoration. It's a pity nature, which demands to be free, can be told where to grow and what space we want. It's very young compared to the others, but yet it's been here for years watching the world pass it by. There's no way, to my knowledge, that this tree could be happy.

#2

## "A Mouse"

I live  
 in a mouse-hole--  
 with round tiny  
 eyes  
 as big as my face. My nose  
 sniffs.  
 I do not like  
 the cheese today. Or this hole.  
 I hate  
 the cat.  
 I slip from its paw  
 --so small  
 he thinks I'm gone--  
 until he  
 yowels.  
 It is my pointy teeth, rat-like,  
 --my knives--  
 stabbing upward  
 into his tail.

(DAS)





Well it was just a couple of hours before our opening at the Springfield Civic Center, and he came into my dressing room. He asked me to do a new routine to impress the Springfield crowd. I told him no, I was sorry, but my horse just needs more practice if we're going to try a new number. He left disappointed, as though I'd let him down, but in the long run, I think he'll come to understand the way I function best. (LB)

#5

## "Meteor"

I am a meteor  
A bright flash  
Across a sunset sky.

Sometimes I fear  
That lighting up your world  
Might burn out mine.

(VC)

9. 5 MINUTE WRITE

Have people spend five minutes (or 25 minutes) writing about whatever is foreground for them at this point. This exercise helps focus attention on individual NOW's and gives permission for individuals to be wherever their minds have taken them. Can be shared or not.

The above exercises take a lot of time to get into and then share. Much discussion gets generated, and frequently people have things to share about themselves. It is suggested to leave adequate time to really get the most from these exercises.

WEDNESDAY10. GETTING TO KNOW EACH OTHER

Almost any exercise will help us to begin to Get to Know Each Other a little better. One that I especially like is the following.

- (1) Give the instructions at the end of one session for the following session. Ask each member to bring in a song (record) or a poem that he/she especially likes and would like to share with the group. This is all you tell them the first day.
- (2) Directions: One by one have group members play their song or read their poem. Tell them not to explain why they chose this specific song or poem, but only to play it.
- (3) After the song has been played, other group members are to give "feedback" to the initial group member who played his song. Feedback is to be focused on what the group member was sharing of himself in playing the song, i.e., what you saw of me in the song that I chose to play. Only after all responses have been made does the group move on to the next song. It is important that at no time does the group member share why he chose the specific song.
- (4) Only after all of the songs have been played and feedback has been given for all group members, everyone should take about 25 minutes and write reactions, observations about what others saw in him, what they mis-saw, what they saw which the member had not been aware that he was sharing, etc. This may have to be written at home, as the playing of the songs takes a long time along with the feedback. But time should be set aside as immediately as possible after a person's song has been played and responded to, for feelings are fresh and reactions at this point are important to hold on to in writing. Again, "poems" can be loosely defined; it is more important to get at the reactions and feelings than at a defined "poem."

## Examples:

I have no verbatim transcripts and accompanying songs for this exercise. But I can relate several interesting dynamics.

(1) One person played only the second half of his song. He said that it was too long to play through the entire song. It was interesting to hear the feedback. People said that they had wanted more from him in sessions, that he seemed to be holding himself back. Also, in following sessions, he would wait until the very end of group meetings to read what he wrote during the session or during the week. And frequently he would wait until the very end, would read his poem, and then would run off to another class--thus preventing feedback from others.

Something prevented a full interchange between him and others. And this pattern was evident early in the group when he first played his song. The connection between playing half of the song and reading a poem on the run was not made until almost the end of the semester.

(2) A Gemini couldn't select which song to play and played two songs. Where she felt that both songs communicated similar feelings, some people in the group picked up direct contradictions in the two songs, displaying the extremes of the Gemini twin-state.

(3) A woman played a song that started in a very quiet manner and erupted into an incredibly sensual and sexual explosion of pulsing music. She had been very quiet and withdrawn in the group, but her body began to sway in time with the music. Group members' reactions were all voicing a surprise and delight in her selection, in the way that we were witnessing. She showed us a more outgoing, sexual sensual and earthy side to her personality. After that session, where she allowed us to see a more non-verbal self, her behavior was very different and more outgoing in the group. It was as if she couldn't share those aspects of herself with us in words--but had to find another medium.

A variation of this exercise is to have individuals write a short piece explaining why they selected their specific song. These explanations are read out loud after the feedback has been given. This adds a fun "response" to the exercise. Also it provides another outlet for emotional history which is frequently associated with songs.

## 11. PROJECTION AND FEEDBACK

It is interesting in the above exercise to take note of the feedback that is given to individuals in the group. More specifically, it is interesting to note the feedback given by a person and see whether it fits the giver as well as the receiver. There is a tendency to pick up in others what we have experienced in ourselves, to share with others what we have learned of ourselves, or what we know are issues in our own lives.

At the end of all feedback, have group members spend some time alone trying to remember what connections they felt with others during the feedback. Frequently great identification takes place between group members. Where there are such connections building, there is also material for writing. Encourage group members to write a poem to/about someone in the group with whom they felt some kind of special connection. This can be done during group time or for the following session.

#### Example #1

Look what I wrote about her!  
 And when I wrote it  
 I felt "old and wise"  
 A bit supercilious and judgemental.  
 I was struck by "maybe"  
 By the strong message of tentativeness that came across.

Other words I wrote:

"Anything you want me to I'll be."  
 "Loosing self in others"  
 "not easily known"  
 "not looking at negative"  
 "take a hand and make a stand"  
 "accommodating, hard to say what you want"  
 "other people important to you"  
 "not clear sense of you"

And I am struck now--  
 Those are my words  
 To describe a woman.  
 But that woman  
 Is not Bonnie sitting innocent across from me.  
 That woman is  
 Me.  
 It is easier to ask the question  
 "Will she ripen into womanhood and definition?"  
 Of her  
 Than of myself.  
 I can see the tide sweeping over her, dragging her,  
 As I can feel it myself.  
 I am no older than I am  
 Although I would feign to be.



Not easily known.  
It is true.  
Except to those who love me  
And then I can hide nothing--  
Except hurt  
When it really hurts.  
But I hope that that is changing.

I don't think I am as malleable as  
"Anything you want me to I'll be"  
I sometimes am very bullheaded and stubborn  
And abrasive (damn that word)

But there is also the part of me  
That languishes for love and acceptance  
And molds my body to another  
Who will allow me to love him.

Yes--men  
Man.  
I loose my sense of who I am  
With men.  
I stand on my tippy toes  
Pretending to be bigger than I am  
And off balance  
Loose my centered, grounded self.  
Most of the time  
My legs are long enough to reach the ground  
Except when I stand on tippy toes  
Striving to be what I am not.

Does Bonnie have a tippy toe problem too?  
I wonder.  
But it doesn't really matter.

Take a hand and make a stand.  
I think I recently have.  
I took a hand--and found it strong  
And gentle  
And firm.  
I took a hand--and found it to be  
Mine.



Bonnie, I'm growing up.  
 My legs are growing down and into the earth.  
 I took a hand  
 And made a stand  
 With both feet on the ground.  
 Bonnie, I'm growing up.  
 Bonnie,  
 I am me.  
 Forgive me  
 For seeing in you  
 What is so hard to see in myself.  
 Bonnie,  
 I am growing up--and down. (JP)

### Example #2

Do you see me  
 As I really  
 am?  
 Is what you see  
 Me?  
 I thought I knew me  
 And am surprised  
 At what you see  
 That I never told you  
 But is me  
 Really.

Do you see me  
 Better than I do?

Do I know you  
 Better than you do?

So much  
 Can be said  
 Without saying. (JP)

The record exercise and feedback writing take an entire day to get through with a group of about five people. It is important to leave adequate time for both of these exercises for they generate lots of individual material. They are time consuming exercises. In an ongoing group we ended up spending three sessions on the record and feedback exercise--it was too long to spend on one exercise. I suggest that if these exercises are used they be adapted in some way or have only some people go through the entire process. It is a very rich experience to go through, but it does take time.

#### THURSDAY

##### 12. SCANNING EXERCISE

The following exercise could be used early in the group to generate material, refresh memories, and generally focus attention on writing--both the process and the product. When done later in the group, like on the fourth day, the individual is already in touch with many memories and issues associated with writing. By breaking up into pairs, individuals can have more individual time to work on their own issues. This can potentially be a "heavy" exercise. I have used it in one-shot workshops, and participants have had some very intense experiences. Be prepared to be available for participants who get in touch with past pain related to writing. Many "teachers" or parents have influenced us in many ways which we have blocked from our everyday memories. This exercise is geared towards getting back in touch with "forgotten" memories--both good and bad.

(1) find a partner.

(2) designate A and B. A is to listen totally to B--not responding but giving complete and undivided attention to B, who will be the first person to talk. A can ask short questions which serve only to help clarify or expand what B is saying. A and B should not engage in a dialogue or conversation. This is to be a one way monologue for B. B is to scan all of his/her memories of writing, good and bad, things written, possible favorite or hated assignments in school, teachers who played important roles in developing or blocking your enjoyment of writing, exams that might have been especially hard, gruelling or joyous, memories of special letters you wrote or received, people you might want to write to, teachers who have hindered your writing, who didn't understand what you were trying to say, articles you might have written for school newspapers, literary journals, or journal publications. Start with the earliest memories and work forward. And after you have completed all you can remember, start over again from the earliest memories, saying the ones you already mentioned to yourself, and saying out loud any additional ones that come to mind. (30 minutes)

(3) reverse roles.

**Rationalc:** this exercise helps establish relationships within the group as well as recalling important people and times involved in the group member's experience with writing. Nothing need be written off of this exercise, probably a lot will get written whether assigned or not.

If you want to structure some writing off of the exercise:

(4) Individually, spend the next five minutes jotting down words, phrases, notes, sentences about the feelings that you had while scanning your writing memories. Do you remember any lines from specific poems that you have written? Any feelings towards specific people? teachers? friends? Were you especially proud about anything in particular, or embarrassed? Did any one person block your enjoyment of writing? What are your feelings towards that person? Any thoughts that you had while your partner spoke? Any contests that you won?

(5) Circle the key words, phrases, etc. that mean the most to you in looking back over your own experience. If any of these have opposites, write the opposites on your paper as well. Then modify these words and feelings with some adjective or modifiers.

You might experiment with taking a modifier from one feeling or word and attaching it to another feeling or word.

(6) Spend a few minutes playing with these key words and phrases and constructing a very loosely defined "poem."

(7) Share with your partner. (especially at a beginning of a group when overall trust is low.)

(8) Share in total group.

### 13. GENERAL DISCUSSION

Probably the rest of the day will be best spent processing this exercise and generally sharing some of the memories that individuals got in touch with. Also, exercises can be made up on the spot to focus on specific kinds of issues that might be brought up. Or if people get in touch with important memories, they can take the time to write.

The following is an example of something "poetic" that evolved from the scanning exercise. I include it here just to illustrate that individuals can have fun and freedom with playing with words and opposites without feeling that they have to come up with anything prolific or perfect.

Here are some opposites: NOT A POEM

composed awkwardness  
 public sensitivity  
 your fun loving hurt  
 puritan eroticism  
 bored curiosity  
 cold black blond  
 bored amusement  
 hand-like foot  
 ejaculatory reticence

## FRIDAY

### 14. ENDING EXERCISE

The final day of the workshop feelings of termination and endings are acutely felt after an intensive week of intimate sharing among strangers. Using the NOW is important throughout the workshop, and the final day is no different. Use these very real and present feelings for a directed writing time. Leave ample time to share what gets written and to work with any unfinished business.

Wrap-up, process, evaluate and bring closure on the week. Share back-home applications, brainstorm resource bank of exercises, review workshop process, evaluate self and workshop.

The design of the above workshop is very roughly gauged for time. I found that some exercises took much more time than I had anticipated, others took less. These exercises can be used in sequence or in isolation of one another. Other exercises can also be substituted.

I will include some alternative exercises below.

### 1. TOUCH EXERCISE

The following exercise, because it involves contact between individuals, should be used only in settings where physical contact is acceptable and manageable. Although the threat and risk of touching and being touched serves as data and material for writing, it could backfire and result in disruption of the group.



1. Divide total group into A and B.
2. A's lie on the floor, shut eyes, and relax.  
(If people want to be touched on their backs, they lie on their fronts. If they prefer being touched only on their faces (safer, less risk), lie on their backs.)
3. B's find an A (with eyes shut), give a very "giving" backrub. Introduce yourself through your hands, meeting your partner through his back, nonverbally. Say with your hands what you would want to say with words. . . . Say good bye to this new friend, and make the break between contact and no more contact as gentle and caring as possible.
4. B's bend down and allow A to see you with his eyes. Still no words.
5. B's find another A; give a second backrub. (rationale: A often doesn't fully appreciate a backrub knowing that it will end. This shifts a tit-for-tat mind-set of giving and getting.) same directions.
6. B's lie on floor, shut eyes, etc. A's give backrubs. Same directions.
7. Write for 5 minutes.  
words, phrases, sentences about the feelings you felt while receiving the backrub. How did it feel to be touched? by a total stranger? How did it feel to find out who it was? Had you thought that your partner was of the opposite sex because of the strength or gentleness you felt? What were the memories, thoughts, and feelings you were having? What was your reaction when you learned that you didn't have to get up right away and give the backrub right back? How did you feel when you met your partner? How did you feel when s/he moved on to someone else? Did I feel closer to the person that I would have if we had met and talked?
8. Write for 5 minutes.  
words, phrases, sentences about the feelings you had while giving the backrub. What is it like to touch a stranger? Where did I feel safe touching? Where did I feel self-conscious? What did I say through my hands? What did I reveal about myself through my hands that I might not share right away with words? How did I feel when I had to give a second backrub? What did I learn about myself doing this? Did I want to use words, or was I glad that I didn't have to?
9. Circle the key words and phrases in each part. . . if there are opposites or related feelings, add them. . . if you want to modify any of these, do so. Experiment with taking the opposite feelings or words and combining them.
10. Take these word, phrases--modified or alone--and combine them into a loosely defined poem.
11. Find a partner, maybe someone you met during the exercise, and share the poem that emerged from this exercise.
12. Share in the total group.





There is no stranger  
 We are one  
 I care

Which is giving  
 I need to give by taking  
 I need to take by giving  
 I need  
 I

Enough  
 Not enough  
 Never enough  
 My body feels hungry  
 For fingers  
 To put me  
     in touch  
         with me.

(AR)

I touch and say:  
 Be at ease.  
 I'll give you nothing,  
 But I may show you something  
     you hadn't seen.  
 No words--I find that  
 Touch is to the body;  
 Words are only to one part of the mind.  
 And in doing this I find that  
 My body is so much more me  
 Than my mind  
 Because my mind changes so much faster  
 Than my body.  
 Then I must surrender to touch  
 And remembering, I can scarcely write  
 For the effort blocks full appreciation  
 Of the still lingering pleasure  
 Of that touch.

(BH)

Hands open doors  
Better than words,  
And close them slower.  
Hands live alone  
On the ends of big bones;  
But fingers chatter and race  
And giggle as they  
    walk by themselves.  
Hands held closed  
Embrace,  
Support,  
Lift up.  
One hand learns, but  
    two speak together.

(AM)

People aren't so strange,  
The world isn't quite so far away,  
When someone touches me.

When someone touches me  
I'm no longer a stranger to myself,  
What I really fear, is  
not a stranger's touch, but  
what's inside of me,  
that I'm not sure about.

(NF)

## 2. Variations:

Many different possible exercises are adaptable off of the "People see me as. . . but I really am. . ." format, or a more general format of filling in the blanks or completing sentences. Some of these are:

- (1) I told a lie when. . .
- (2) A time when I was embarrassed. . .
- (3) I used to be. . . but now I am . . .
- (4) I used to think. . . but now I know. . .
- (5) I used to . . . but now I. . .
- (6) I wish I could. . .
- (7) I wish. . .
- (8) I resent. . . but I also appreciate. . .
- (9) I feel. . . but I often express. . .

Example:

I feel. . . but I often express. . .

anger

Withdrawal, hurt

shy, awkward

aggression

fear

inarticulateness

- (10) Write a letter to the saddest person you know.
- (11) Write a letter to a "good mother."
- (12) Write a letter to one of your "wise old men."
- (13) If you were going to write a suicide note what would you say?
- (14) If you had died, what would your epitaph say?
- (15) Write a eulogy for yourself.

## 3. GESTALT VIEW OF WORDS: TAKING A PICTURE OF WORDS

(1) Have all group members share the words, feelings, etc., which are most important to them. Write them up on a blackboard or on newsprint.

(2) Have all group members sit facing the board.

(3) Everyone shut eyes. Have everyone rotate 90° to the left, still with eyes shut. Describe the function and quick movement of the shutter of a camera as it "snaps a picture." Have people "take a picture," opening and closing their eyes very quickly.

(4) Rotate 90° again to the left, and again "take a picture" of whatever is directly in front of them. Repeat this twice more, until the group is facing the blackboard again.

(5) Indicate that they will be facing the list of words, and again give the direction to "take a picture," opening and closing their eyes very quickly.

(6) Share what emerges as foreground:

Examples:

conf I dence

nOW

d--anger

grOWth

stran gers--straingers

4. Bring in a favorite poem to share with the group. Also bring in a poem that you have written as a response to your selected poem.

As I finish revising the above design, I am struck by how much structure I am imposing on participants who sign up for the workshop. Last summer when I ran this particular design the structure flowed easily and we didn't feel constrained at all by it. However, on rereading and re-experiencing it as I revise it, I am struck by how much structured time there is as opposed to free time allowing for exploration of individuals issues. It is important to remember that there were only 4 people participating in the workshop.

It is important to re-state that a therapist should always be able to flow with what is happening at any given time. Even when a design is labored over for hours, it is dispensible. Other issues can become more important. In the group last summer one person wanted to work on a dream that she had had during the workshop. So on Thursday afternoon we abandoned the design, and I did some simple gestalt work with her on her dream. It turned out to be a very powerful and important session for her and one of the highlights of the week for all of us.



So, although I include here a tentative design for a five day workshop, I also include my heartiest encouragement to alter it, improvise on it or abandon it altogether.

### SUMMARY

In this chapter I have begun to formulate my own theory of Poetry Therapy. The "Towards" in the title is important, for, as is evident, my theory and approach is growing and changing--as I am. The more groups I conduct, the more ideas and learnings I have, the more changes I make, the more relaxed I am as a therapist. Possibly my initial use of structure reflected my own lack of ease with my role. I don't think that is entirely true--nor false either. I feel that I have grown as a therapist and facilitator. I am still learning some very fundamental differences about people, especially on a developmental level. Groups which are primarily undergraduate are different from groups which are purely graduate. I am learning about what effect that has on my role as a therapist. Levels of self awareness are different; life experiences are different. The contexts for groups that I have run for any duration have been only within a University setting. Shorter workshops have included more of a variety of people from different backgrounds. At this point, my experience is still limited. I want to expand on my experience and run Poetry Therapy groups with people of more dissimilar backgrounds.

The writing of this chapter has helped me to grapple with my own experience and lack thereof. In writing and researching the bulk of this dissertation, I have felt in control of the vast amounts of journal articles and periodicals. I have had answers when people have asked me questions about Poetry Therapy applications. Now, as I finish this chapter I am left with questions and further work to do in clarifying and explicating my own theory. Although the end, this is really my beginning.

## CHAPTER NINE

### CONCLUSION

The preceding pages have addressed the topic Poetry Therapy. The title of the dissertation is significant--TOWARDS ALTERNATIVE THEORIES OF POETRY THERAPY--for each part of the title contributes to the overall intent of the paper.

"Towards," perhaps, is one of the most significant; for the word implies movement, growth and potential--a process which has not yet been completed. Throughout this dissertation the stress on process rather than product has been obvious. The purpose of the dissertation is to begin to define and lay out the many aspects of Poetry Therapy and to draw together what many writers (psychologists and others) have to say about what goes on and what evolves from Poetry Therapy. The emphasis is on "towards" and on the beginning stages of such definition. The author is first drawing together many differing orientations towards Poetry Therapy and setting them side by side. This in itself is a beginning at formulating a more general definition of "Poetry Therapy" when few authors ever make a specific statement of definition of what Poetry Therapy is. Chapter Eight is the author's statement of her own view of Poetry Therapy, including assumptions which are basic to the way she conducts a group. Again, "towards" is significant

in two important ways: first, as encouragement to other Poetry Therapists to make such a statement of their own assumptions and practices; and second, that the author's own effort at stating the assumptions and techniques she uses are themselves evolving and not in any one final presentable packet. She feels herself very much involved in the process of defining and clarifying. She presents the bound product bearing this in mind--that this is a product but not the final product "towards" a definition of a theory of Poetry Therapy. As has been communicated throughout, it is not the arrival but the journey that counts.

"Alternative Theories" is also important, for this dissertation is not stating one theory or one way of approaching the topic of Poetry Therapy. Some historical and anthropological preinstitutionalized foundations for the development of Poetry Therapy have been briefly traced. Three theoretical foundations (Freud, Jung and Perls) have been included to give a sense of the clinical grounding of Poetry Therapy in accepted approaches to psychotherapy. The author has drawn together many of the experiences of individuals practicing Poetry Therapy and begun to flush out a fuller picture of what Poetry Therapy is given their experience; and she has begun to formulate her own statement of Poetry Therapy. All of the above are inter-linked with one another; yet each is important in its own right. It is not intended to make one statement of one definition of Poetry Therapy. Rather it is to give permission, and indeed encouragement, towards developing strong and self-conscious

alternative statements by others involved in Poetry Therapy.

Finally, "Poetry Therapy" is important. And the relationship of "poetry" to "therapy" and vice versa. There is no one best emphasis either on poetry or on therapy; both interrelate and can be synergistically related. That is, poetry as a vehicle for a person to get in touch with himself can aid in the therapeutic process of self-awareness, growth and change, and therapy can facilitate the process of expression and communication inherent in poetry.

In many instances the technique of application may seem to be confused with the "theory." What is the relationship between "technique" and "theory" in Poetry Therapy? At this stage of definition that question is an important one to raise and possibly one not to answer prematurely. There is a fine line between theory and technique, one interfaces the other, and both support and contribute towards the same essence.

Another area I have pointed out is again a standing question with no one answer--and that is "Is Poetry Therapy a therapy in its own right or an adjunct therapy?" The author has answered this question for herself and encourages every Poetry Therapist to do the same. Finally, she has tried to give some idea of what Poetry Therapy is, how a group is conducted, and who conducts it.

This dissertation is more than a mere review of the literature aimed at professionals. It also can serve as an introduction to people wanting to find out what Poetry Therapy is. In addition, the author has made a personal



statement based on her own experience and on readings in the field. It is hoped that this effort at explicating her own foundations will serve as a model for other therapists who believe that they have something to contribute to the field. This modeling is consistent with the author's assumptions about how she operates in groups--she participates, she shares, she models a process of self-exploration and self-assessment through writing. She offers this final piece of writing as a step in that process.

The significance of writing a dissertation is twofold: first, that the writing be a significant contribution to the field; and second, that the writer learn and grow from the experience of writing. The author fulfills both of these criteria.

Finally, she would like to suggest three areas of inquiry and documentation that would be significant contributions to defining, publicizing and strengthening the field. First, more documentation has to be made by therapists about how they go about working with a poem in a therapy group. What are the issues they are constantly bearing in mind when a patient presents a poem, or even before that, how can they encourage a patient to write a poem? And while they are working, what are they keeping in mind? Or is it even appropriate to use the word "work" in relation to a poem? Does a therapist "work" with a patient on his poem. If there is simply a process of reading poetry that is written, how is that process therapeutic, how does it effect the group, and the individual, and what are the dynamics

involved during and after a patient shares a poem? These are all questions which should be addressed in more detail.

Second, there should be more exploration of the differing dynamics which occur within different contexts of groups. For example, a group in an academic setting probably has dynamics different from those of a schizophrenic hospitalized group. In the academic group there may be a demand for theory of how and why Poetry Therapy works, whereas in the group of hospitalized patients such questioning may not be relevant. However, even that distinction may be making some assumptions about "sickness" and "health" which perpetuate the gap between them. For example, in a university group there may be intellectual and cognitive discussion in addition to the emotional sharing of feelings. I have wondered whether such discussions might not serve a purpose in a hospital ward as well. If we are treating students as able to understand the theoretical framework behind Poetry Therapy, why can we not treat some hospitalized patients in the same way? If, through poetry we are saying we (as therapists) are making an effort to hear you in your language, you, in turn, can learn to hear us in our (theoretical) language. This is making an assumption of mental health rather than mental sickness. This is just a hypothetical "what if" at this point. There have been no groups within a hospital setting which have been run in the same fashion as a more educationally (training) oriented group. This raises the question of how much and when do you "process" what has been

going on in a group. How much is theory appropriate, and is it necessary to talk theoretically at all?

Finally, therapists have to become more accountable for what they are doing. It is the author's hope that more therapists will value the process of self-inventorying what they want to be doing and what they are able to do. Therapists must begin to make such statements publicly and pointedly. For the profession of psychotherapy can only benefit, grow stronger, become more effective, and be less mystifying the clearer and more personal the statements made.

## BIBLIOGRAPHY

## BIBLIOGRAPHY

Periodicals and Journals

- Aleksandrowicz, D. "The meaning of metaphor," Bulletin of Menninger Clinic, 1962, 26:92-101.
- Alston, E. "Psychoanalytic Psychotherapy conducted by correspondence," International Journal of Psychoanalysis, 1957, 38:32-50.
- Anand, Santoch Singh, "Health, disease and poetry," Journal of Postgrad. Med. July, 1970, 105-119.
- APT News (Newsletter of the Association for Poetry Therapy, 799 Broadway, Suite 629, New York, New York, 10003).
- Beatty, William K. "An historical review of bibliotherapy," Library Trends, 11 (October, 1962), 107-17.
- Becker, B. J. "Insightful verses," American Journal of Psychoanalysis, 31, 1971, 103.
- Bercovitch, Saovan. "Literature and the repetition compulsion," College English, 29, May, 1968, 607-615.
- Beres, David. "Communication in psychoanalysis and the creative process: A parallel," Journal American Psychoanalysis Association, 1957, 5: 408-423.
- Bottone, Anthony. "Poetry in medicine," The New Physician, July, 1971.
- Breslin, James. "William Carlos Williams: Poet and physician," The New Physician, July 1971, 433.
- Bryan, Alice I. "Can there be a science of bibliotherapy?" Library Journal, 64, October 1939, 773-776.
- Buck, Lucien A. and Kramer, Aaron. "Poetry as a means of group facilitation," Journal of Humanistic Psychology, vol. 14, #1, winter 1974, 57-71.
- Burnside, I. M. "Nurse-patient relationship," Nursing Forum, vol. 8, 326.



- Bychowski, Gustav. "Metapsychology of artistic creation." Psychoanalytic Quarterly, 1951, 20:592-602.
- Cain, A. and Maupin, B. "Interpretation within the metaphor," Bulletin of Menninger Clinic, 1961, 25-307-311.
- Calabria, F. "The free association method and intrepretation of poetry," (Paper delivered at American Psychological Association, San Francisco, 1964).
- Card, Peggy. "Poetry as a bridge to the lost," RN (Registered Nurses Magazine), 32, March 1969, 46-49.
- Chase, Janet. "Poems struggling to be born," Human Behavior, 2, August 1973, 24-28.
- Chase, Janet. "Poetry Therapy," Human Behavior, August 1973, 25-28.
- Craigie, Annie L. "The cheering stimulus of poetry in veterans bureau hospitals," Modern Hospitals, 33:85-88, 1929.
- Erickson, Carl and Lejeune, Ruth. "Poetry as a subtle therapy," Hospital and Community Psychiatry, Feb. 1972, 56-57.
- Farber, David J. "Written communication in psychotherapy," Psychiatry, 1953, 16:365-374.
- Fine, Harold J.; Pollio, Howard R. and Simpkinson, Charles H. "Figurative Language, metaphor and psychotherapy," Psychotherapy Theory, Language and Practice, 10, Spring, 1973, 87-91.
- Forrest, D. V. "Poeisis and the language of schizophrenia," Psychiatry, 28: Feb. 1965, 1-18.
- Foster, Joan. "Urban poetry for children: Where and how to find it," RQ: Reference and Adult Services Division, A. L. A., Vol. , 13, #4, Summer 1974.
- Friedlander, Kate. "Children's books and their function in latency and prepuberty," American Image, 3, 1942, 129-50.
- Goldfield, Michael and Lauer, Roger. "The use of creative writing in groups of young adult drug abusers," The New Physician, July 1971, 449-465.
- Greifer, Eli. "Poetry therapy," The Brooklyn Psychologist, Sept. 1964.

- Griffin, Julius. "Poetry and the therapeutic experience," (Unpublished paper presented to UCLA Extension class May 9, 1972).
- Hall, Calvin S. "Attitudes toward life and death in poetry," Psychoanalytic Review, 52, spring 1965, 67-83.
- Hamilton, James W. "Object loss, dreaming and creativity: The poetry of John Keats," Psychoanalytic Study of the Child, 24, 1969, 488-531.
- Hannigan, Margaret C. "Experience in group bibliotherapy," ALA Bulletin, 48, March 1954, 145-50.
- Hannigan, Margaret. "The librarian and bibliotherapy: Pharmacist or bibliotherapist?" Library Trends, 11, Oct. 1962, 184-189.
- Harrower, Molly. "Poems emerging from therapeutic experience," Journal of Nervous and Mental Disease, vol. 149, 1969, 2:213.
- Hartman, Esther A. "Imaginative literature as a projective technique: A study of bibliotherapy." Unpublished Ph.D. dissertation, Stanford University, 1951.
- "In the Psyche Wing, the sound of poetry," Medical World News, 14, 1973, 31, 116E.
- Jackson, Evalene P. "Bibliotherapy and reading guidance," Library Trends, October 1962, 118-122.
- Jerome, J. "Poetry how and why," Writers Digest, August 1972.
- Jones, Lanie. "A poet-in-residence at a mental hospital," La Magazine, July 29, 1972, 29.
- Kaplan, Judith. "'Poetry therapy'--new and for mental illness," Seventeen, January 1973.
- Koch, Kenneth. "Teaching great poetry to children," The New York Review, Sept. 20, 1973, 25-32.
- Koslow, S. P. "Poetry therapy," Mademoiselle, March, 1972.
- Kramer, A. "Poetry and interpersonal communication," in Innovations in educating emotionally disturbed children and youth. Hawthorne, N. Y. Assoc. of New York State Educators of the Emotionally Disturbed, 1970.

- Kris, Ernst. "Psychoanalysis and the study of creative imagination," Bulletin New York Academy of Medicine, 29, 1953, 334-351.
- Lauer, Roger. "Creative writing as a therapeutic tool," Hospital and Community Psychiatry, 23, #2, February 1972.
- Lauer, Roger and Goldfield, Michael. "Creative writing in group psychotherapy," Psychotherapy: Theory, Research and Practice, vol. 7, Winter, 1970, 248-252.
- Lawler, J. G. "Poetry therapy?" Psychiatry, Aug. 1972, 35:227-237.
- Leedy, Jack J. "Poetry and medicine," MD: Medical Newsmagazine, 3 July 1964.
- Leedy, Jack J. "The value of poetry therapy," American Journal of Psychiatry, 126, February 1970, 132-134.
- Leedy, J. "Poetry therapy--what can it do for you," Pageant, Feb. 1975, 28, 7.
- Lerner, Arthur. "Poetry therapy and a 'freedom to move in any direction'," Showcase Magazine of the Chicago Sun-Times, July 16, 1972, 2.
- Lerner, Arthur. "Poetry therapy: from sad to verse," PTA Magazine, 67, March 1973, 30-32, 36-37.
- Lerner, Arthur. "Poetry therapy," American Journal of Nursing, 73, August 1973, 1336-38.
- Lerner, Arthur. "Poetry therapy, a healing art," The Study of English, Jan 1, 1974, 22-27.
- Lessner, Joanna W. "The poem as catalyst in group counseling," in Personnel and Guidance Journal, vol. 53, #1, Sept. 1974.
- Lewin, D. D. "Remarks on creativity, imagery, and the dream," Journal of Nervous and Mental Disease, 149, August 1969, 115-21.
- Luber, Raymond. "Poetry therapy helps patients express feelings," Hospital and Community Psychiatry, June 1973.
- McDaniel, C. G. "Sartre, Salinger and psychotherapy," Riverside, California Press, July 9, 1973, A-8.

- McDowell, David J. "Bibliotherapy in a patients' library," Bulletin of Medical Library Association, 59, July 1971, 450-457.
- Margolis, Gary. Poetry and the promise of self. New York: Holt, Rinehart & Winston, 1974.
- Matarazzo, J. D. "Some psychotherapists make patients worse!" International Journal of Psychiatry, 1967, 3:156-157.
- Mazzanti, V. and Bessell, H. "Communication through the latent language," American Journal of Psychotherapy, 1956, 10:250-260.
- Menninger, William C. "Bibliotherapy," Bulletin of the Menninger Clinic, 1, November 1937, 263-74.
- Miller, Arlyn. "The spontaneous use of poetry in an adolescent girls' group," International Journal of Group Psychotherapy, 223-228.
- Montgomery, Paul L. "Psychopoetry: a new way of reaching the disturbed," New York Times, April 17, 1971.
- Mornson, Theresa. "A new way with poetry," Journal of rehabilitation, XL, May-June, 1974, 28-31.
- Moses, Harold and Zaccaria, Joseph. "Bibliotherapy in an educational context: Rationale and principles," High School Journal, vol. LII, April 1969, #7.
- Myerson, Paul G. "How the psychiatrist might relate to the writer," Seminars in Psychiatry, V, August 1973, 245-260.
- Naumberg, M. "The nature and purpose of dynamically oriented art therapy," Psychiatric Opinion, 3, 1966, 5-19.
- Nemiah, John C. "The art of deep thinking: reflections on poetry and psychotherapy," Seminars in Psychiatry, V, August 1973, 301-312.
- Ober, William. "William Carlos Williams: physician as poet," New York Journal of Medicine, 69, April 1969, 1084-1198.
- Oder, Thomas C. "A populist's view of psychotherapeutic professionalization," Journal of Humanistic Psychology, Vol. 14, 1974, #2.
- Ostwald, P. "The inner speech of psychotherapy," American Journal of Psychotherapy, 11, 1967, 757-766.



- Poetry Therapy. "An idea whose time has come," Roche Report: Frontiers of Hospital Psychiatry, 1970, 7:1-2, 8.
- "Poetry therapy," Time, March 13, 1972, 45.
- "Poetry used in various ways in psychotherapeutic encounters," Roche Reports Frontiers of Clinical Psychology, 1970, 7:1-2, 11.
- Pool, Bob. "Mental patients 'touch their feelings' with poet's guidance," News-Chronicle, Thousand Oaks, California, Sept. 16, 1971.
- Putzel, Judith. "Poetry therapy: A growing idea," Massachusetts Personnel Guidance Journal, Newsletter, January 1974.
- Putzel, Judith. "The poet who dies young" Educational Arts Association Newsletter, August 1974.
- Putzel, Judith. "What we know when we don't know," Educational Arts Association Eastern Conference Handbook, Winter, 1975.
- Rance, Constance and Price, Arlene. "Poetry as a group project," American Journal of Occupational Therapy, Vol. 27, 5, July 1973, 252-255.
- Richardson, Eloise. "Poetry therapy in a public library setting," North Country Libraries, vol. 14, Jan-Feb. 1971, 5-7.
- Roberts, Bill. "Poetry sessions praised as addicts' treatment," Tuscon, August 27, 1972.
- Rogers, Robert. "The dynamics of metaphor: Modes of mentation in poetry," Hartford Studies in Literature, 3, 1971, 157-90.
- Rothenberg, Albert. "Poetic process and psychotherapy," Psychiatry, August 1972, 35:238-254.
- Sansweet, Stephen J. "In poetry there could be reason as well as rhyme," Wall Street Journal, March 13, 1975.
- Searles, Harold F. "The differentiation between concrete and metaphorical thinking in the recovering schizophrenic patient," in Collected Papers on Schizophrenia and Related Subjects. N.Y.: Intern. Univ. Press, 1965, 561.
- Solomon, Joan. "Poetry therapy," The Sciences, Jan-Feb, 1972, 20-25.



- Sonne, J. C. "Metaphors and relationships," Family Process, 3, Sept. 1964, 425-427.
- Spector, Samuel. "Poetry therapy," Voices, Journal published by the American Academy of Psychotherapists.
- Spector, Samuel. "Research in poetry therapy," Unpublished paper mentioned.
- Tedford, Wilt and Synnot, Carolyn S. "The use of semantic differential with poetic forms," Psychological Record, Vol. 22, #2, Summer 1972, 369-373.
- Valentine, G. W. "The function of images in the appreciation of poetry," British Journal of Psychology, 14, #2, 1929, 164-91.
- Vine, Harold A., Jr. Affective understanding and the reading of poetry. Ph.D. dissertation, Syracuse University, 1970.
- Widroe, Harvey and Davidson, Joan. "The use of directed writing in psychotherapy," Bulletin of Menninger Clinic, 25, 1961, 110-119.
- White, Glenn. "The healing muse," Psychiatric Reporter, May-June, 1964.
- Wrenn, Marie-Claude. "Take two aspirin and one poem," Life, Nov. 5, 1971.

### BOOKS

- Abbe, George. Poetry: The great therapy. American Wise-Whetstone Publishers, n.d.
- Alsbrook, Eleanor Young. Changes in the ethnocentrism of a select group of college students as a function of bibliotherapy. Ed.D. dissertation University of Illinois, Urbana-Champaign, 1970.
- Arnheim, Rudolph. Art and visual experience.
- Arnstein, Flora. Children write poetry: A creative approach. N.Y.: Dover, 1957.
- Bachelard, Gaston. Poetics or reverie. Boston: Beacon Press, 1971.
- Bechelard, Gaston. The poetics of space. Boston: Beacon Press, 1972.
- Bachelard, Gaston. The psychoanalysis of fire. Boston: Beacon Press, 1971.
- Bion, W. R. Experiences in groups. New York: Basic Books, 1961.

- Blackmer, R. P. Language as gesture. New York: Harcourt, 1935.
- Blaton, Smiley. The healing power of poetry. New York: Crowell, 1960.
- Bowra, C. M. Primitive song. Cleveland: World Publishers, 1962.
- Bruner, Jerome S. On knowing: Essay for the left hand. N. Y.: Athenium, 1971.
- Bullough, Geoffrey. Mirrors of the mind: Changing psychological beliefs in English poetry. Toronto: Toronto University Press, 1962.
- Burten, A. (ed.). Encounter: The theory and practice of encounter groups. San Francisco: Jossey Bass, 1970.
- Cassirer, Ernst. Language and myth. New York: Dover, 1953.
- Crafts, Gretchen B. Our own thing: Contemporary thought in poetry. Englewood Cliffs, N.J.: Prentice Hall, 1973.
- Durr, R. A. Poetic vision and the psychedelic experience. New York: Dell, 1970.
- Egan, Gerard. Encounter: Group processes for interpersonal growth. Belmont, Calif.: Brooks/Cole Publishing Co., 1970.
- Eliade, Mircea. From primitive to zen. New York: Harper, 1967.
- Eliade, Mircea. Myths, dreams and mysteries. New York: Harper & Row, 1967.
- Eliot, T. S. On poetry and poets. New York: Ferrar, Strauss & Cudahy, 1957.
- Farvardin, Parvis. From poetry to poetry therapy. (Translated title of a book in Persian; Dr. Farvardin's address is: 145 Pahlavi Ave., Ami Square, Tahrán, Iran.)
- Freud, Sigmund. The basic writing of Sigmund Freud. New York: Modern Library, 1938.
- Freud, Sigmund. "Creative writers and day-dreaming," The standard edition of the complete psychological works of Sigmund Freud. London: Hogarth, 1953.
- Freud, Sigmund. Group psychology and the analysis of the ego. New York: Bantam Books, 1960.
- Freud, Sigmund. "The relationship of the poet and daydreaming," Collected papers, vol. 4, London: Hogarth Press, 1953.
- Ghiselin, Brewster (ed.). The creative process. N. Y.: New American Library, 1952.

- Gibran, Kahlil. The prophet. New York: Knopf, 1952.
- Goodman, Paul. Speaking and language: Defense of poetry. New York: Random House, 1971.
- Griener, Eli. Principles of poetry therapy. New York: Poetry Therapy Center, 1963.
- Gross, Harvey (Ed.). The structure of verse: Modern essays on prosody. New York: Fawcett World Library, 1966.
- Gusdorf, Georges. Speaking. Chicago: Northwestern University Press, 1965.
- Harding, Esther. Women's mysteries. Putnam, N. Y.: C. G. Jung Fndtn, 1971.
- Harrower, M. Time to squander, time to reap. New Bedford, Mass.: Reynolds Press, 1965.
- Harrower, Mary Rachael. The therapy of poetry. Springfield, Ill., 1972.
- Hayakawa, S. I. Language in thought and action. New York: Harcourt, 1964.
- Hoffman, Frederick J. Freudianism and the literary mind. 2nd ed. Baton Rouge: Louisiana State University Press, 1957.
- Hopkins, Lee Bennett. Let them be themselves. New York: Citation Press, 1971.
- Jackins, Harvey. The human situation. Rational Island Publishers, 1974.
- Janaro, Richard Paul. Identity through prose. New York: Holt, Rinehart & Winston, 1971.
- Jenkinson, Edward B. and Seybold, Donald. Writing as a process of discovery. Bloomington, Ind.: Indiana University Press, 1971.
- Jung, C. G. Memories, dreams and reflections. New York: Random House, 1963.
- Jung, C. G. Modern man in search of a soul. New York: Harcourt, Brace & World, 1933.
- Jung, C. G. The portable Jung, especially "Relation of analytical psychology to poetry," New York: Viking Press, 1972.

- Jung, C. G. Psyche and Symbol. New York: Doubleday, 1958.
- Kagan, Jerome (Ed.). Creativity and learning. Boston: Beacon Press, 1970.
- Keen, Sam. To a dancing god. New York: Harper and Row, 1970.
- Keen, Sam and Fox, Anne Valley. Telling your story: A guide to who you are and who you can be. Garden City: Doubleay, 1973.
- Koch, Kenneth. Wishes, lies and dreams. New York: Random House, 1970.
- Kris, Ernst. "On inspiration." in Psychoanalytic Explorations in Art. International University Press, 1952.
- Laing, R. D. Knots. New York: Pantheon, 1970.
- Laing, R. D. Politics of experience. New York: Ballantine, 1967.
- Langer, Suzanne. Feeling and form. New York: Scribners, 1953.
- Langer, Suzanne. Mind: An essay on human feeling. Baltimore: Johns Hopkins Press, 1967.
- Larrick, Nancy (Ed.). Somebody turned on a tap in these kids. New York Delacorte, 1971.
- Leedy, Jack. (Ed.). Poetry the healer. Philadelphia: Lippincott, 1973.
- Leedy, Jack. Poetry therapy. Philadelphia: Lippincott, 1969.
- Leedy, Jack. Poetry therapy: A new ancillary therapy in psychiatry. New York: Poetry Therapy Center, 1966.
- Leedy, Jack. (Ed.). Poetry therapy: The use of poetry in the treatment of emotional disorders. Philadelphia: Lippincott, 1969.
- Lerner, Arthur. Psychoanalytically oriented criticism of three American poets: Poe, Whitman, and Aiken. Cranbury, N.J.: Fairleigh Dickinson University Press, 1970.
- Lewis, Richard. I breath a new song. New York: Simon and Schuster, 1971.
- Lippert, J. The evolution of culture. New York: Macmillan, 1931.



- Maslow, Abraham. Towards a psychology of being. New York: Van Nostrand 1968.
- May, Rollo. Love and will. New York: Norton, 1969.
- May, Rollo. Symbolism in religion and literature. New York: Braziller, 1960.
- Mearns, Hughes. Creative power: The education of youth in the creative arts. New York: Dover, 1958.
- Mills, Ralph (Ed.). On the poet and his craft. Seattle: University of Washington Press, 1965.
- Monroe, Margaret, (Ed.). Reading guidance and bibliotherapy in public hospital and institution libraries. Madison: Library School of the University of Wisconsin, 1971.
- Montague, Gene. Poetry and a principle. Philadelphia: Lippincott.
- Moody, Mildred L. and Limper, Hilda K. Bibliotherapy: Methods and materials. Chicago: American Library Association, 1971.
- Moore, Thomas H. Henry Miller on writing. New York: New Directions, 1964.
- Morgan, Fred. Here and now II: An approach to writing through perception. New York: Harcourt, Brace, Jovanovich, Inc., 1972.
- Moustakas, Clark. Creativity and conformity. New York: Van Nostrand, 1967.
- Nin, Anais. The novel of the future. New York: Collier Books, 1972.
- Pearce, Joseph Chilton. Crack in the cosmic egg. New York: Pocket Books.
- Pearson, L. (Ed.). The use of written communication in psychotherapy. C. C. Thomas, 1965.
- Perls, Frederick. Gestalt therapy verbatim. Big Sur, Calif.: Real People Press, 1969.
- Polster, Erving & Miriam. Gestalt therapy integrated. New York: Brunner/Mazel, 1973.
- Porterfield, A. E. Mirror for Adjustment: Therapy in home, school, and society through seeing yourself and others in books. Fort Worth: Texas Christian University Press, 1967.



- Prescott, Frederick Clark. The poetic mind. Ithaca, N. Y.: Cornell University Press, 1959.
- Prescott, Frederick Clarke. Poetry and myth. New York: Macmillan, 1927.
- Progoff, Ira. The symbolic and the real: A new psychological approach to the fuller experience of personal existence. New York: Julian Press, 1963.
- Read, Herbert. Poetic consciousness and creative experience. Zurich: Eranos Yearbook, 1956.
- Reik, Theodor. Fragments of a great confession. New York: Ferrar, Strauss and Co., 1949.
- Richards, M. C. Centering: in pottery, poetry and the person. Middletown, Conn.: Wesleyan University Press, 1964.
- Rilke, Rainer Maria. Letters to a young poet. New York: Norton, 1934.
- Rogers, Carl. Creativity and its cultivation. New York: Harper, 1959.
- Rogers, Carl. On becoming a person. Boston: Houghton Mifflin, 1961.
- Sansom, Clive. The world of poetry. London: Phoenix House, 1960.
- Schauffler, R. H. The poetry cure. New York: Dodd, Mead and Co., 1932.
- Schloss, Gilbert. Tongues of wood: An introduction to poetry therapy. New York: Grossett & Dunlap, 1974.
- Schutz, William C. Elements of encounter. Big Sur, Calif.: Joy Press, 1973.
- Smith, Charles Kay. Styles and structures: Alternative approaches to college writing. New York: W. W. Norton, 1974.
- Singer, Jerome L. Daydreaming: An introduction to the experimental study of inner experience. New York: Random House, 1966.
- Szasz. The myth of mental illness. New York: Dell, 1961.
- Taft, Jessie. The dynamics of therapy in a controlled relationship. Gloucester, Mass.: Peter Smith, 1973.

- Tory, Alan P. Wonder: Learning the "Ah!" of things. New York: Ballantine, Books, 1973.
- Trask, William. The unwritten song. New York: Macmillan, 1966.
- Truax, Carol and Carkhuff, R. Toward effective counseling and psychotherapy. Chicago: Aldine, 1967.
- Wilson, Colin. "The poet as occultist," The occult. New York: Random House, 1971.
- Wilson, Colin. Poetry and mysticism. San Francisco: City Lights Books, 1969.
- Whitaker, Dorothy Stock and Lieberman, Morton. Psychotherapy through the group process. Chicago: Aldine Publishing Co., 1964.
- Whitaker, Paul and Ruth. More than medicine. New York: Carlton Press, 1969.
- Yalom, Irvin D. The theory and practice of group psychotherapy. New York: Basic Books, 1972.
- Zaccaria, Joseph E. and Moses, Harold A. Facilitating human development through reading: The use of bibliotherapy in teaching and counseling. Champaign, Ill.: Stipes, 1968.



