

Writing Poetry: A Coping Mechanism for the Mental Health of High School Students

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ABSTRACT

With the recent pandemic of Covid-19 sweeping through the United States, it has been proven that its impact has negatively affected individuals' mental health. Recent research has shown that adolescents, specifically high school students, are particularly mentally impacted by social isolation experienced due to remote learning, fear of contracting the virus, and other factors. As a teenager, I too noticed a negative decline in my mental health and naturally fell into writing poetry as a way to cope with everything I was experiencing during remote learning. This newfound coping mechanism piqued my interest and I began to wonder if other high school students would also benefit from writing poetry. This thus led to my research question which is "What is the impact of writing poetry when used by high school students as a coping mechanism in support of mental health?" Poetry therapy is used as treatment for different reasons by psychologists as it provides neuroscientific perspectives, flexible treatments, and many more beneficial aspects. The methodology that I determined best fit my research was an experimental pre-post study. In this study, participants wrote a minimum five-line poem per day over a three-week period in addition to completing four surveys: a mental health questionnaire, two poetry perception surveys, and a daily survey. In terms of future research, medical professionals who have experience with poetry therapy can refine this coping mechanism of writing poetry to then recommend it to patients to engage with in their own time outside of counseling sessions.

Introduction

With the recent pandemic of Covid-19 sweeping through the United States, it has been proven that its impact has negatively affected many individuals' mental and physical health. Recent research has shown that young adolescents, specifically high school students (ages 14-18), are particularly mentally impacted by social isolation experienced due to remote learning, fear of contracting the virus, and other factors (Windarwati et al.). Remote learning put many students at risk for developing psychosocial disorders and are now struggling to adjust to in-person learning after experiencing almost a whole year of little to no social interaction with friends, classmates, and teachers. From this mental health crisis caused by the pandemic, depression and anxiety emerged as the two most commonly acquired symptoms by teenagers (Almeida et al.).

As a teenager myself, I too noticed a negative decline in my mental health and naturally fell into writing poetry as a way to cope with everything that I was experiencing during the height of remote learning. This newfound coping mechanism piqued my interest, and I began to wonder if other people my age, high school students, would also benefit from writing poetry the same way that I have. This thus led to my research question which is "What is the impact of writing poetry when used by high school students as a coping mechanism in support of mental health?" To kickstart this curiosity of mine, I started conducting research on whether medical professionals such as psychologists were already utilizing poetry as a form of treatment, and I came to find that they are. It is called poetry therapy.

Literature Review

Background

Poetry therapy is used as treatment for many different reasons by therapists and clinical psychologists as it provides neuroscientific and psychiatric perspectives, flexible and manualized treatments, intensive psychoanalysis and many more beneficial aspects (Punzi). Defined by the University of Cambridge as literary works that specialize in the expression of thoughts and feelings, poetry provides many potentials through its personalized flexibility and creative outlet. A recent study indicates that Chinese college students' positive interview responses about their appreciation towards poetry is to be resulted from poetry curriculum taught in Chinese elementary schools (Zhang), this study being an important baseline and inspiration for my study, written about in detail in the "Methodology" section. These college students were very willing to participate in poetry therapy as a coping mechanism through the act of writing poetry in order to relieve stress and anxiety, this also seen as a way of coping through academics-related struggles in doctoral candidate students (Zhang; Lazuras), showing that even a lesser concentrated version of poetry therapy not administered by professionals can be positively impactful on the mind. Coping mechanisms are used by individuals to cope with internal mental struggles in the moment, to deal with any external events that are anxiety inducing (Algorani & Gupta). I am applying the research I have done with poetry therapy to structuring the treatment as a coping mechanism.

Components of Poetry Therapy

Components of poetry therapy vary. There is the writing of free-verse, reflective journaling, and narrative poetry (Lerner). These three types of poetry of the written therapy allow for receptiveness, expression, and symbolism to occur during the treatment, allowing the patient to open their mind to a traumatic event, to be able to express the thoughts and feelings associated with that event, and to identify symbols within the text that could provide insight for coping with and thus minimizing triggers (Punzi; Berqvist & Punzi). Alongside these components, poetry therapy also includes the reading and organization of poetry, something which intentionally creates a creative experience intended to accumulate increased self-esteem and a calmer mind (Lerner). Poetry therapy creates an environment where the patient feels safe and comfortable to open up about their mental wellbeing and trauma as compared to other treatments like cognitive behavioral therapy and cognitive therapy, where the patient is shocked with revisiting difficult memories with a therapist/professional.

PTSD Patients & Trauma

The effect of trauma on the mind is significant, and poetry therapy has been utilized in clinical work to treat trauma and post-traumatic stress disorder (PTSD). Through expressive writing in the form of poetry, this form of therapy has proven to be effective, with patient recovery and ability to cope coming much easier as compared to more relied-upon forms of treatment, such as cognitive therapy (Berqvist & Punzi). Though it has been successful with many patients, cognitive therapy can be a difficult treatment as it causes patients to relive their trauma in what can feel like a forced and hostile environment (Ehlers & Clark). Comparing cognitive therapy to poetry therapy, the latter provides a more controlled environment for patients as poetry therapy contains three different components that are aiming to validate the patient's feelings, express their feelings, and to cope with the traumatic event (Berqvist & Punzi). It is, however, difficult to fully compare these two therapies as no patient and their trauma is alike and results from treatments can vary not because of the formatting or deliverance of the therapy used, but because of the way the patient's mind works. Cognitive behavioral therapy (CBT) is also a treatment used for patients with PTSD, and its aspects vary a little differently to cognitive therapy. Despite CBT's success with treating trauma, patients have been

known to close up and avoid talking about their trauma, thus making it much more difficult to make the treatment effective (Kazlauskas). Exposure to panic-related associations and body sensations is also a part of CBT that is difficult for patients to go through with (Otte). Applying this to the pandemic, for many teenagers, the social isolation among other things experienced during qualify as trauma for the mind. This is one of the reasons why high school students were chosen as research subjects in this study.

Examples: Poets

The well-known poets Sanai and Nassar Kohsrow are examples of writers who utilized poetry to their benefit as a coping mechanism with their mental health as both experienced bipolar disorder. Through the analysis of poems written by the two, researchers noticed connections between the mental disorder and their poetic work: After their “awakening” (researchers defined this as the poets’ realization of the inspiration that could be drawn from their mental wellbeing), Sanai and Kohsrow began using complex metaphors and analogies that have been interpreted as experiences from living with bipolar disorder (Fatemi et al.). Additionally, it is also argued that the work produced by the two poets improved and became increasingly more popular among audiences, especially during their times. A more modern example of a poet who embodies poetry as self-administered therapy is Canadian poet Rupi Kaur. Kaur’s bestselling books are collections of original poetry and illustrations that follow the themes of mental health and trauma, specifically about sexual assault, immigration, and abusive relationships. Having sold over eleven million copies, it is apparent that the general public connects with poetry surrounding mental health because of the ease readers experience when reading Kaur’s poetry while also understanding the complexity topics discussed (Wilson). In a personal blog, Kaur states that writing poetry has greatly aided her in expelling thoughts and emotions she was “bottling up” in her mind and that coping has become easier (Kaur). With these examples of famous and popular poets publicly utilizing poetry therapy as a self-administered coping mechanism, they can serve as examples when trying to apply poetry therapy also in this self-administered, non-clinical way to other groups of people, such as high school students.

High School Students: The Gap

The entirety of published research articles write about how poetry therapy is utilized by psychologists and therapists on patients who are over the age of eighteen, patients who are not high school students. With the recent decrease in mental stability among teenage adolescents due to the Covid-19 pandemic (Windarwati et al.), it is necessary to research how poetry therapy can be applied to high school students to positively impact their mental health in the form of a coping mechanism. Thus, utilizing the act of regularly writing poetry as a coping mechanism was born. Teenagers struggle to express their thoughts and emotions, especially if they are specifically related to mental health, such as depression and anxiety (Almeida et al.). Poetry therapy has been greatly beneficial to those who use it as it allows them to express those thoughts and emotions in a creative outlet (Berqvist & Punzi). By applying this research, high school students can self-administer their own version of poetry therapy by writing poetry on a regular basis as a coping mechanism in support of their mental health. In order to generate the results I wanted to find with this topic, I constructed a study in which participants would use the medical structure of poetry therapy as a self-administered coping mechanism.

Methodology

The methodology that I determined best fit my research was an experimental pre-post study. In this study, participants would write a minimum of five-line poem per day over a three-week period in addition to completing four

different surveys. Additionally, all surveys were anonymous, and I did not collect the poems which the participants wrote – everything was self-reported by the participants via surveys.

Participants

In order to recruit participants for the study, an informative email explaining the study was sent out to all 1,700 high school students that attended a US public high school who were diverse in grades 9-12. Through a form linked in the email, students indicated whether or not they were willing to participate in the experiment. The students that indicated their willing involvement were then further informed of their participation in the study in an informational meeting. Once informed consent forms and parent consent forms were collected, preliminary surveys were sent out to the participants. A total of ten participants voluntarily partook in this study.

Experimental Study

For the experimental study, ten participants wrote poetry once a day for three weeks. The poems that were written were not collected nor analyzed, so participants had no specifications nor limitations on what style of poetry to write during the study as it was the psychological effects of writing the poetry that were being analyzed. Participants were sent an email reminder each day of the study and were instructed to write the poem with the following prompt: “Today, think about your struggles, mental or not, and poetry them in a poem you write. Express your thoughts and emotions in this poem, write what you may not be able to say out loud. Your poem must be a minimum of 5 lines – that if your only guideline.” The wording in this prompt similarly follows the wording of prompts and instructions which therapists give their patients during therapeutic treatments within poetry therapy and others as well where comfort and understanding is emphasized as writing the poem should be inviting and not seen as a chore (Otte; Lerner).

Mental Health Questionnaire

A mental health questionnaire (Appendix A) was taken by all ten participants before and after the study. The questions were derived from those found in the Hamilton Rating Scale for Anxiety (Hamilton) and the Clinically Useful Depression Outcome Scale (CUDOS) (Zimmerman et al.) both of which are medically approved assessments used by psychologists today when evaluating patients. The Hamilton and CUDOS questionnaires were specifically chosen because anxiety and depression are the two most common psychological symptoms experienced by high school students as a result of the pandemic (Almeida et al.). Participants read a statement relating to their mental health and then selected a number on the scale that represented their psychological health. The participants themselves read and answered the survey, they were not verbally questioned as medical professionals typically do so, however, many professionals do provide self-administered assessments to patients (Zimmerman et al.). There were two sections to this survey, the first focused on the participants’ anxiety and/or stress levels and the second on levels of depressive feelings. The scale for the anxiety section was 0-4 with 0=None, 1=Mild, 2=Moderate, 3=Severe, and 4=Severe, Grossly Disabling. The scale for the depression section was 0-4 with 0=not at all true (0 days), 1=rarely true (1-2 days), 2=sometimes (3-4 days), 3=often true (5-6 days), and 4=almost always true (every day). The participants were made aware of the personal questions related to mental health that would be asked of them on this survey prior to completion of the survey.

Poetry Perception Surveys

Participants also completed a survey that analyzed their perceptions of writing poetry before and after the study, which allows for a more thorough and cohesive analysis of the data procured. The purpose of including the preliminary survey (Appendix B) is to gain understanding surrounding the participants experience in writing poetry and how their interest in the study could potentially skew the results. The survey’s questions are structured to determine if participants have a likeness to poetry prior to completing the study, thus making them more likely to voluntarily participate, as opposed to a participant who does not have a likeness to writing poetry.

The post-study survey questions (Appendix C) are similar to that of the preliminary but are more focused on the participants’ future actions in terms of how the study impacted their mental health. Questions also ask participants of their potential willingness to continue writing poetry on a regular basis as a mental coping mechanism, thus serving as a means for participants to reflect on their experience during the study.

Daily Survey

Attached to the reminder email was the Daily Survey (Appendix D) for each day of the three-week study. Participants were asked to complete this survey for every day of the study, regardless of if they wrote the poem that day or not. This survey gauged the mental health of the participants directly before and directly after writing the daily poem, allowing for deeper analysis of the use of the coping mechanism. If applicable, participants were asked to explain why they did not write a poem. Furthermore, there was also a question for participants to share what they wrote their poem about.

Results

Analyzing Mental Health

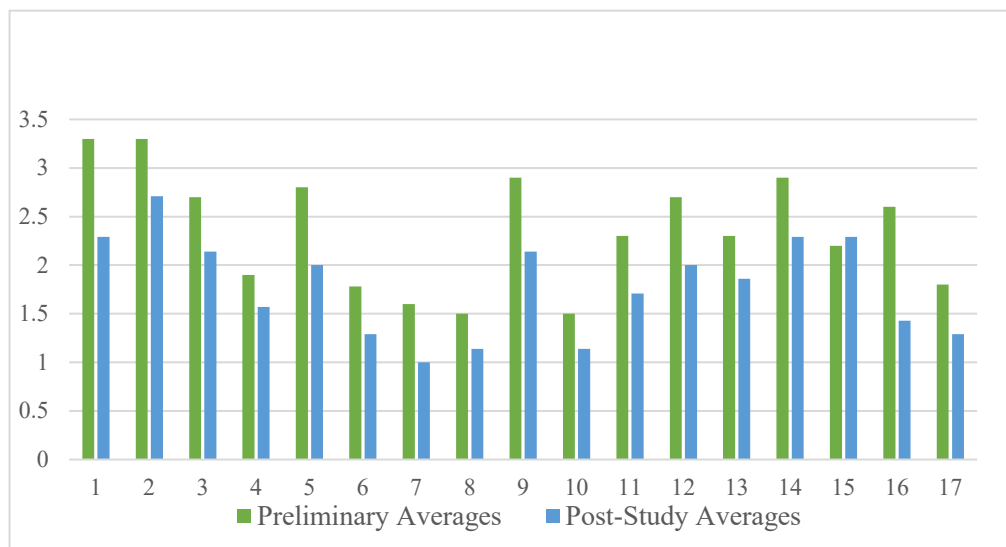


Figure 1. Comparison of Averages Across the Two Mental Health Questionnaires

Figure 2

Question #	Preliminary Averages	Post-Study Averages
1	3.30	2.29
2	3.30	2.71
3	2.70	2.14
4	1.90	1.57
5	2.80	2.00
6	1.78	1.29
7	1.60	1.00

8	1.50	1.14
9	2.90	2.14
10	1.50	1.14
11	2.30	1.71
12	2.70	2.00
13	2.30	1.86
14	2.90	2.29
15	2.20	2.29
16	2.60	1.43
17	1.80	1.29

Note. Refer to Appendix A to understand which response the number averages equate to.

Looking firstly at the mental health questionnaire, averages of all responses were calculated which can be seen in Figure 2. Figure 1 is also provided for a clearer comparison of the two different averages. For sixteen out of the seventeen questions, the post-study averages are noticeably less than the preliminary averages, indicating that the mental health of the participants improved as a result of the study. Question 2 asked participants if over the past week they had experienced “feelings of tension, fatigability, startle response, moved to tears easily, trembling, feelings of restlessness, inability to relax.” The preliminary average for Question 2 was 3.30 which equates to “Often true (5-6 days)”, and the post-study average was 2.71 which is “Sometimes true (3-4 days)”. This means that prior to beginning the study, the average of the participants experienced feelings of tension among other related symptoms, “Often” during five to six days over the past week. After the study, the average of participants experienced those feelings “Sometimes” during three to four days during the past week.

Focusing secondly on results from the Daily Survey, Questions 3 and 4 asked participants to evaluate their mental health before and after writing the daily poem. Figure 3 displays the participants’ mental health before writing the poem and Figure 4 illustrates the participants’ mental health after writing the poem from day 10, week 2 of the study.

The results from this particular Daily Survey best show the change in mental health of the participants as, prior to writing the poem, 33% of participants were either feeling “Negative” or “Approaching negative”, yet after writing the poem, 89% of participants were either “Neutral”, “Approaching positive”, or “Positive” with only 11% “Approaching negative”.

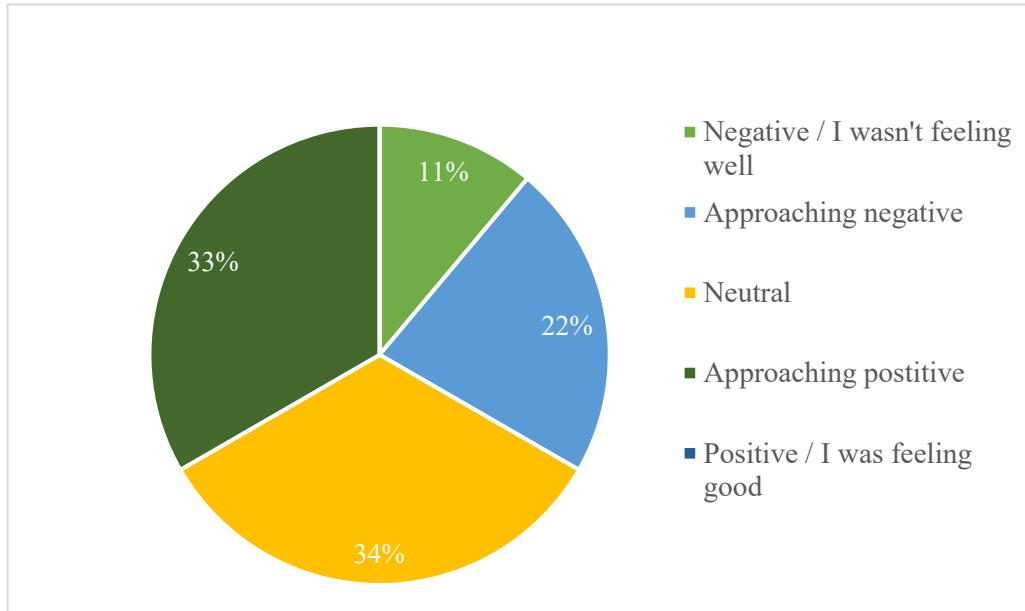


Figure 3. How was your mental state **before** you wrote the poem?

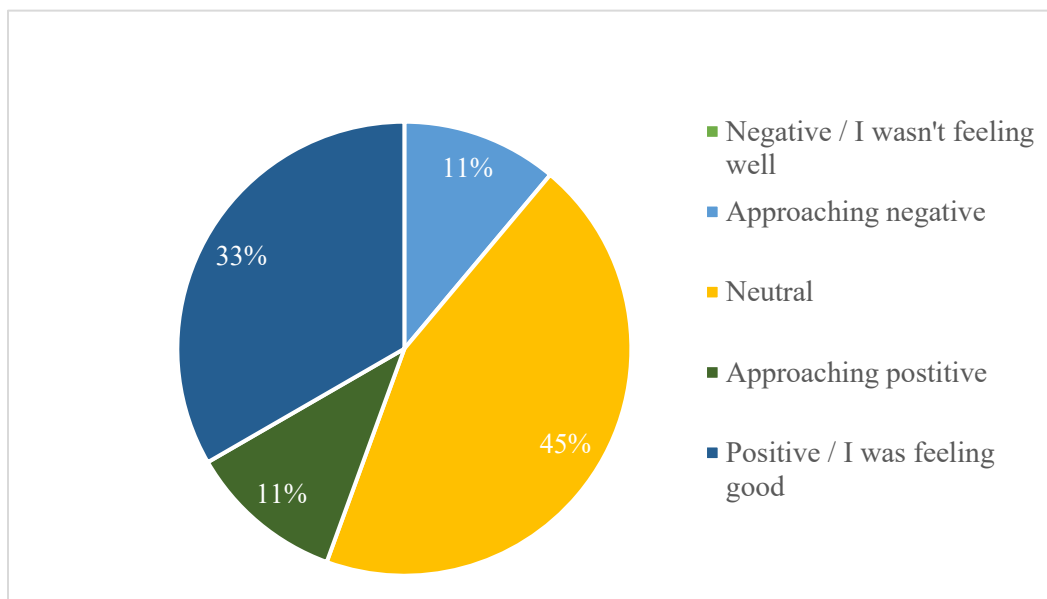


Figure 4. How was your mental health **after** writing the poem?

In addition to Questions 3 and 4 on the Daily Survey, Question 6 asked participants to share what they wrote their poem about if they felt comfortable doing so. The following quotes are responses written by participants pulled directly from the Daily Surveys spanning throughout the three-week period. Each quote was intentionally selected to display the wide variety of topics and/or experiences participants wrote about.

“I wrote a poem about Mumbai, the city I grew up in because I have been feeling very homesick and thought that writing about it would help me feel better.” (Day 1, week 1)

“I wrote about how my head hurts and the small things that made that happen and how those things are making me frustrated in general.” (Day 7, week 1)

“I wrote about balancing all aspects of my life, and how a lot of my communication is technological and why that is so frustrating.” (Day 10, week 2)

“I wrote about how mankind is foolish in the way of judging who lives and dies.” (Day 16, week 3)

Participant Predictions and Reflections

The Preliminary Poetry Perception Survey primarily served to gauge statistics on the participant pool as well as for participants to make predictions on their involvement in the study. Question 6 asked participants to share their feelings about writing poetry every day for three weeks and these are a few of their responses:

“I’m worried I will forget to write the poem or have no time to do so. However I am interested in seeing how my poems vary with my emotions on any given day.”

“I’m excited to write one poem every day for three weeks! I’ve always loved poetry because of its unique way of interpreting and conveying emotions, and I’m excited to see the effects on writing poetry daily.”

“It might be hard but I’m looking forward to doing something creative consistently.”

“It seems like a lot of work, but I’m sure I’ll manage. Usually my best poetry is written when I feel like it, and not when it is forced. However, I haven’t written in a while so I have some untapped inspiration to put to use.”

“I look forward to it. I think it will be good for my mental health and as a good creative outlet.”

“I feel like it will stretch my brain and make me think because I don’t normally do it.”

“I’m looking forward to it.”

“I would really enjoy it, I believe, because I find poetry relaxing and comforting.”

“I am excited about it.”

The Post-Study Poetry Perception Survey was mainly for participants to reflect on their experience within the study. From this survey, participants indicated that 43% enjoyed writing poetry during all of the study, 29% enjoyed writing most of the time, and 29% enjoyed some of the time. These percentages are in line with the quotes shown above, that 80% were looking positively at their participation that was yet to begin and 72% enjoyed the study at least most of the time. Further percentages that display the participants’ perceptions of the impact of their involvement can be seen by the 40% who believed their mental health would improve when asked prior to beginning the study. After the study, 71% indicated that they did see a noticeable improvement in their mental health as a result of the three-week study. Participants were then asked to elaborate on their answer, these elaborations are inserted below.

“I started writing down my emotions and so I felt like I didn’t feel like bottling them up.”

“After partaking in this study, I feel that writing poetry daily is a great chance to reckon with what has happened throughout the day or week.”

Almost all participant responses were similar to the ones above, stating that writing things down aided with the expressing and understanding of feelings as well as calming down and letting go of anxiety-inducing thoughts. Furthermore, participants wrote that writing poetry allowed them to confront emotions they were suppressing and to

work through them. Figure 5 specifically illustrates how exactly writing poetry supported participants' mental health.

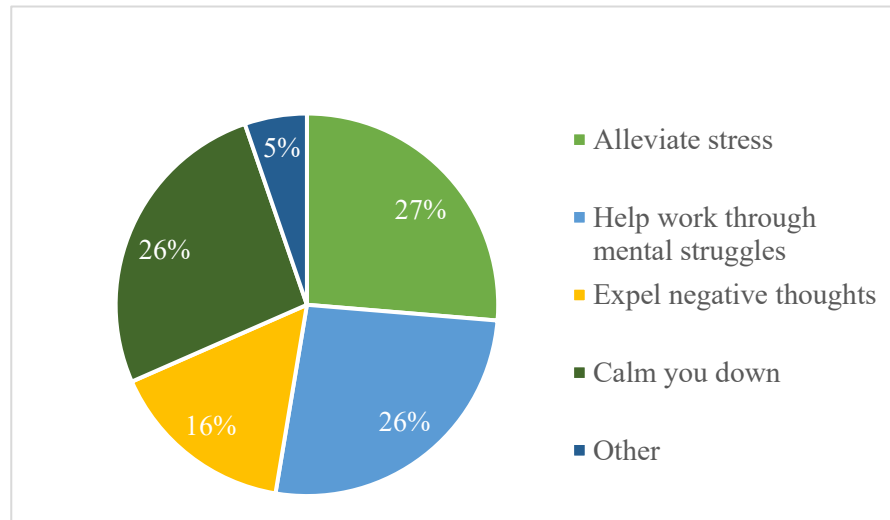


Figure 5. Did writing poetry...

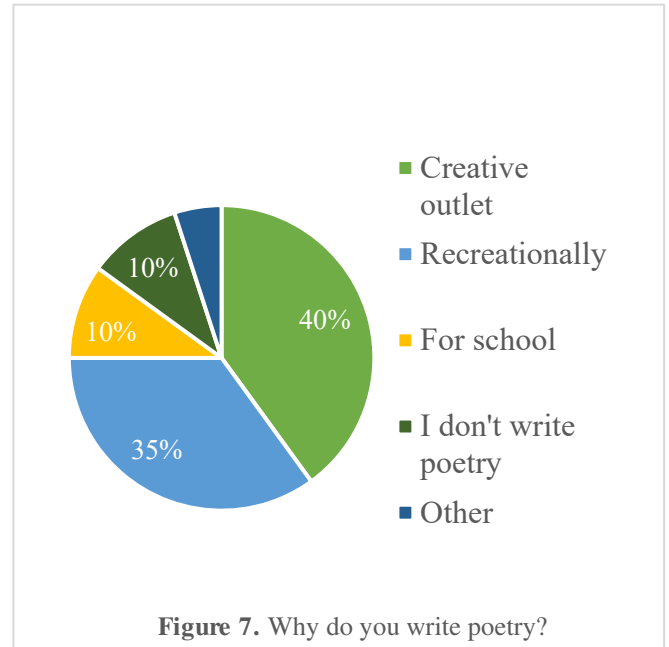
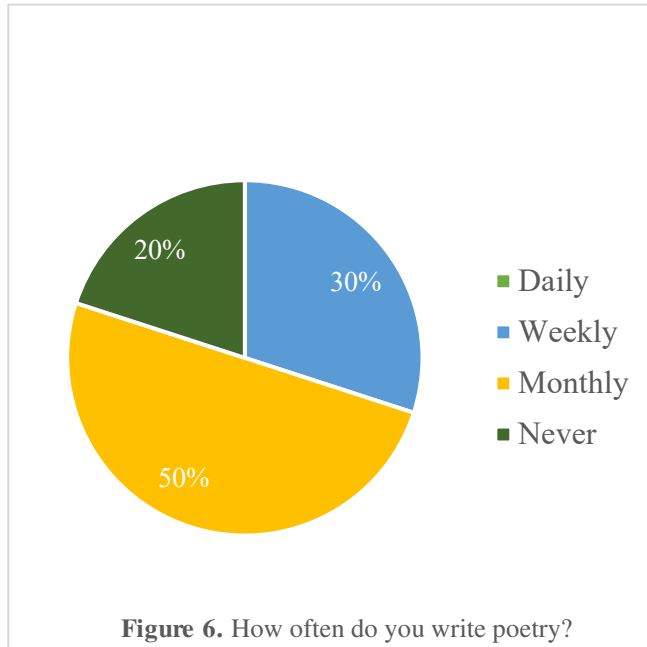
“Alleviating stress”, “Help work through mental struggles”, and “Calm you down” were all almost tied as the most selected answer in the question posed to participants in Figure 5. The participants who chose “Other” elaborated on their response, saying that “While writing poems made me feel better overall, it also allowed me to self-reflect and be more open-minded.”

Discussion

Limitations

The first limitation I found is within my participant pool. 80% of the participants were already writing poetry on a regular basis (not necessarily daily) prior to being made aware of the study. This therefore made them more likely to be open to writing poetry for the sake of their mental health as opposed to an individual who perhaps does not enjoy writing poetry as much. Hence, although the recruitment email was sent out to all students who attend the school, the majority of interested students already wrote poetry on a regular basis for recreation, this displayed in Figures 6 and 7.

In the second week of the study, it became apparent that participation decreased as two to three participants had not completed the Daily Survey, indicating that they either forgot (which many participants stated in the post-study survey), or they were just no longer interested in the study. In addition, three participants did not complete either of the post-study surveys which made it difficult to analyze and interpret results as survey responses were all anonymous. Communication was entirely through email between the researcher and the participants. Due to this, it was recommended to participants that they only participate in the study if they regularly check their emails. This proved to pose an obstacle as participants would not be able to complete the Daily Survey if their email was not checked on the daily basis.



Note. Data in Figures 6 and 7 are taken from the Preliminary Poetry Perception Survey.

The responses from both pre- and post-study mental health questionnaires are on the lower side of the scale, generally equating to stable mental health amongst the majority of the participants. For this reason, some might say that the results generated from this study are not properly reflective of the adolescent population who struggle with severe mental instability. However, coping mechanisms can be used by anyone during any struggle, not just necessarily with those experiencing grossly disabling emotions and thoughts. Becoming aware of this, I focused on the miniature mental health questionnaire that was embedded within the Daily Survey which allowed for deep insight into how writing poetry impacted participants' mental state directly before and directly after doing so (refer to Figures 3 and 4, page 11).

Implications

Coping mechanisms and treatments for psychological health differ greatly. The goal of a treatment is to cure the patient whereas a coping mechanism's purpose is for the individual to manage difficult mental struggles in the moment when that difficulty is being experienced (Algorani & Gupta). Writing poetry as a coping mechanism has been modeled after a treatment, poetry therapy, for this study and has shown that it is effective in minimizing the impact of the mental struggle on the individual's mind. High school students who use this coping mechanism of writing poetry will find their own regularity. For many of the participants, it sometimes seemed like a hassle to write the daily poem therefore implying that perhaps a daily basis of writing poetry is not the regularity that those participants best fit as it is all individualized. Outside of the study, participants and high school students will be able to choose when they wish to write poetry, finding the most suitable times to utilize the coping mechanism in support of their mental health.

Something important to emphasize is the awareness which participants showed in regard to how the study affected their mental stability. 71% of participants said they noticed positive improvement and 29% said an improvement may have occurred. Furthermore, 43% of participants stated that they would continue writing poetry in

support of their mental health in the future with another 43% stating that they might continue. This shows the impact of the study itself on the participants, that they noticed a distinct enough improvement in their mental health to recognize that writing poetry would be beneficial to them if they continued to utilize it as a coping mechanism.

Future Research

There are many ways to replicate this study through alterations of certain steps. For example, a study period longer than three weeks where participants choose when they feel the need to write poetry in support of their mental health. This example study could yield more specific results as to the number of times high school students engage with this coping mechanism as well as how effectively it impacts their psychological health.

Researchers looking to conduct studies similar to this one should recruit participants who do not write poetry on a regular basis or do not enjoy writing poetry in general. The results from a study like this can provide deeper insight into whether these types of high school students (who do not enjoy writing poetry) could in fact enjoy writing poetry when using it as a coping mechanism for the sake of their mental health.

Medical professionals who have experience with poetry therapy could refine this coping mechanism of writing poetry to then recommend it to patients to engage with in their own time outside of counseling/treatment sessions. Additionally, high school counselors should make healthy coping mechanisms like this one known to their students as it is modeled after an effective therapy. This can be especially beneficial to those students who were severely negatively impacted mentally by social isolation among other things experienced during the pandemic.

Using this research as inspiration, psychologists and psychiatrists can also begin conducting research on how to refine and remodel other forms of psychological therapies and treatments into coping mechanisms that can be used by any high school student. Due to the success of the use of writing poetry as a coping mechanism which this study has shown, it can be inferred that other mechanisms can be created with current treatments used as base-lines specifically for high school students. Not only can this improve mental health but also allow for easier methods of self-administering mental health improvement.

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