Chapter 7 – Writing Together: Therapeutic Writing in Mental Health

Part 1 – Reflections of a Writing Practitioner

Carol Ross

Have you ever thrown yourself into something and then just when it’s too late to draw back, you panic? That’s how I felt when I started a weekly writing group for patients in a mental health unit as part of the Cumbria Partnership Year of Writing (see Chapter 12). I was motivated to start the sessions both by my own personal experience of the enjoyment and therapy that writing can bring, and by the large amount of research evidence I had been reading that shows writing can be of therapeutic benefit – both psychologically and physically (see Chapter 1). But I was nervous – would I enjoy the sessions or hate them? Did I have the right skills? Would the patients gain any benefit? Fortunately the answers to those questions were: yes I loved doing the sessions from the beginning; yes I had prepared enough beforehand so that my skills were up to the job (but I am still learning all the time); and yes patients do seem to gain benefit from participating in the sessions (an evaluation of the 2010 sessions and of other Year of Writing workshops has been published, see Ross, 2011).

At the time of writing I am leading weekly groups in the mental health unit in which I started in April 2010, and in a psychiatric intensive care unit. In my writing groups I do not feel like a therapist or a teacher (I am neither), I feel I just sit down with some people, we get to know each other a little, and we write together. I believe that writing does you good, whatever you write, but that different people need to write different things and in different styles, e.g., thoughts and feelings, memories, imaginative stories, poems. What I aim to do is help people to discover what they need (or want) to write and inspire them to keep writing – and they inspire me right back!

Getting ready

I felt I needed to prepare really well before starting to lead sessions, which I did by:

- Reading books and research articles
- Attending training, e.g., psychological skills training and certificates in counselling and creative writing
- Planning meetings with ward management, clinical psychologist, nurse consultant, occupational therapist and activities coordinator
- Identifying a senior clinician willing to supervise my practice
- Going through the Lapidus Core Competencies (Flint, Hamilton & Williamson, 2004) with my supervisor to ensure I have no competency gaps
- Identifying an evaluation tool (Stiles, Gordon & Lani, 2002) for the pilot writing sessions and adapting it in consultation with ward management.

A typical session

Recruitment of inpatients to attend the group is by a combination of posters advertising the sessions, discussion with ward staff and visiting the communal areas just before the session to ask who would like to join in.

I bring pens and paper along to each session, a supply of the forms I use (evaluation questionnaire and feedback form), plus whatever stimuli I plan to use – objects, pictures, etc.

Before the session starts I speak to a member of ward staff about who might be interested in coming to the group and either accompany them on a tour of the unit to let people know the group is about to start, or go directly to the activities room to clear art materials and pictures off one of the tables so we have room to write.
The group participants generally arrive over the course of several minutes so I chat with the early arrivals until it seems like everyone is present who plans to be and then start the session.

The first 5 minutes or so of each session are taken up with explaining what the group is about, getting to know each other a little, and reassuring group members, for example: that they are writing only for themselves, that no-one else needs to see anything they write, and that things like spelling, grammar, handwriting and punctuation don’t matter at all. Reassurances are important, not least because some people had a bad experience of school and are initially worried that the group might be like school.

I have developed an outline programme for the sessions: introductions, reassurances and explanations; a short writing exercise, e.g., freewriting (see Chapter 1) from 4 prompt words (2 minutes per word); a longer writing exercise; completion of evaluation forms. My writing sessions typically include around 25 minutes of writing and 25-30 minutes of reading aloud (our own writing and sometimes published poems) and group discussion. Participants are under no pressure to read aloud, but in practice almost everyone does at some stage. Feedback suggests that the sharing of writing and the group discussions greatly contribute to the benefit felt by participants.

Depending on the individuals who come to the group, the sessions sometimes extend beyond an hour. The extra time is not used for writing, but rather for chatting over coffee, reading and discussing poetry, talking about ideas for writing, and discussing possible homework and the plan for the next session.

At the request of the ward manager I now write some of my observations in the patients’ care records using feedback forms.

The group takes place in the ward activities room, which is a light modern room. We do not have exclusive use of the room for the session, which means other patients do occasionally come in to sit with us for a while or to do an art or craft activity. The activities room is described in the following poem, which was written while I was on a Writing in Healthcare course at Tŷ Newydd, the National Writers’ Centre for Wales (Tŷ Newydd, 2012):

Hadrian Writing Group
I am in a light, airy place.
White walls are strewn with coloured shapes,
a stream bed of giant pebbles.
A giant could fold these walls out flat,
make himself a huge abstract painting.

There is a mess of art stuff scattered.
Paint pots and brushes beside a sink.
Pictures and poems on the walls.
A Dolly Mix of plastic chairs huddle
round two white Formica tables.

Our table is near the windows.
Our heads are bowed, eyes downcast.
Our hands are moving, sliding over paper,
pens softly scratching in the hush.

I can hear birdsong,
faraway voices.
My muscles are relaxing,
tensions easing.
Our minds are calming,
creating,
finding flow,
a sense of connectedness.
Rapport and group dynamics

I believe the success of small group therapeutic creative writing sessions is greatly influenced by how comfortable and supported participants feel in the group, and on the development of confidence to share writing, thoughts and feelings with each other. Writing itself is therapeutic, but writing and sharing writing in a supportive group adds another dimension. For example, some people who had probably never written creatively before, gained confidence within the space of one session, and over several sessions, in response to the heartfelt and supportive feedback they received on their writing from the group.

Rapport between facilitator and participants is vital for creating a relaxed, supportive group. Rapport and good group dynamics can be fostered in many ways, e.g., by being friendly and approachable and using only first names in the group. I try to speak to participants not as their group leader but just as one person to another. I make it a rule to write and read aloud with the group. Sometimes someone is unable or unwilling to write for all sorts of different reasons, e.g., not having learned to read and write, reading glasses left at home, arthritis. Everyone is welcome in my groups and if they don’t or can’t write on the day in question we find ways of working around it, e.g., when it comes time to read our writing aloud they speak instead, they draw instead, or I write for them. One person wasn’t able to write on paper but he was able to compose poems on his phone and read them to us. Everyone needs to feel welcome and valued, which means giving effective reassurances, and encouraging and supportive feedback.

Rationale for selection of writing activities

Writing exercises in mental health wards need to be quite short for two reasons: (i) many of the people who come to the group do not have the concentration needed for a long period of writing while they are ill in hospital, and (ii) some patients arrive late or leave early for all sorts of reasons and having short exercises makes managing this easier. Starting with short bursts of writing, such as freewriting for 2 minutes per word for 4 words, is an easy and calming start and a good ‘warm up’ for writing.

I select, develop and/or adapt writing activities on the basis of anticipated wellbeing benefits for the participants and suitability for writers of mixed ability and experience. Because there can be new people each week, and the abilities and level of concentration of participants vary, I plan each session as if it were the first session, rather than building on what has gone before. At the same time I need to ensure variety from session to session for the sake of those patients who do attend week on week. A high priority for the selection of writing exercises is always for the sessions to be enjoyable – if people enjoy writing in the session they will hopefully do more writing after the session, both in the unit and after they go home.

Freewriting (see Chapter 1) is a powerful technique for therapeutic creative writing that can draw out unexpected thoughts and feelings. When working in a mental health unit I find it is helpful to use word prompts or other stimuli for freewriting for these reasons:

(i) Writing completely freely whatever comes into the mind, with no prompt of any kind, could emphasise any negative thoughts that are in the person’s mind at the time of writing, cause distress and make the negative thoughts worse;

(ii) Writing in small chunks, i.e., 2 minutes per word for 4 words, is an easily manageable start to writing sessions, even for people with a low level of concentration, and avoids a long silence early in the session;

(iii) Writing from prompt words is less likely to be deeply personal, so the participants are more likely to be willing to read aloud some of what they have written. Reading aloud, sharing thoughts and discussing our writing, seems to contribute to the effects of the writing sessions.

I choose freewriting stimulus words on the basis of (i) avoiding directing participants’ thoughts or leading their writing; and (ii) encouraging new thoughts to appear and flow without constraint. For example when the word pool is used one person may write about pool balls rolling around a table while another writes about the moon reflected in a pool of water. Word ‘sets’ that allow these differences to appear in participants’ writing make for interesting group discussions. An alternative approach, with a
confident group, is to ask each person, during the introductions at the start of the session, for a word that they associate with wellbeing, and then use those words as freewriting prompts later in the session. The 15- to 20-minute writing exercises I use include: writing following guided visualizations; journal-writing techniques, and exercises based on weather, places, people, amusing stories, or playing with words. These longer writing exercises are chosen to achieve a balance between opportunities to write in a fun and imaginative way and encouraging writing that is grounded in the here and now, the real world. I take care not to use exercises that will lead participants to write about painful memories and generally do not lead people to write about anything very specific or in a prescribed creative form such as a poem. In this way, participants are free to write what they need or want to write at that moment in time. In one session five people all wrote very differently in a writing exercise about boxes, for example, two of the group wrote rhymed poems while the other three wrote prose.

**Inspiration for writing**

Here are some examples of writing stimuli that I think can work well in a mental health unit (roughly in the order of frequency that I use them). Where I have quoted from a participant’s writing the prompt word or other stimulus is given in square brackets after the quote.

**Freewriting**, e.g., using sets of words as prompts, e.g., pool, moon, sky and cloud; snow, cave, mountain and river; red, blue, green and yellow.

_Graham_: “While serving in the Armed Forces an exercise to the Atlas Mountains in Morocco resulted in trekking across peaks early before sunrise. Gentle as a breeze which will only disturb a feather or as strong as a lion with a roar to match.” [avalanche]

_Carol_: “I love it when an avalanche of words pour out of my head onto the page. To me the word avalanche sounds interesting but the things themselves are so destructive and scary.” [avalanche]

_Graham_: “When working I have been described as an animal, what type of animal I do not know but possibly a bull as I am a Taurus.” [animal]

The following four pieces of freewriting were all written by the same person (Janice) in a one-to-one writing session. After she had finished writing them I showed her how what she had written could be turned into a poem, which follows the four short pieces.

“Clouds shining in the sky. Birds flying through the air. Black clouds, white clouds. All around clouds.” [cloud]

“Sun shining brightly making us happy. Sun mellow yellow brightening the day.” [sunshine]

“River flowing past, current flowing fast. Boats and vessels sailing on a blue, clean river. Throwing stones into rivers and splashing.” [river]

“Flowing on in chatting. Flowing freely and easily. Flowing on like a river” [river]

_**On the River with Family and Friends**_

by Janice and Carol

Clouds shining in the sky  
Birds flying through the air  
Black clouds, white clouds  
Clouds all around.

Sun shining brightly  
Making us happy.  
Mellow yellow  
Sunshine  
Brightening the day.

River flowing fast  
Current rushing past  
Boats and vessels
Sailing on a blue clean River.

**Picture postcards.** I use picture postcards often, in all sorts of ways, and consider them to be endlessly adaptable. Often I ask people to each choose a card that appeals and give them ideas to get them started writing, e.g., write what you see, imagine the scene in another season, imagine you were there, write the ‘story’ of the picture. Sometimes we all write about the same card. Once when I asked everyone to write about the same card and write what they could see in the picture, all but one of us described the tangible elements of the picture – sea, sand, sky, car, man, woman. But interestingly one person wrote solely about the emotions she could see being played out between the man and the woman in the picture. The differences in our responses to the cards and the ‘stories’ we devise make for interesting writing and stimulating discussions.

George: “I would like to climb up Dodd Fell because it is no longer covered in conifer trees. Perhaps I will see a red squirrel. I have never seen a red squirrel except on posters and in nature magazines. I would like to join the organisation relating to them. I also want to join Friends of the Earth and some similar organisations. This September I am going to start studying for a three-year degree course in Ecology and Environmental Protection at Lancaster University or the University of Cumbria.” [a photograph of a red squirrel]

**Objects,** either an eclectic assortment, e.g., a dolly peg, an evening purse, a compass, a perfume bottle and an ornamental box; or a themed collection, e.g., half a dozen pairs of gloves (including work gloves).

George: “The compass reminds me of wonderful walking days in the Lake District. It also reminds me that I need to buy a compass, and also a rucksack and some waterproof trousers.” [a compass]

George: “In the purse there is a pearl. It is a real one. It reminds me of days on the beach.” [an empty purse]

Nigel: “Rebecca was excited as she unwrapped the small parcel with which she had just been presented. Inside was a little house. She loved everything miniature and the gift appealed to her enormously. There was ivy growing up the walls and benches outside the front. It was just the sort of perfect little cottage that she imagined living in when she grew up. She wanted to keep a tea shop and this would be ideal. She picked up the house by its roof, which came off, revealing that as well as being a perfect miniature house it was a perfect little box. She knew immediately what she would use it for, she would keep her baby teeth in it. She had just lost her first one and knew that she would keep the rest. The house would make a wonderful place to keep them.” [a small box in the shape of a cottage]

**Photographs of people,** preferably doing something, e.g., sitting outside a café, sleeping, reading, making something. Writing about these can help the writer to look beyond their own life and problems. One way to use photographs of people is for each participant to choose a picture and then write about the person in the picture as if they knew them, which is what the man who wrote this did:

Peter: “My friend’s name is Jessica. She has red hair. She is a hairdresser and works all the hours God is prepared to give her. She knows all her customers and they all work for a living. After finishing work she goes to a disco with her female friends and she has a good laugh with her friends. The other day when she was working a woman came in the shop, broke down and cried. She said ‘Now that I’ve wised up I’m not prepared to waste any more years on that horrible husband.’ So my friend made her a cup of sweet tea and she calmed down.” [a quirky photograph of a young woman with scarlet hair who is holding a magnifying glass to one eye]

**Published poems,** e.g., we read two different poems aloud; discuss our reactions to them, which we prefer and why; then we each choose one poem, or a line from it, and write something in response.

The following was written in response to “The house is not the same since you left” by Henry Normal (Normal, 1993, p. 21):

Cate: “The poem suggests to me bereavement in the family possibly a man. The cooker is angry suggests that maybe it doesn’t get used as much now so it is angry at being left with no work to do. He used to watch the telly especially the football on Saturdays but not now, it stands switched off just catching the sun’s reflection from outside. What’s the point in washing up for one, who’s going to see the dirty pots
anyway? The curtains count the days since he last opened them and stood in front of the window. Nothing speaks to me in the house any more, it holds no interest for me know you are gone. The armchair shows your empty space, the space you once took up. The kettle initially constantly on when you first left now stands dormant. No-one comes any more and I can’t be bothered. I’m sure the plants will die too once I tell them you have gone. Your mess has gone from the bathroom. How I used to moan about the shaving scum marks around the wash basin and the toilet seat always being up. What I’d give to see that once again. And now it just stays the same and I only need to clean it once a week. The bedroom door stays shut, I just can’t face the memories. If I keep it shut then hopefully all the good times and memories will stay inside. But on a night I have to sneak in and weep, the sheets and pillows remind me of you so much. I wish you hadn’t gone.”

**Writing after a guided visualisation.** The following two pieces were written after a guided visualisation that started in a garden and ended on a mountain top. I find guided visualisation works best if I don’t use a written script when I am guiding the group through the visualisation. I suggest to people they might like to close their eyes during the visualisation part, but I bear in mind that not everyone will feel comfortable doing that. The main drawback to using visualisations is that they take quite a long time to do and a patient who arrives late to the group (as quite often happens) might either interrupt the visualisation and distract the others in the group, or miss it altogether and then not have any inspiration for the writing after the visualisation.

*George:* “I was in a beautiful garden with a fountain and the birds and butterflies. I walked out of the garden on to a path which led into a wood with oaks and other trees. The path was winding a lot and there was an obstacle on the path. I passed it on the left side and then the path started to slope upwards. It became very steep and then I turned and looked down back where I had come from. The scene was very beautiful. On the path there was someone who looked like Julie. She gave me a bottle of water to drink. The path became very steep and it became apparent that I was climbing a mountain. At the top Auntie Annie was there. I asked her why she was there and she replied that it was to reassure me.”

*Nigel:* “I am sitting by a burn that tumbles down from the hillside, passing under a wall and then winding on downhill. The meadow beyond the wall has just been mown and the smell is wafting toward me. There are roses in the garden, red ones, pink ones and white ones. There are birds singing all around. I get up and walk out of the gate across the meadow to the belt of trees beyond. It has been very windy in the last few days and one tree has blown down across the path. I climb over it and continue uphill. A pretty young woman is coming down the path in hiking boots. She stops at a bend in the path to admire the view, as do I. She proffers chocolate, Cadbury Dairy Milk, which I accept. Neither of us speak, we just stand and look at the view of the valley spread out below. Fortified by chocolate I press on up the hill feeling pain in my knees and pumping in my chest as I push on upwards. The hill is one of those annoying ones that has lots of false summits. However, eventually I reach the top. There is a man sitting by a cairn. He is contentedly looking, admiring the view. I look at it too. The sense of calm that seems to emanate from him suffuses me and all my worries are lifted. I can see my future is bright.”

‘**Sniff pots**’ – grass that has been freshly cut and crushed is a favourite. Smells are very evocative and this exercise is likely to bring out memories. The first time I used sniff pots was with two women in psychiatric intensive care. We all chose the cut grass pot to write about and the two patients both wrote about distant but happy memories of their families – one (who was unable to write so I scribed for her) related a childhood memory of Easter egg rolling in the park with her parents (who died many years ago) and siblings, and the other wrote about a happy memory with her brother who she has lost touch with because of her illness.

**Writing about yourself, or someone else, doing some sort of hobby or other activity** – either something you actually do (or used to do), or something you would like to do. In one session, at the suggestion of one of the patients, we did this exercise as a guessing game. We wrote obliquely, trying not to make it obvious what the activity was, and then read our pieces aloud while the rest of the group tried to guess the activity.

**Collaborative poetry,** e.g., writing a poem in a particular form such as this Kenning written in Spring 2011:
Spring
by Cate, Sally, Nigel, Jill and Carol
Day lengthener
Sun radiator
Snow melter
Earth warmer
Rain pourer
Puddle filler
Seed sprouter
Bud burster
Grass greener
Blossom bringer
Daffodil grower
Tulip kisser
Air cleaner
Life giver
Flesh warmer
Bunny breeder
Lamb springer
Bird singer
Life enhancer
Health promoter
Spirit raiser
Mood lifter
Music maker
Heart singer

Writing in a different ‘person’ or tense, e.g., writing about yourself in the third person, or writing about things that happened a long time ago, but in the present tense as if everything were happening right now. Writing about an experience in the third person can make you feel more detached and objective as you write.

Being adaptable
I believe it is vital to be flexible and adapt the planned programme, or even abandon it, depending on the group. I use open writing exercises so the writing produced can be developed according to individual preferences – whether that be some autobiographical writing, a poem, some descriptive or imaginative prose, or whatever. For example, Angela wrote a rhymed poem in every exercise where others in the group wrote unpolished prose. In another session Colin tried freewriting for the first time and later used what he had written as a starting point for song lyrics.

Sometimes a patient has something going on in their life that I can see would be a good thing for them to write about, e.g., I suggested to Betty that she write a letter from her future self, when she is well, to her small grandson to tell him how much she inspired her to get well. Betty’s daughter has put the letter away in a box until the little boy is old enough to read it. To give another example: I had a one-to-one session with a woman who told me part way through the session that her mother had just died, and that she had been unable to get out of hospital to see her mother before she died. She mentioned that she had happy memories of her mother. So, I abandoned the second writing exercise I had planned and suggested instead that she write about one of her happy memories, which she did. She said afterwards how surprised she was that she hadn’t cried when writing the memory about her mother and that she had found doing the writing comforting.

In any one session there could be one or two patients who have been to several of my groups and one or two newcomers. There can also be big variation in the writing skills and experience of the group members. So I try to choose writing exercises that are suitable for a relatively inexperienced newcomer, but different enough from previous weeks so the old hands don’t get bored. The exercises need to be
capable of being adapted at the last minute to suit the abilities and level of concentration of the group. They also need to provide inspiration and challenge to the very experienced writers who occasionally attend.

I might decide to take some picture postcards to a session. The selection of cards I choose to take will depend on what stage of recovery the patients are likely to be in, e.g., photographs of beautiful landscapes are a good choice for psychiatric intensive care. But even with a given set of cards, I use them differently depending on the group. If I have a mixed group in terms of level of concentration and confidence for writing, I will probably ask everyone to choose a card that appeals and suggest that they could either write to describe what they see in the picture or choose to be more imaginative and write a bit of a story. Where everyone in the group is fairly confident about writing (for example when I have worked with them for several weeks) I would take a different approach. Here’s an example: the group selects three cards and I decide on the order they will be used. For the first card we write for 2 minutes to describe what we see. For the second card we write what emotions the card inspires in us (again for 2 minutes). For the last card we each write the story we think the card is telling (for 10 minutes). Our stories, when we read them to the group, are always very different, which makes for an interesting and stimulating conversation. Other types of writing stimuli can be used flexibly too, e.g., objects, photographs of people, sniff pots.

**Homework**

Occasionally patients ask for homework, and even if they don’t, I offer handouts giving ideas for creative writing, freewriting and journals/diaries. If I feel it is appropriate, I encourage people to write a little each day and especially to write a journal. Sometimes I feel it would be good for an individual to do a particular kind of writing within or outside the group and I discuss this possibility with them. While some people might benefit from writing out their feelings and thoughts, others might feel calmed from writing descriptively, e.g., about the natural world. Where someone is able to express their thoughts clearly and perhaps dwells on their worries too much, I might suggest they could get some distraction and intellectual stimulation by writing from the imagination.

**Safety first**

Although I do not deliberately direct participants to write about traumatic events, writing exercises can nevertheless bring up painful thoughts or memories. So, I don’t rush off as soon as the session ends in case someone needs to talk or is upset and needs reassurance. I reassure where I feel able to, and contact a member of ward staff where appropriate.

When working in a mental health unit it is important to take appropriate precautions to safeguard yourself and the patients you work with. Before I start each session I collect an alarm, in case urgent assistance should be needed from qualified staff, and I talk to one of the nurses to find out whether there are any particular issues I need to be aware of while on the unit. I also regularly update my safety training. If I have any concerns about patients I raise them with ward staff immediately.

To continually improve my practice I write reflectively after almost every session and discuss anything I am unsure about in supervision meetings. Occasionally I use published methods or models of reflection in my journal (e.g., Johns, 1993; Bolton, 2010), but more often than not I just write down my thoughts in a fairly unstructured way, as in the following extract from my reflective journal.

**Extract from reflective journal**

**Retrospective note:** This session and several others at around the same time were longer than the scheduled hour because some of the participants were keen to have a longer session and include a coffee break, more writing, discussion of books, homework, etc.

**Present:** Carol, Nigel, Graham, Peter, Jill

**Activity 1: What kind of weather are you?** (used by permission of Gillie Bolton). This exercise went well. The patients all wrote positive things – sunshine on the hills, etc. I was the only one who wrote anything negative. Because I was feeling too hot I wrote that I was close, oppressive weather and that a thunderstorm was needed to clear the air.
Activity 2: Alpha write (Adams, 2011) We thought of four words beginning with A as a collaborative exercise then we did some freewriting for each one. I explained that this is a good exercise to use in your personal journal, picking the next letter in the alphabet each day.

Activity 3: Freewriting We did 2 minutes freewriting for each of the colours black, blue, green and yellow.

Reflections:

Graham came to the group for the first time today. He wrote relatively little owing to a lot of joint pain but he seemed to enjoy the writing and wrote thoughtfully and imaginatively. He was discharged the same day and so will not be coming to another session.

Jill has been coming to the group for several weeks now and seems at last to be participating a little more. But she still does not seem to me to enjoy the writing and doesn’t write much so I think she may not be getting much benefit from it.

Peter is usually hesitant about writing in the group and is fairly quiet. This time he wrote more confidently and seemed actually to enjoy the writing. I think he surprised himself by writing more imaginatively than he expected.

Nigel always writes well and fluently but I am struggling to help him work out what he needs to write about. He can express his thoughts and feelings about his illness very clearly and I feel would probably benefit from writing about topics other than his illness to give his thoughts a different direction. I spoke to him after the session about ‘flow’ (Csikszentmihalyi, 2008) and suggested he might do some writing about his ‘flow experiences’.

Graham and Peter engaged well with the session today, more so than I expected and I think more than they expected. I think they both enjoyed the writing exercises more than they expected too. However, I am not managing to really engage Jill with the sessions yet and need to give some thought to how I can do that: a one-to-one conversation with her might help if she would be willing.

I feel frustrated that I am not sure what kind of writing to recommend to Nigel. Sometimes writing seems to calm his anxiety somewhat, but some writing can make him more agitated. When he wrote once about his garden at home it set him off thinking that he would never be well again, living happily with his family and providing for them as he used to, which made him anxious and agitated.

Over the last few weeks the creative writing group has been the highlight of the week for Nigel, Cate, Sally and me. We have had some great discussions about writing, poetry and all sorts, and done lots of writing and sharing together. Cate and Sally were not at this session because they’ve been discharged, and I was conscious of missing them – which hasn’t happened to me before in writing group.

Conclusion

In my inpatient writing groups I have met many lovely people at a time when they are in great mental distress. I encourage them to write because I strongly believe that writing can be therapeutic and so help people in their recovery. Research supports this view (see Chapter 1) as does the feedback I receive from patients (see Ross, 2011). Writing is a powerful tool and I hope this chapter has given you some ideas if you are thinking of leading wellbeing writing groups or using writing to help your own wellbeing or recovery from illness.

Acknowledgements

I would like to thank my practice supervisor and the staff of both the units in which I work for their support and encouragement, and the patients who write with me, share with me and even make me coffee on occasion. I would especially like to thank those patients who have kindly consented for some of their writing to be published here, and Cate for contributing a whole article (Part 2 of this chapter).

Note

Patient names have been changed throughout this chapter but I have been consistent with names, e.g., Cate, Sally and Nigel in Part 1 are the same people as in Part 2.

References


**Recommended Reading**


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**Part 2 – The Creative Writing Group**

**Cate Anderson**

“aw, that sounds good,” said my friend Sally. “We can both go together.”

“What are you talking about?” I asked.

“Creative writing. It starts this Thursday,” she replied.

“Never heard of it, and I doubt I have a creative bone in my body – especially at the moment!”

But Sally insisted we give it a try, and plus it would pass a couple of hours in the afternoon. Sally was good at writing. She had shown me a piece of work she had done previously and it was good: it held your attention right until the last minute.
So Thursday afternoon arrived and I dutifully went to the group with Sally. We met the lovely Carol Ross who would be taking the group. Initially I actually felt quite nervous: what if they were better than me or I didn’t understand what was being asked of me? I would feel totally thick.

The group was quite small, with usually just three patients turning up most of the time, Sally, Nigel and I. Occasionally some other patients dipped in and out of the group. But three of us remained constant to the group with Carol.

After my initial reaction of being scared and worried about what the others would think it was amazing to see how my writing has changed over the weeks and how my mood and emotions affect the way I write. At the beginning Carol either gave us a picture or a word to write about – just whatever came into your head. It could just lead to other words or to a memory.

The first couple of weeks my mood was quite low and I had suicidal thoughts, and this was evident in my writing. For example: I chose to write about a picture of Striding Edge in the Lake District. First it started with a memory of completing that walk and the feeling of euphoria I had experienced on completing such a walk. I wrote about the fantastic view and the wonderful clear, fresh air. Then quite suddenly – just like my moods tended to do – the writing changed to quite dark thoughts about how now (because of my physical fitness, weight problem and lack of motivation) I wouldn’t be able to attempt the walk, never mind complete it. Suicidal thoughts then began to creep in – if I could reach the top and jump off then I most definitely would die and I wouldn’t be in this horrible mess.

As weeks passed and my condition started to improve my writing became more upbeat. It started to bring back memories, but these were happy memories – some that I hadn’t thought of in years. The writing became more enjoyable and after the sessions my mood always seemed lifted and lighter.

For a couple of weeks we looked at poems and I remembered that I enjoy poetry. I had poetry books at home which hadn’t been looked at in years, mainly because I always thought I didn’t have time. It was great to go home and find those books and bring them in. Nigel and Carol had excellent voices for reading poetry and it was lovely to hear poems read out loud.

Carol started asking us to do a little bit of homework as such each week, and homework suddenly started to be fun. It didn’t matter if I wasn’t very good: nobody was bothered and we all tried to support and encourage each other every week. Sometimes one of us may be feeling quite low, so we would try and do an activity that might help lift their mood. We started having a coffee break and at those times we would chat about anything that took our fancy – it usually ended up with a laugh.

Then one week Carol asked us, using a prompt sheet, to create a character. My character turned out to be a ferret. Then Carol asked us we if might be able to write a short story about our character. The idea of writing a short story and making up a character really inspired me. I used the Knowledge Exchange room to research ferrets on the Internet – because I didn’t know what baby ferrets are called, or where ferrets originated from. The biggest thing about this though was that I was quite excited about it. I was keen to go to the computer and further my knowledge and I really wanted to write a short story.

This was the first time in well over a year that I had had the motivation to do something and also to be interested in something other than thinking about work or family matters, or even harmful thoughts.

I am aware that lots of other things had been going on to help me achieve this, but creative writing really was the first thing I had got excited about in a long, long time. Thanks Carol!