

American Handbook of Psychiatry

POETRY THERAPY

Owen E. Heninger

POETRY THERAPY

Owen E. Heninger

e-Book 2016 International Psychotherapy Institute

From *American Handbook of Psychiatry: Volume 7* edited by Silvano Arieti

Copyright © 1981 by Basic Books

All Rights Reserved

Created in the United States of America

Table of Contents

POETRY THERAPY

Introduction

Place in Therapies

Theory

Techniques

Bibliography

POETRY THERAPY

Owen E. Heninger

Poetry may be used as a device to involve patients in the therapeutic process. It is the speech of interiority, the “language of being,” both intense and compact, and gets at the true utterance in the therapeutic endeavor. Some therapists maintain that all poetry is therapy, that it is one of the techniques man has developed to cope with inner turmoil. Poetry may serve as therapy either by the resolution of mental anguish or by providing a way for man to face his conflicts more honestly. It is a means to engage in meaningful personal communication, it is a link to a greater awareness of unspoken thoughts and a way of sharing deep feelings.

Introduction

Throughout history poetry has been a means to express the emotional forces that act upon men and women. The poet, bard, storyteller, like a shaman or doctor, has always been accorded a respect that transcends political disputes and national boundaries. Poetry was the original language of religion, and verse was a means by which ancient races developed a national character. It was left to Aristotle (c. 330 B.C.) to formally delineate the influence that literature had on the psyche, specifically the purifying or purgative effect of tragedy. This process he called *katharsis* (catharsis). Not

only did poetry afford its readers (viewers) pleasure in the aesthetic realm, it also acted upon them in a restorative manner. One of the better documented instances of poetry's therapeutic properties comes from the experience of John Stuart Mill, the English philosopher and economist. Mill noted in his autobiography that reading Wordsworth's poetry had been instrumental in his recovery from a nervous breakdown.

While poetry in the form of narrative, plays, and poems has doubtlessly contributed to the well-being of people for almost three thousand years, it was not until the twentieth century that men of science began to see in it a nascent discipline suited for therapeutic purposes. In 1908, Freud expounded upon the possible relation between poetry and psychology in *The Relation of the Poet to Day-Dreaming*. In 1922, Frederick Prescott published *The Poetic Mind*, in which he makes connections between Freud's theories and those of John Keble—an Anglican clergyman who regarded poetry as a veiled or indirect representation of the poet's true feelings, which may help stave off mental disease. Also, at around this time, in New York, Eli Greifer began to organize poetry groups at a hospital and clinic; in fact, he is credited with giving "poetry therapy" its name.

The past fifty years have continued to witness an influx of therapists who have come to realize that poetry therapy is indeed a serious and viable method by which to effect mental health. And as the beneficial aspects of

poetry therapy have come more and more to the attention of therapists and patients alike, a concomitant increase in the literature, in academic courses, in panels, and in workshops has occurred.

Place in Therapies

As an Adjunct to Psychotherapy

Poetry therapy is not a “school” of therapy, but rather works with other therapies to help effect additional insight and emotional release. Using poetry in therapy can have a catalytic function in moving psychotherapy along, stimulating thinking, and bringing out emotionally significant relationships. Poetry can work synergistically to facilitate the psychotherapeutic process.

As an Expressive Variable

Poetry therapy can help patients reveal more about themselves. Sometimes revelations may be triggered by a poem in which the poet has expressed what the patient has not been able to. Patients may read or write poems that articulate their own feelings. They can be guided by the therapist or a trained poetry therapy facilitator. (That is, paraprofessionals who have been specially trained in the technique of using poetry in group work).

To Achieve Insight

The use of poetry in therapy helps both the therapist and the patient to get a better look at the psychological makeup of the patient. Lerner notes that poetry may serve to explore more deeply the inner workings of the mind. By implementing observation and presenting a sharper, clearer exposure, poetry therapy contributes to insightful psychotherapy.

Exhortative Function

Poetry therapy can function in an authoritative or directive manner, exhorting the suppression of fears or the acceptance of certain values. Poetry may be used in an attempt to regulate, inspire, or support the patient. The exhortative approach has close ties with some forms of bibliotherapy where the therapist may assign the reading of articles, pamphlets, or books in order to motivate the patient. Poems that have clear exhortative messages have been collected and published by Blanton. Leedy notes that poems that are in harmony with the patient's particular mood or psychic condition have a supportive role in the patient's therapy.

As Creative Therapy

A patient reading or writing poetry is being creative as well as taking part in an organizing process. In poetry therapy this creativity is encouraged and supported. Heninger has pointed out that this act of organizing often leads to unique and original poems that bring into existence a new order.

Settings

Poetry therapy has been utilized in a wide variety of settings; for example in a correctional setting, in the private practice of psychotherapy, in mental hospitals; with geriatric populations, with adolescents, and with drug abusers. It has been used in group therapy and in mental health centers. Molly Harrower has given an elaborate account of her personal growth experience and how she worked out her problems by writing poetry.

Theory

Poetry therapy works through the multidimensional experience of any or all of the psychological avenues of ventilation and catharsis, exploration, support, active mastery and understanding. It produces results because, “in poetry we experience the most effective, the most concentrated and emotionally textured communication man has, as yet, devised.” It should also be noted that there is a good deal of safety for the patient who uses poetry in psychotherapy.

Ventilation and Catharsis

Poetry therapy offers an opportunity for the patient to openly express his innermost thoughts (ventilation). Often this open expression of ideas is accompanied by an appropriate emotional reaction; that is, the discharge of

strong feelings and unconscious tension, followed by a significant sense of relief (catharsis). Using poetry in therapy allows patients to pour out their emotional venom and discharge strong sentiments, thus freeing themselves by cleansing their emotional systems. This is akin to lifting a cover from a deep well of emotions, which can then be discussed, dealt with, and integrated. Poetry, used in the therapeutic encounter, may pry loose elements of thought that would not otherwise surface, and this process itself may lead to a reduction in symptoms. Prescott has observed that the ordered flow of poetry is like the eruption that prevents an earthquake. He likens the use of poetry to putting a veil over one's emotions in order to wear them in public. According to him, poetry is a spontaneous overflow of powerful feelings and a way to purge long-standing anger, which relieves the overburdened mind.

Patients are able to find poems that express unacceptable thoughts in a manner that gains both acceptance and relief. Reilly recognized that poems can be containers for the unacceptable. Rothenberg noted that the feverish activity of writing a poem indicates an anxiety that requires discharge. He observed that poets may put their personal conflicts into poetry in a way that unearths preconscious and unconscious material, thereby relieving tension. Through the use of poetry, rage can be channeled, anger and gloom dispelled, and melancholy purged. Chaliff related how Emily Dickinson wrote poetry as a kind of catharsis. She also notes how Dickinson's poetry can be employed therapeutically to help others and quotes the poet herself on the purgative

effects of poetry: “We tell a hurt to cool it.”

Poetry can be used for confessional purposes. Patients may find themselves capable of revealing their most private selves unashamedly, giving voice to the deepest sense of their being. A significant example occurs where poetry is used to express individual responses to illness, or where it expresses the essence of an illness. Patients can sometimes express poetically what they are afraid of or unable to articulate. Here the ego is searching for a safe outlet to reveal forbidden impulses. Poetry offers a safe method of discharge that is free from guilt and humiliation. As Robert Jones put it: “The artful writer can put us into a position in which we can enjoy our own daydreams without reproach or shame.”

Exploration

The process of psychotherapeutic exploration is aided by using poetry. Prescott noted, “Poets have been disposed to introspection and self-analysis; and where they have been so disposed they have far surpassed ordinary men in subtlety of discrimination and acuteness and depth of insight ... they have exceptional powers of observation.” The legacy of poetry is further recognized by Wolberg, who observed that, “poets have revealed themselves and have analyzed man’s condition long before human behavior was conceptualized as a science.” Robinson explained that poets skillfully use poetry “to express

rather than to conceal. Poets use fantasy to elicit meaning in a fresh context; they distort in order to clarify; they symbolize in an effort to illuminate.” Poetry therapy aims at using the patient’s powers of observation, introspection and self-analysis.

Poetry may function as a tool to effect self-discovery. Reik suggested that the poet’s (patient’s) creation gives embodiment to “the life of the mind.” Meerloo saw poetry as assisting in “self-recollection.” Poetry that is read, written, or reacted to by patients gives an indication of where they are in their individual growth process. Chaliff related how poetry can prod slumbering personal issues into full wakefulness and allow one to view the underlying psychic structure. By circumventing repressive barriers, poetry creates a means by which to explore the patients unconscious.

Poetry can be used to penetrate and illuminate the depths of psychic life. It offers a new way of looking at one’s self. It can provide a sharp picture of one’s self (insight).f Poetry can reveal a “self-reality” or get at what Meerloo called, “the essential ‘me’ ”. Andrews saw poetry as a tool for unearthing hidden stores from within the self. Edgar viewed poetry as a “reservoir for the expression of human feelings.” When poetry is used in psychotherapy, it opens up “new vistas,” increasing self-awareness, self-confrontation, and self-exposure. The use of poetry can make one aware of patterns in one’s own psychic functioning. It can get psychological forces out in the light to be

observed.

Because poetry itself seeks for the most honest and truthful way to express human thought and feeling, by using words as “truth seekers,” it follows that an honest and personal truth comes with using poetry in psychotherapy.” The poet/patient shows his conflicts honestly and what he writes is an honest reflection of how he lives.

Support

Poetry can be used in psychotherapy to support patients. For example, Blanton has a collection of poems that can be given to patients when courage is needed. Koch uses poetry to instill confidence and promote communication and concentration. By using poetry in therapy it is possible to console patients. Poetry can help patients see that their problems are similar to the problems of others (universalization). They can relate to others and share their thoughts and feelings. This sharing may stimulate improved interpersonal relations, even if it's despair that is shared. Through poetry patients discover psychological kinships and overcome interpersonal barriers.

There are various ways by which poetry can rescue patients. They may borrow or lean on the ego strength of the poet and his manner of facing and/or handling conflicts. Poetry can be used to give them guidelines

concerning special attitudes or modes of behavior. Well-known poetry may be used to give patients a psychological mooring. Murphy points out that patients even use poetry as a means of requesting help. It can help patients validate their feelings and reduce their doubts and uncertainty. Poetry is often used for its self-sustaining power. Greenberg notes that it can even be used as a sermon to the self. When patients put their conflicts into poetry, they are usually praised. They feel they share respect with poets and develop a sense of pride and self-esteem. They may even attract praise from their community.

As Active Mastery

“It is primarily through language, an extremely important tool for active mastery of the environment, that the poets (patients) achieve identification.” The language of poetry helps one to create order where chaos existed. Poetry provides order and authority, channeling crude instinct. It allows one to organize unconscious forces and refine what might be called “raw emotional spillage.” Poetry offers a means of transferring the emotionally unbearable into something that can be faced. The poet/patient uses words to disguise, muffle, and transform the deep-seated thoughts and feelings that imperiously demand issue. He puts these thoughts and feelings into words that can be managed, or actively mastered. Poetic forms can be used to reorganize mood and perception. Poetry can be ego building and can allow the writer/reader to rearrange the world to be more self-pleasing. Poets/ patients may use poetry

to escape the “miseries of the mind,” to sever themselves from griefs and woes, and to channel their rage.

Poetry can help in handling feelings. It is an artful device providing the writer/reader with a process to turn the frightening and unacceptable into something acceptable. Through a kind of psychological metamorphosis it allows one to face formidable or forbidden subjects and reduce them to a manageable form. The making of poetry can blunt the original raw emotion and objectionable ideational content and make it tolerable and even pleasurable. Taking something that is ugly and turning it into something esthetic is one way poetry mollifies discomfort. Putting unappealing thoughts and feelings into appealing poetry has been likened to the process whereby an oyster takes an irritating grain and creates a beautiful pearl around it. The writer/ reader of poetry may use it to find his own shape and rationale for the “monsters of the mind” and may even use poetry to harness them. As the patient masters his problems he may become a poet and his poems can then be seen as evidence of the therapeutic results.

Poetry can both exorcise and neutralize trauma and suffering. Poetry has been seen as a form of art that is molded by the poet’s/ patient’s inner struggle against defect. Creating poetry out of one’s vulnerability may even become a special strength. Emily Dickinson, it is said, was able to come to terms with her problems by facing them squarely in her poetry. “Art [poetry]

gives a way of reshaping the pain of experience into wholeness, health and harmony." The poet/patient makes his poetry out of the deepest sense of his powerlessness. There is relief when one can safely review a disaster; reading or writing poetry allows one to exorcise disaster by reviewing it. The poets/patients may have their poetry issue from their own suffering; they can create, out of transient pain, a universal statement of the human condition.

The use of poetry in psychotherapy can aid in self-healing. Otherwise passive prisoners have been seen to write poetry to actively help themselves. For example, Merlo has described how concentration camp inmates utilized poetry to relieve their situation. Poems may accomplish the resolution of a conflict, proclaiming the poet /patient as self-therapist. Aspects of the self-provide substance for what is written (or read) into poetry. Poems may be connected with persons as transitional objects, and people can use poems to assist in the process of merging and separation. Poetry may be utilized to circumvent the barriers of repression, permitting the observing ego to reflect on the material exposed. Revealing important psychological forces (repressed and forgotten material) and experiencing one's feelings and thoughts under the domain of the self-regulatory capacities make assimilation of these materials possible. Poetry offers a preliminary exercise for the active functions of life and can be used to study a part before playing it; that is, reading or writing poetry provides a means to rehearse for life's activities, such as preparing for an emotional encounter with another person. Through

the reading or writing of poetry a more beautiful or healthier balance can be obtained. Poetry works toward harmony and is geared to bring about a more integrated personality.

The reading and writing of poetry represents a maturity of effort and a growth-producing experience. It can strengthen a personal sense of identity. Poetry can be used to allow the self to bloom and assists the patient's inner-self to stretch, breathe, look about, and grow. The inception of a poem is the beginning of a movement toward psychological freedom. Poetry can intrigue, reawaken, and rejuvenate. It can capture a moment of intense emotion and, like amber catching a fossil, keep it protected against the ravages of time. One might even call poetry, "ambered experience." Thus, the capturing, preserving, or "ambering" of deeply experienced thoughts and emotions in poetry allows them, over time, to be more readily examined, handled, and actively mastered.

Understanding

One of the hallmarks of literature (poetry) is its ability to enrich, broaden, and deepen the reader's experience and understanding. It also establishes a bridge between the self and the world. The writer's attempts to understand the world become vehicles by which the reader may also find self-understanding and self-help. Poems are successful when they can create an empathetic state in the reader, allowing him to participate in the emotion that

is so vividly depicted. Through poetry we can get a good deal of understanding about a poet's (patient's) life. Poetry is a means of understanding without pressure. It can help in understanding the poet's development, and may lead to self-recognition.

Safety

Poetry may indirectly express thoughts, attitudes, and feelings that cannot be expressed in a direct manner because of the fear of retaliation. With poetry, there can be a catharsis without total psychological nudity. The poet/patient can use poetry to both hide and reveal his innermost thoughts and feelings. Poetry gratifies simultaneously both the impulse for expression and for control (concealment). One may face very disquieting conflicts in the disguise of poetry. The writer/patient may encode his message in a poem, or, he may hide his identity behind a pseudonym and confess safely. He may even attribute his writing to inspiration from the muses. Chaliff notes how Emily Dickinson used the protective disguise of her poetry to meet the dread of revealing herself fully. "Tell all the Truth but tell it slant/Success in Circuit lies."

Patients/writers talk about themselves indirectly as a safe way of sharing feelings that have been smoldering within. Freud noted that the direct expression of repressed wishes repels and leaves one cold. However, if these

wishes are given expression through literary skill, which softens their egotistical character by disguising and using the esthetic pleasure as a cover, these same wishes are then presented without reproach or shame. Poetry provides an acceptable camouflage for the ventilation of unconscious material. It can be used to express emotion in a socially acceptable form. By encapsulating a hurt in verse, poetry protects one from the violence of passion. The veil of poetry allows many otherwise unacceptable ideas and feelings to be aired in safety.

Techniques

“Poetry helps the individual see where he is and where he is going. The therapist’s problem is to apply poetic principles in the most productive manner possible.” The therapist is primarily concerned with poetry as a vehicle for the patient to explore and express himself. It is important in poetry therapy that the poetry is not judged as a work of art. It is no more appropriate to find fault with a patient’s poetry than to criticize his associations in psychotherapy or his drawing in art therapy. The poems used in poetry therapy are judged by how well they share feelings rather than by their literary merit. An established poet’s verse may be introduced in poetry therapy to encourage patients to disclose more about themselves. Generally, it is best to read poems aloud and maybe even to repeat the reading. At times, patients are helped even further by memorizing poems. It is wise to avoid

presenting poems too rapidly since it may take some time for a poem to penetrate into the mind. Sometimes a poem's influence will surface days, weeks, or even decades later. It is also wise to avoid introducing poems of such complexity that it takes special academic study to understand them.

Individual Therapy

Poetry can be used in an adjunctive way in individual psychotherapy. Perhaps the best way to begin is to ask patients about their past interests in reading or writing poetry. If they bring poetry with them, it is analyzed in the process of psychotherapy.' At a time of strong emotion it can be helpful to encourage patients to write a poem so that the images of the moment are not lost. Another technique is to select emotionally laden words or statements from the patient's speech and suggest that the patient write these words in poetic form. A therapist may introduce and/or prescribe poems for patients to read. Patients are then encouraged to relate the ideas and emotions that come to them on reading or hearing a poem. At times, poems introduced by the therapist seem to sustain patients even in the therapist's absence.

Group Therapy

Poetry therapy has a dynamic influence on the process of group therapy (group workshop). Using poetry shortens the warm-up period. Patients who share poetry in a group experience empathy and catharsis within a

framework of human kinship. Reading poetry brings the members of the group closer together by starting an immediate group relationship and accentuating the ideas and feelings people have in common. Poetry encourages feelings of equality in the group, although the sharing of personal information between group members is optional.

It is often helpful to have copies of poems available for all group members; with ongoing groups filing folders are useful. Group meetings are often started with a well-known poem, although group members are encouraged to write and read their own poetry or lesser known poetry that speaks for them. It is beneficial to investigate what the writer was trying to say, how other members react to the poem, and to expand on the feelings expressed. Although group participants are encouraged to talk about the feelings the poems evoke or express, they may steer away from personal problems. A patient should be engaged at a depth that the therapist deems safe. It may be useful to examine the condition a patient was in when he wrote or read a particular poem. With the encouragement of the expression of feelings, group meetings become free flowing.

The therapist should provide a stable and healthy image that can control the group rather than get too involved with group members on a personal level. The therapist should be spontaneous and empathetic but should avoid personal confessions and displays of strong emotion directed toward patients.

The therapist should not insist that group members call him by his first name; a co-therapist or facilitator, however, may be more egalitarian. The therapist must accept pauses, give time for poems to be understood, and keep track of and examine the responses the poems may elicit.

Indications

Who are the patients who should be considered for possible benefit from poetry therapy as an adjunct to psychotherapy? Good candidates are patients who cannot express themselves well through the usual channels but who can write out what they cannot say. Those who are lonely, withdrawn, alienated or stiff, rigid and inflexible are usually good responders to poetry therapy. One can usually use poetry therapy to good advantage with patients who already write verse or speak in poetic phrases. At times, poetry therapy can be used to break an impasse in psychotherapy. Many people without serious psychopathology may be helped toward more individual growth with poetry. Poetry therapy is also indicated in patients who need additional help in gaining insight.

Contraindications

It can be dangerous to send poems to patients whom the therapist does not see regularly. It is also unwise to use poetry with those who cannot

tolerate getting deeper into their own thoughts and feelings. Poetry may hit such a tender spot that it sets off a near uncontrollable emotional storm. When there are pressing problems such as a serious brain syndrome, sociopathy, acute psychosis, or addiction, poetry therapy is inadvisable. It is wise to avoid using poetry with patients who markedly misunderstand it or who take poetic images too literally. Poetry therapy is not indicated in patients who see it as a panacea or get fanatic about its use. At times, certain initiates to poetry therapy become so excited and euphoric over their personal contact and response that they mistake these emotional responses for a cure. Lauer notes that poetry therapy is not for those who think “anyone can do it.” Much the same contraindication applies to those who have the “Sorcerer’s Apprentice”¹ syndrome. Some therapists learn the magic words (of poetry) that turn people on, but they do not know how to handle them afterwards.

Training

Special training is required for those who would be safe and efficient using poetry in psychotherapy. Training in both poetry and psychotherapy is important. Not all therapists necessarily know how to use poetry in the therapeutic setting and those familiar with poetry may not know how to do psychotherapy. Training in psychotherapy would include courses in psychology and/or psychiatry. The training in poetry should include extensive

courses in literature with emphasis on poetry. The academic courses should include semantics, language as behavior, and literary criticism. A course in oral interpretation would be a definite help in the field. A therapist using poetry in therapy should be acquainted with a large variety of poems and learn which poems are most effective in therapy. There should be lengthy supervised experience in the clinical practice of poetry therapy. Emphasis should be given in relating poetry to the behavioral sciences. The goal of training in poetry therapy is to prepare one for clinical practice, teaching, research, writing, and advancing the field.

Research

There are many paths for the use of poetry therapy that have yet to be explored and documented. For example, how are poetry and psychotherapy combined in other countries and cultures? Is there a significant difference in therapeutic effect when poetry of high artistic merit is used as compared with verse of lesser merit? Should the poetry used in poetry therapy change along with a patient's growth in therapy? How can familiarity with poetry therapy become a part of psychiatric or psychological training? Does poetry therapy have a place in peer counseling, marriage counseling, or counseling by the clergy? Where else can poetry therapy be used in psychotherapy? How can poetry therapy be combined with the other art therapies? What is the best way to teach poetry therapy? Is there a prophylactic power against mental

illness available in poetry therapy? Whatever the answers to these questions, poetry therapy is finding ever greater acceptance and usefulness in the practice of psychotherapy.

Bibliography

- Abrams, A. S. "Poetry Therapy in the Psychiatric Hospital," in Lerner, A., ed., *Poetry in the Therapeutic Experience*. New York: Pergamon Press, 1978, pp. 63-71.
- Andrews, M. "Poetry Programs in Mental Hospitals," *Perspectives in Psychiatric Care*, 8:1 (1975): 17-18.
- Baldwin, N. "The Therapeutic Implications of Poetry Writing: A Methodology," *Journal of Psychedelic Drugs*, 8:4 (1976): 307-312.
- Barkley, B. "Poetry in a Cage: Therapy in a Correctional Setting," in Leedy, J.J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. 1-16.
- Barron, J. "Poetry and Therapeutic Communication: Nature and Meaning of Poetry," *Psychotherapy: Theory Research and Practice*, 11:1 (1974): 87-92.
- Berger, M. M. "Poetry as Therapy—and Therapy as Poetry," in Leedy, J. J. ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 75-87.
- Blanton, S. *The Healing Power of Poetry*. New York: Thomas Y. Crowell, 1960.
- Blinderman, A. "Shamans, Witch Doctors, Medicine Men and Poetry," in Leedy, J. J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. 127-141.
- Buck, L. A., and Kramer, A. "Poetry as a Means of Group Facilitation," *Journal of Humanistic Psychology*, 14:1 (1974): 57-71.
- "Creative Potential in Schizophrenia," *Psychiatry*, 4 (1977): 146-162.

- Burke, K. "Thoughts on the Poets' Corner," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 104-110.
- Chaliff, C. "Emily Dickenson and Poetry Therapy: The Art of Peace," in Leedy, J. J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. 24-49.
- Chessick, R. D. "What Can Modern Psychotherapists Learn From Modern Poets?" *Current Concepts in Psychiatry*, 4:6 (1978): 2-8.
- Crootof, C. "Poetry Therapy for Psychoneurotics in a Mental Health Center," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 38-51.
- Davis, L. "The Paraprofessional and Poetry Therapy," in Lerner, A., ed., *Poetry in the Therapeutic Experience*. New York: Pergamon Press, 1978, pp. 108-113.
- Dickey, J. "Diabetes," in *The Eye-Beaters, Blood, Victory, Madness, Buckhead and Mercy*. Garden City, N.Y.: Doubleday, 1970, pp. 7-9.
- Edel, L. "The Madness of Art," *American Journal of Psychiatry*, 132:10 (1975): 1005-1012.
- Edgar, F., and Hazley, R. "A Curriculum Proposal for Training Poetry Therapists," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 260-268.
- , and Levit, H. I. "Poetry Therapy with Hospitalized Schizophrenics," in Leedy, J.J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 29-37.
- Erickson, C. R., and Le Juene, R. "Poetry as a Subtle Therapy," *Hospital and Community Psychiatry*, Feb. 1972: 40-41.
- Forrest, D. V. "The Patient's Sense of the Poem: Affinities and Ambiguities," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 231-259.
- Freud, S. "The Relation of the Poet to Day-Dreaming," in Jones, E., ed., *Sigmund Freud Collected Papers*. London: Hogarth Press, 1949, pp. 173-183.
- Greenberg, S. A. "Poetry Therapy in a Self-Help Group AFTLI and/or Poetry Therapy," in Leedy,

- J.J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 222.
- Greenwald, H. "Poetry as Communication in Psychotherapy," in Leedy, J.J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 199. Pp. 142-154.
- Hamilton, J. W. "Gender Rejection as a Reaction to Early Sexual Trauma and Its Partial Expression in Verse," *British Journal of Medical Psychology*, 41 (1968): 405-410.
- Hammer, E. F. "Interpretations Couched in the Poetic Style," *International Journal of Psychoanalytic Psychotherapy*, 7 (1978-79): 240-253.
- Harrower, M. "Poems Emerging From the Therapeutic Experience," *Journal of Nervous and Mental Disease*, 149:2 (1969): 33.
- . *The Therapy of Poetry*. Springfield, Ill: Charles C Thomas, 1972.
- Hayakawa, S. I. "Postscript: Meta-messages and Self-Discovery," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 269-272.
- Heninger, O. E. "Poetry Therapy: Exploration of a Creative Righting Maneuver," *Art Psychotherapy: an International Journal*, 4:1 (1977): 39-40.
- . "Iritis II," *Newsletter—American Physicians Poetry Association*, 1:5 (1978): 15.
- . "Poetry Therapy in Private Practice: An Odyssey into the Healing Power of Poetry," in Lerner, A., ed., *Poetry in the Therapeutic Experience*. New York: Pergamon Press, 1978, pp. 56-62.
- Heninger, O. E. Personal communication, Nov. 15, 1978.
- Jones, R. E. "Treatment of a Psychotic Patient by Poetry Therapy with a Historical Note," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 19-28.
- . "The Double Door Poetry Therapy for Adolescents," in Leedy, J. J. ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 223-230.

- Koch, K. "Teaching Poetry Writing to the Old and the Ill," *Milbank Memorial Fund Quarterly/Health and Society*, 56:1 (1978): 113-126.
- Lauer, R. "Abuses of Poetry Therapy," in Lerner, A., ed., *Poetry in the Therapeutic Experience*. New York: Pergamon Press, 1978, pp. 72-79.
- Lawler, J. G. "Poetry Therapy?" *Psychiatry*, 35 (97) 227-237.
- Leedy, J. J. ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969.
- . "Introduction to Poetry Therapy," in *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 11-13.
- . "Principles of Poetry Therapy," in *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 67-74.
- . "In Memoriam Eli Greifer 1902-1966," in *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 273-275.
- , ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973.
- , and Rapp, E. "Poetry Therapy and Some Links to Art Therapy," *Art Psychotherapy: an International Journal* 1 (1973): 145-151.
- Lerner, A. "Poetry Therapy," *American Journal of Nursing*, 73: 8 (1973): 1336-1338.
- . "A Look at Poetry Therapy," *Art Psychotherapy: an International Journal*, 3: 1 (1976): i-ii.
- , ed. *Poetry in the Therapeutic Experience*. New York: Pergamon Press, 1978.
- . Personal communication.
- Livingston, M. C. personal communication.
- Lord, M. M., and Stone, C. "Fathers and Daughters—A Study of Three Poems," *Contemporary Psychoanalysis*, 9 (1973): 526-539.

- Meerlo, J. A. "The Universal Language of Rhythm," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 52-66.
- MORRISON, M. R. "Poetry Therapy with Disturbed Adolescents—Bright Arrows on a Dark River," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 88-103.
- . "A Defense of Poetry Therapy," in Leedy, J. J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. 77-90.
- Murphy, J. M. "Forward" in Leedy, J. J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. ix-xvi.
- . "The Therapeutic Use of Poetry," in Masserman, J. H., ed., *Current Psychiatric Therapies*, vol. 18. New York: Grune & Stratton, 1979, pp. 65-71.
- Nemiah, J. C. "The Art of Deep Thinking: Reflections on Poetry and Psychotherapy," *Seminars in Psychiatry*, 5:3 (1973): 301-311.
- Parker, R. S. "Poetry as a Therapeutic Art in the Resolution of Resistance in Psychotherapy," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 155-170.
- Pattison, E. M., "The Psychodynamics of Poetry by Patients," in Leedy, J. J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. 197-214.
- Pietropinto, A. "Exploring the Unconscious Through Nonsense Poetry," in Leedy, J. J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. 50-76.
- . "Monsters of the Mind: Nonsense Poetry and Art Psychotherapy," *Art Psychotherapy an International Journal*, 2 (1975): 45-54.
- . "Poetry Therapy in Groups," in Masserman, J. H., ed., *Current Psychiatric Therapies*, vol. 15. New York: Grune & Stratton, 1975, pp. 221-232.
- "Poetry Therapy," in *The International College Catalog*, 1979-1980. Los Angeles, Cal.: The International College Catalog, p. 76.

- Prescott, F. C. *The Poetic Mind*. Ithaca, N. Y.: Cornell University Press, 1959.
- Reik, T. "Forward" in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969. pp. 5-7.
- Reilly, E. "Sylvia Plath: Talented Poet, Tortured Woman," *Perspectives in Psychiatric Care*, 16:3 (1978): 129-136.
- Robinson, S. S., and Mowbray, J. K. "Why Poetry?," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 188-199.
- Rothenberg, A. "Poetic Process and Psychotherapy," *Psychiatry*, 35 (1972): 238-254.
- . "Poetry and Psychotherapy: Kinships and Contrasts," in Leedy, J. J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. 91-126.
- , and Hausman, C. eds. *The Creativity Question*. Durham, N. C.: Duke University Press, 1976.
- , and Greenberg, B. *The Index of Scientific Writings on Creativity*. Hamden, Conn: Shoe String Press, 1976.
- Schechter, R. L. "Poetry: A Therapeutic Tool in the Treatment of Drug Abuse," in Leedy, J. J., ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. 17-23.
- Schloss, G. A. *Psychopoetry*. New York: Grosset & Dunlap, 1976.
- , and Grundy, D. E. "Action Techniques in Psychopoetry," in Lerner, A., ed., *Poetry in the Therapeutic Experience*. New York: Pergamon Press, 1978, pp. 81-96.
- Silverman, H. L. "Creativeness and Creativity in Poetry as a Therapeutic Process," *Art Psychotherapy: An International Journal*, 4:1 (1977): 19-28.
- Stone, A. A. "Preface," in Leedy, J. J. ed., *Poetry the Healer*. Philadelphia: Lippincott, 1973, pp. xvii-xviii.
- Stone, C. "Three Mother-Daughter Poems: The Struggle for Separation," *Contemporary Psychoanalysis*, 2:2 (1975): 227-239.

Waterman, A. S., Kohutis, E., and Pulone, J. "The Role of Expressive Writing in Ego Identity Formation," *Developmental Psychology*, 13:3 (1977): 286-287.

Wolberg, L. R. "Preface: the Vacuum," in Leedy, J. J., ed., *Poetry Therapy*. Philadelphia: Lippincott, 1969, pp. 9-10.

Wood, J. C. "An Experience in Poetry Therapy," *JPN and Mental Health Services* (Jan-Feb 1975): 27-31.

Notes

1This refers to Goethe's famous ballad of a sorcerer's apprentice who made more magic than he could control and was unable to stop an enchanted broomstick from carrying water for him.