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Can Creative Writing Help in Early Healing of Physical Injuries and Trauma

Shivkumar Revashetty

Ph.D. Research Scholar,

Dr. Babasaheb Ambedkar Marathwada University, Aurangabad, Maharashtra, India

Ravi Bhushan

Ph.D. Research Scholar,

Dr. Babasaheb Ambedkar Marathwada University, Aurangabad, Maharashtra, India

Dr. Pravin P. Shiledar

HOD, Department of Physical Education, JBSPM's Mahila College, Georai, Beed, Maharashtra, India

Abstract:

The present article seeks to examine how acts of creative expressionistic writing can serve as a kind of therapy, miraculously healing physical wounds faster than many other alternative methods can. Taking the aforementioned as a basic premise, the article will take into account empirical evidence collected from modern research studies conducted by various scientists on the mind-body connection suggesting that the venting of dark emotions regarding a physical trauma, stressful or emotional events can actually ensure speedy recovery of not just the psyche and the mind, but the injured hominoid body as well. Specific reference will be made to the studies conducted on human subjects suffering from various traumatic experiences, and the controlled experiments conducted on them by having them undergo writing sessions for about fifteen to twenty minutes over a fixed duration of a particular number of days, wherein they shared even the most distressing and tense experiences involving their physical injuries. The same was reported to have altered their skin tissue structures immensely, and provided evidence of much better physical and psychological outcomes as compared to the subjects that did not undergo the same process, or wrote on inconsequential and neutral topics. With such investigations as background, the writer will present an overview of the creative and expressionistic writing paradigm, point out the populations with physical injuries for whom the model's beneficial impact has been scientifically observed, and deliberation probable and potential procedures triggering the perceived fitness gains. Furthermore, the article will suggest the way creative writing can be utilized as a healing instrument for both physically damaged patients and psychiatrically distressed survivors as well.

1. Introduction

Over the past thirty years, an emergent body of writing has established the extent of favorable impact of engaging in creative compositions on 'traumatic or stressful events has on physical and emotional health' in both non-clinical and clinical populations (Baikie & Wilhelm, 2005, p. 338). Pennebaker & Beall (1986), Baikie and Wilhelm revealed that this first study on creative writing expressionism subjected various college students for four uninterrupted, successive days to delve into 'the most traumatic or upsetting experiences of their entire lives,' (2005, p. 338), while control groups were left to confer in consequential write-ups on topics such as their abode or their footwear. The study subjects who participated in creative and expressionistic writings, after pouring out their heartfelt contemplations and feelings, and pointing out their injuries for a further period of four months, supplied researchers with improvements in their physical health, less psychological and physical burden owing to their illness, and a reduced amount of recurrent visits to the clinics and health care centers; whereas their self-reported subjective assessments further corroborated with the objective reports of the investigation as well. In light of the study, the researchers clearly concluded that 'writing about earlier traumatic experience was associated with both short-term increases in physiological arousal and long-term decreases in health problems' (Pennebaker & Beall, 1986: p. 280; cited in Baikie & Wilhelm, 2005, p. 338).

In a similar research study conducted and led by Elizabeth Broadbent, Szalavitz (2013) revealed about the experiment conducted on forty-nine participants, aged 64 to 97, on the same expressionistic premise, proving yet once again that the appeasing and soothing effect of creative writing 'can cut physical wound healing time nearly in half' (2013, p. 1). Half of the subjects, who despite being rather healthy senior citizens were still recovering from some past physical injury, just like the rest of the population sample, were assigned to spend three consecutive days (more specifically, twenty minutes each day) by writing about the events leading to the physical trauma they had experienced. In addition, they were inspired and motivated to divulge all information openly, disclosing exactly what they had thought and how they felt at the time, not holding in even that information that they had not shared or expressed in front of any other third person or party before. The rest of the population sample spent the same amount of days and time writing about superficial events or happenings, without stating their feelings, sentiments, thoughts, ideas or beliefs. Two days following the commencement of the writing sessions, skin samples were collected from the participants showing signs of wounds. Seven days later,

Broadbent and her team started taking pictures of the wounds intermittently, after every few days till they healed completely. Almost two weeks following the writing experiment, '76% of the group that had written about trauma had fully healed while only 42% of the other group had' (Szalavitz, 2013).

Also in lieu with this tide is the perspective often referred to as 'Ego-State Therapy, Ystavansa (2013). Since creative acts of writing, be it in the form of composing poetry, drama, or fiction, give us an opportunity to express our multiple personalities and thoughts hypnotherapisticaly, they naturally free the mind from the cold and harsh realities of the medical world. Ystavansa (2013) in her capacity as a medical professional doesn't overlook the efficacy of medical aids in curing physical injuries and diseases, yet, the same is not the only perspective she looks to when it comes to thinking about patient centered health care facilities. Patients, according to her conceptual ideology, need to be provided with a kind of freedom for them to be able to recuperate well. Medicines, on the contrary, might subjugate them, their medical diagnosis might bind them under a kind of identity, thus forcing the patient to accept the diagnosis as proper, and affiliate and associate himself as if he were subordinate to the medical world. And hence it is the mechanism of writing which serves to heal the body, as is explained below.

1.1. The Expressionistic and Creative Writing Paradigm

In various studies conducted both within laboratory settings and from without, researchers utilized a particular writing mechanism, a kind of paradigm, inducing creative acts of writing, thereby encouraging patients suffering from a variety of physical injuries to write, to put their thoughts on paper, as a kind of therapy. See, for instance, Pennebaker (1985), Pennebaker (1994), Pennebaker (1997a), Pennebaker (1997b), as cited by Baikie & Wilhelm (2005); and Khanna (2010). All studies refer to a similar involuntary and compellingly uncontrollable mechanism that by merely controlling human emotions heals the injury, and settles the body.

Discussing the writing paradigm, Khanna (2010) mentions Wallas's four stages of creative writing process: 'preparation (finding a theme, reviewing your style), incubation (ideas develop, often in the unconscious mind), illumination (ideas spring to life when least expected) and verification (a time for evaluation and revision).'In the first stage, patients suffering from physical injuries are supposed to discover a theme and review their stylistic constraints. In the second phase, they allow their subconscious and at times the unconscious mind to foster ideas, giving them space to develop on their own natural course. The third step allows them to build more on their ideas in a spontaneous way, without controlling anything; whereby even subservient ideas, hidden in the deepest terrains of the mind, 'spring to life when least expected.' This is followed by the fourth and final stage, wherein the patients evaluate their writings and conduct necessary revision of their expression (Khanna, 2010).

In another paradigm suggested by researchers, we have Degraff & Lawrence (2002), who prefer a similar holistic approach to fostering creative expressionism, through their Creativity Mapping Framework (CMF), which is a verbal map used to define creativity and is based upon four major profiles of creativity: Imagine, invest (or participate), Improve, and Incubate (or develop). These roughly relate to various stages of creativity, but may be found to overlap as well. Additionally, each profile has its own distinctive practices. Imagine practices, such as jump-starting and forecasting are based on a divergent approach. Invest practices, such as partnering (in pairs or in workshop formatted groups) produce results quickly by taking a convergent approach. Improve practices, such as genre designing focus on external samples and are therefore based upon a convergent approach. Incubate practices, such as further development of ideas or genre development may be based upon both approaches, but is generally 'convergent in nature' since authors prefer taking inspiration from samples and emulate extensively. To achieve creative writing purposes, students are encouraged to utilize the infrastructure of creative composition in the right manner, and to accomplish that they are to locate their own current profile, diagnose their situation and assess where they are with respect to creativity. Once they get a clear understanding of where they are and where they need to go, they will be able to navigate toward their purposes of reaching there. They will also have to locate where they are with respect to their individual dimensions of creativity:

- 1. Focus (internal versus external)
- 2. Approach (divergent versus convergent / or expressionism versus impressionism)
- 3. Magnitude (big versus small)
- 4. Speed (fast versus slow)

A similar mechanism has been likewise identified by Jarvie (2013). Jarvie's paradigm observes creative expressionism as 'an opportunity to self-explore using the medium of writing'. The purpose of her writing activities is not to teach subjects what is involved in the process of writing creatively. Instead it is to have them learn the art of expressing 'oneself using words, images and writing,' and the art of sharing their thoughts (Jarvie, 2013). The process of writing continues for several sessions, for some time, and with each individual and personal or subjective and self-revelatory expression the purpose of her participants becomes more clear, as to which kind of injury they wish to heal through this process, and how they're able to achieve the same.

Because of the way patients with physical injuries purge out their negative emotions through expressive writing, 'creative writing can definitely heal the body' says Davis (2013). The mechanism to achieve the same, according to his perspective, is to have them 'actually see scenes from their lives in a graphic way;' urging them to write on their existing manner of life, which they believe is no longer adequate or sufficient to help them fulfill their goals and desires; having them talk about what went wrong, or what went right, or what else happened, that not only changed their outlook of life but also helped them survive their physical ordeal; and finally make the patients compose dialogue on this altered positive character trait of their psyche, and their previous negative one, which is now neither necessary nor a part of their new found existence.

1.2. Detailed Explanation of How the Expressionistic or Creative Writing Process Works

Most detailed a practice, however, is the process outlined by Sloan & Marx (2004), also cited and worked upon by Baikie and Wilhelm (2005) in their own research. In their paradigm, participants were told to write down their experiences centering on their physical injury, during three to five sessions or sittings, often over consecutive days, for approximately half an hour per sitting. The participants were urged to let go, and investigate their deepest conflicts, thoughts and feelings. During this process of setting themselves free from the realistic world, they were encouraged to connect their injury experiences realistically or imaginatively with their relationship with family members, 'including parents, friends or relatives', or even someone they knew in the past, their present, or an imaginary someone they would like to be close to in the near future (Baikie & Wilhelm, 2005). The participants were given an open choice on whether they preferred writing about other wide-ranging concerns or occurrences, events, happenings, and encounters throughout, as well, or if they wanted to include details about a variety of topics other than their injury issue, or write about themselves in relation to their injury. Things like what kind of mental frame of mind they had before, or then, or what kind of a person they would like to be in the future, without worrying about things like using proper spelling, grammar, or sentence structure while writing. The information generated was to be kept confidential, until permitted by the participants to do otherwise (2005). Particular details of the project are as follows:

- a. The patient was to write on a stressful incident whence he received the physical injury, but without mentioning the injury itself.
- b. The patient was told to not impose a particular linguistic structure to his written expression, but rather to deal with his writing freely, by allowing it to take a structure of its own, without following any linguistic convention.
- c. It was up to the patient whether he chose to write by hand or type his written expression on a computer. The former was preferred over the later.
- d. The injured personnel were informed in advance that their writing was for themselves, and not meant for the public, nor even the session conductor. Their private words were treated as confidential and anonymous, and their work was neither read out loud, nor shared, or discussed, unless it was with their consent.
- e. Feedback was not a part of these sessions, and all resulting expressive creative writing pieces were returned to the patients, and not combined with their clinical files.

Once the procedure was over, the research generated various recommendations for other participants suffering from a variety of physical injuries, including those related to sports. The recommendations were as follows:

- a. Subjects suffering from physical health disorders should be given creative expression tasks as homework or as a precession, mid-session, or follow-up activity after a particular sitting.
- b. Such form of written expression should be worked upon in a personal or private space, where the subject could work without being distracted by anyone else.
- c. A continuous or consecutive writing scheme, be it on every other day or consecutive weeks, is more preferable than working every now and then.
- d. The writing process should take no more than half an hour, subdivided into a twenty-minute writing activity and a ten-minute slot for patients to take a breath and self-reflect on themselves.

Since the conduct and application of such writing sessions outside the laboratory research settings was not abundant, or recurrent, it was further recommended that physical health care practitioners should conduct further research and generate more data to review the efficacy of creative or expressive writing practices in their own particular setting, for their own cases, 'including appropriate pre- and post-writing measures of physical health, psychological health or general functioning' (Baikie & Wilhelm, 2005). According to this study, though the odds of creative expressionism operating through 'a process of emotional catharsis or venting of negative feelings,' and thereby increasing physical recovery through emotional relief, are highly unlikely, yet there are other aspects associated with the mechanism through which this form of writing can provide health benefits over physical injuries. Thus, for instance, writing about the physical injury, confronting it, describing the event that caused such injury in words, and dealing with the concurrent emotional aftereffects, requires the patient to strive tirelessly to reach a cognitive understanding of his condition, which leads to intensive physiological activity on his part. The process itself not only serves as a de-stressing mechanism of some sort, but by reducing the biochemical strain on the mental psyche, it automatically contributes to better physical functioning and a much better immune system as well. The process, on the whole, has therefore conclusively 'demonstrated significant improvements in physical health' (Baikie & Wilhelm, 2005).

1.3. Various Health Benefits Associated with Creative and Expressionistic Writing

Speaking objectively, as per clinical trial assessments of physically injured patients partaking expressionistic writings, following outcomes have been reported thus far:

- a. An extensive reduction in symptoms related to physical disorders/injuries/ailments.
- b. A remarkable improvement in lung function in patients suffering from asthma.
- c. Less severity of disease in rheumatoid arthritis.
- d. Reduction of pain and physical health deformities in personnel suffering from sporting injuries.
- e. A remarkable improvement in liver functions, and immune functions of the body suffering from cancer, HIV infection, cystic fibrosis, chronic pelvic pain, and postoperative injuries, including those related to sports.

- f. Reduced blood pressure, and a regenerated better memory prowess.
- g. A significant recovery of the physical body tissues, thus allowing fewer visits at the hospital.
- h. Fewer post-traumatic intrusion, depression, and avoidance symptoms. i- Improved sporting performance.

2. Conclusion

The creative and expressionistic writing paradigm is therefore a tried and tested process of dealing with individuals with physical injuries as a healing antidote. This mechanism has procured a highly successful beneficial impact, one that has been scientifically observed by conducting potential procedures on the affected populace, triggering various fitness gains as well. Through control experiments, various researchers have proven how the paradigm can be utilized as a healing instrument for both physically damaged patients, ones who suffer from a variety of medical problems, and psychiatrically distressed survivors as well. Once subjected to the written activity processing, individuals suffering from asthma ended showing improved lung functioning; cancer and fibrosis patients were found in better health physically, and suffered from reduced bouts of pain; HIV infectees 'showed improved immune response'; whereas individuals suffering from sports injuries and arthritis showed less severity in tissue degeneration.

Despite the aforementioned physical health benefits, some potential risks have been found as well. Thus, for instance, at times expressive creative writing can destabilize a patient, by making him/her recall all painful experiences they might have wanted to put behind them. Yet, despite the same, this distressing and negative impact on the injured individual's psyche has not been proven to present a risk to the injured (Hockemeyer et al, 1999). Among the entire repertoire of extensive number of investigations conducted thus far, on the issue of writing about traumatic experiences, only a few exceptional studies have found negative impact on the injured personnel's psyche. Given the success rate of the rest of investigations, the creative expressionistic writing paradigm has been deemed as safe to be used as a healing antidote for physically injured individuals, even if the same mechanism fails to obtain any specific health related benefits. All in all, given that such individuals be informed at the outset of possessing a choice to stop writing when they wish to do so, and their option to request for some extra time with the process conductor in case of psychological distress, any number of injured personnel should be encouraged to participate in writing activities for about 20 to 30 minutes per session. That way, the procedure will not necessarily seem excessively devastating or over powering to them, and the freedom of choice to continue or discontinue their writing once the time is up will endow patients with a relaxing feasibility as well. Notwithstanding the potential benefits of the creative and expressionistic writing paradigm, the same should not be utilized as a replacement for appropriate and required medical treatment in physically injured populations, but rather as a supplementary treatment along with standard procedure, while waiting for further results.

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