

Poetry: A Tool to Induce Reminiscing and Creativity with Geriatrics

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This paper presents work done with low and moderately functioning geriatric patients at a short-term psychiatric hospital, in which poetry was used as a vehicle to induce reminiscing. It addresses the role of reminiscing with the elderly and presents the rationale and technique used in motivating these patients to create metered and rhymed poetry. It illustrates how poetry therapy can help the elderly organize experience while tapping creativity and how this process contributes to the immediate well-being of the patient by stimulating cognition, reducing isolation and enhancing self-esteem.

The geriatric patients with whom this paper is concerned were referred for short-term psychiatric treatment due to an array of illnesses, including organic brain impairment, depression, and adjustment disorders. These patients were, for the most part, cognitively depressed and socially withdrawn. A combination of medication, to alter the physiological imbalance, and milieu therapy, to stimulate interest and involvement in life, was employed during the 28 days typical of a hospital stay. In addressing depression, poetry therapy seems to contribute to a more positive affective state through its ability to enhance the present by emphasizing the past. In addressing organic brain impairment, where recent memory is frequently affected, poetry therapy utilizes the brain-impaired patients' strongest cognitive asset, his or her past memory.

In the care and treatment of the elderly, age theory, a view that suggests the final years of life are static, has gradually been supplanted by stage theory, a view that suggests the final stage of life

is the last stage in an ongoing process of continuing growth and development. According to Erikson,¹ it is the period when the developmental task of integrity, the coming together of all previous phases of the life cycle, is achieved. Expanding on this conceptual framework, Butler² introduced the mechanism of the "life review" or "reminiscing," which is characterized by a progressive return to consciousness of past experience. Butler states, "The major developmental task of old age is to clarify, deepen and find use for what one has already obtained in a lifetime of learning and adapting."

Research devoted to reminiscing with the elderly points to a positive relationship between ego integrity and reminiscing. Boylin et al.,³ in a study conducted with 41 institutionalized elderly veterans, found that individuals who reminisced scored higher on an ego integrity scale, even if the reminiscing was negative. In a study with 25 individuals, aged 79-90, McMahon and Rudick⁴ found that reminiscing seemed to enhance self-esteem and helped subjects deal with anxieties associated to aging. This study also disclosed that reminiscing is not related to intelligence or to intellectual deterioration. Liton & Olstein⁵ reported that reminiscing is particularly adaptive for the senile patient as it can reawaken the mental and emotional faculties and delay deterioration. In a study conducted with 36 female participants between the ages of 46 and 85, Fallo⁶ reported that the major effect of reminiscing appeared to be a reduction of negative mood. The findings suggest that reminiscing plays a part in avoiding anxiety and depression-producing aspects of the present and the future.

Poetry used in the therapeutic situation becomes a valuable tool in evoking memories. The language of poetry, rich with metaphor and replete with concrete words, is especially suited to enhancing consciousness. It does so by evoking

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imaginal responses of individuals to their past and present experiences. Memory studies⁷ have shown that concrete words are likely to evoke images and that large amounts of information become quickly available when stored as integrated images. Thus, the concrete language of poetry will activate holistic long-term memory images and their associative verbal descriptions, allowing memory to be tapped in a rich and expansive way.

As stated by Stainbrook,⁸ we all learn "either formally or informally, that poetry is a special statement about the human condition." The cultural authority attributed to the poem lays the ground work for individuals to surrender some control of their thinking to the organized experience portrayed in the poem. Constricted thinking and defensiveness give way to an "as if" involvement in the poem. This involvement enables the listener to connect to elements of the poet's experience that in some way match his or her own experience and provides the spark for further excavation of personal experience on the cognitive and affective level. To collect the emerging material, the products of the reminiscing, and to create a group poem is to further emphasize, validate and integrate the experience remembered, while raising it to the level of specialness inherent in the creation of a finished product. In this case, the poem. It also brings creativity into the group process. Rollo May⁹ has said, "Creativity draws on the innate facet of every man's existence, the will to live, for to create is in some sense to be born again." The creative energies called upon at a time in life when the elderly are facing all the limits endemic to old age can be life expansive and can work toward reducing the depression and isolation prevalent in this population.

THE POETRY THERAPY GROUP

The poems created in the poetry therapy sessions were group poems, that is each poem represented the combined effort of the whole group. Most of the patients did not have the dexterity, concentration or motivation to write; therefore, the therapist acted as transcriber. The average group lasted 1 hour. All patients on the unit were encouraged to join in the group, which took place in the lounge once a week. Because the treatment was short term, the group was constantly in flux, with new members joining and old members being discharged on a weekly basis.

Initial introductions were made and the purpose of the group was simply stated by the therapist. For example, "We are going to listen to

some poems and then talk about them. As we are talking, I will take some notes and we will make up our own poem out of what is said." It was necessary to present the goal in a nonthreatening way since the initial response to the idea of creating a poem is generally "I can't." In order to further reduce anxiety, the poem created the previous week, including the names of the participants, was read within the first few minutes of the group. This accomplished several things:

- 1) It offered a sense of continuity to ongoing members of the group.
- 2) It offered a sense of possibility and motivation to new members, as it presented them with verification that their peers were capable of the task.
- 3) It served to reinvolve previous contributors.

As the poem was read, the patients were invited to respond to questions related to the content of the poem. Individuals would try to remember who said what, and a playful atmosphere which encouraged participation was induced.

The members being thus engaged, poems for that day's group, the catalyst poems, were introduced. Several poems, organized around a theme and relevant to the life experiences of the participants, were read aloud. The literary merit of these catalyst poems is not important. The primary requirement is that they be intellectually and thematically suited to the members of the group. It was generally found that poems written by contemporaries and published in magazines for the elderly were the most appropriate. A suggested magazine is *Ideals*.¹⁰

The patients, their memories loosened by the catalyst poems, are asked to select a topic. This can be done by a simple question such as "Did you hear anything in the poems that reminded you of something from your life?" or "What can we talk about today?" By phrasing the question in this way, fears about "making a poem" are diffused. If a topic is not forthcoming, the therapist can make suggestions by focusing the group on images depicted in the poetry. The topics that generate the most productive responses are those that are represented by concrete objects rather than abstractions like happiness or love. One object, focused on and shared, can trigger a host of experiences and the attendant emotion. A button box, a hat, a jelly jar, a parade, or a locket are typical images incorporated in themes of poetry for the elderly.

Having chosen a topic or theme, the therapist again very simply asks questions about the con-

crete objects introduced in the poem. For example, "Did you ever have a favorite hat?" or "Who can tell us about a parade he marched in?" The responses generally take the form of "I remember . . ." As the patients take turns speaking, the therapist takes notes.

CHANGING PROSE INTO VERSE

Meter

The English language accommodates itself easily to the *da da, da da, da da, da da, da da*, of iambic pentameter. English is a language of stresses; most words are pronounced with a heavier emphasis on one syllable than on the others. By attending to these stresses, one can emphasize the rhythm in ordinary speech. For example:

My dog just died and so I feel alone,

read with an emphasis on stress becomes,

Mý dóg jušt diéd ańd só I feel ałońe.

Therefore, it is possible to take thoughts as they are presented in the patterns of everyday speech and read them back with an emphasis on stressed and unstressed words and syllables, thus converting the sentence into a metered line of poetry with iambic pentameter as the underlying foot. The content immediately receives importance because it takes on poetic form and, as the content becomes important, so does the individual who contributed it. Converting a sentence into a line of metered verse seems to offer a sense of mastery and comfort to the elderly. This may be explained by the tendency of the geriatric to regress to the early adaptive mechanism of rhythm. There is rhythm in the womb, in the sucking movements of nursing and in the nursery rhymes to which the infant responds, that soothe and relax. This adaptive mechanism, which offers comfort, manifests itself in later life in the physical behavior of many elderly, who can be observed rocking back and forth or rubbing their fingers rhythmically along a smooth surface or along the hem of a dress. By emphasizing the rhythms present in their language, one can tap into this adaptive mechanism.

In addressing the function of meter in poetry (the arrangement of words in rhythmic lines or verses) Turner and Poppel,¹¹ after studying the poetry of 80 different cultures, speak of the cultural universality of metered poetry. They suggest that the minute correspondence of poetry from widely different cultures points to an iden-

tical neurophysiological mechanism. They suggest that meter gives the brain a system of rhythmical organization and satisfies its demand for distinction and unambiguity.

Rhyme

When taking notes and reading the sentence back to the group, the therapist must be alert for words that will be easy to rhyme and attempt to position those words at the end of each line. Therefore, if a patient presents the sentence "I remember my mother baking bread in the kitchen," the therapist might want to read it back as "I remember my mother in the kitchen baking bread," since the end word, "bread" will be easier for the group to rhyme than "kitchen."

Having completed the first thought and started on the poem, the therapist presents the challenges of the poem: It must rhyme and it must make sense. To generate a rhyme, the therapist asks the group to contribute any word that rhymes with the end word of the first line (in our sample line, that word is "bread"). It is interesting to note how even the most stubborn, recalcitrant patient is unable to resist contributing if he has a rhyming word on the tip of his tongue. Rhyming is generally not difficult for the elderly, and the rhyming associations seem to come easily. This may be explained in part by a return in the elderly to early language acquisition patterns. Young children, when experimenting with language, are attuned to "making a lot out of a little" by combination.¹² They will generalize a new behavior or sound to everything in their present repertoire. This push to combination and variational efforts in the infant developing speech may produce such sounds as *ma/ba/da/pa* or *do/di/du* or *dede/deda*, all of which have an element of rhyme. The activation of this early pattern is a welcomed asset when, due to senility or organicity, the elderly have difficulty retrieving words. The search for the correct word takes the group down many paths through many gardens. Some are dead ends and others are orchards where the elderly pluck words and ideas from their past.

In our sample,

"I remember my mother in the kitchen baking bread"

the list of rhyming words generated were: red, sled, head, fed, dead, Ed, bed, spread, lead, fled. Working with the list of rhymed words, the therapist reads back the first completed line and the list so that the group members can associate to

them. The second challenge is then presented: The rhyme must make sense. In this way reality orienting can be enhanced and reinforced through peer interaction. It may be necessary to read the line and the list of words back several times as the members try out different rhymes and thoughts and discuss them. The therapist picks out contributions that have possibilities, reads them back with poetic emphasis, and asks for group consensus. In the example above, the rhyming word chosen was "head" and the couplet was completed:

Í rēmémber mý móthēr in̄ thē kitchēn bákīng
břead
Hēr pitch bläck háir wás piled in̄ bráids ūpon̄ hēr
hēad

At this point the group is fully engaged in the creative process and is sharing ideas and challenging the appropriateness of contributions. It becomes very important to the participants that facts be retained as presented, because once invested in the task of remembering, patients have an equal investment in accuracy and are quick to correct if you delete or confuse an integral part of their thought. On occasion, if a particular couplet was difficult to complete and a convenient but inaccurate phrase was substituted, the patients were given the choice of rejecting or accepting it. Invariably, the group chose to continue to work on the line rather than settle for a convenient statement that was not consistent with the experience they were relating. This seems to substantiate the view that the process was meaningful and was serving an integrative function as well as a creative one.

The two line stanza of the couplet is used for several reasons. Traditionally, it is the form used when a completed thought is expressed and when the statement is decisive. This form is particularly apt for the elderly because it is cognitively manageable. Each couplet contains a complete thought related to the general theme of the poem. This containment is conducive to keeping the members focused on one thought at a time, so that the procedure is not overwhelming for them. After completing the first couplet, the therapist invites further participation by asking questions about the topic in such a way as to stimulate memory, by focusing on the imagery introduced in the poem or on the imagery introduced by the patients' response to the poem. In this way the therapist helps expand the topic by drawing attention to "the little things" that are the containers of memory. Each couplet is completed in the same way and the poem is

read aloud in its progressive entirety before the introduction of each new couplet. This serves to further integrate the memory, sustain the theme, and involve the participants, since each time an individual's contribution is read aloud, that person, for that moment, is vital; he or she is an integral member of a working group.

When the therapist, attuned to the attention span and the energy of the group, senses it is time to end the poem, closure is achieved by suggesting the last couplet be a general statement about the activity. An example of a typical last couplet is:

Thōugh tīmes hāve chāngēd wē sōmetīmēs yēarn
fōr thē pást
Būt it is goōd tō knōw oūr mémories ālwāys lāst

Suggestions for a title are then discussed, and when a consensus is reached the completed poem is read aloud for the last time. Individuals often ask to have all the contributors' names read aloud in order to verify for themselves that their names will be included.

At times, there is a spontaneous round of applause after the poem is read as the participants acknowledge themselves and each other in their creation. The poem is then typed and distributed as patients often ask for their own copy, which seems to be a way of retaining and further integrating that part of themselves that has become special through the authority of the poem.

While I have found the rhymed poem to be the most satisfying for the participants, the poem can also be created in the form of free verse. This can be accomplished by attending to the stresses as they occur naturally in language and by breaking sentences into phrases so that a rhythmical pattern can be heard when the material is read aloud. Repetition is another poetic device that is familiar and easy to implement. Individuals, even those who have never read poetry, are generally familiar with it because they have read or heard it in the psalms. The repeated phrase acts as the "backbone" of the poem around which experience can be organized.

CONCLUSION

Poetry is an effective tool in inducing reminiscing in geriatric, psychiatric patients. Reminiscing serves to offer patients a means of acknowledging and accepting themselves in the continuity of time, and serves to promote positive affect by taking the focus off anxiety-producing aspects of the present and future. The concrete imagery of the poem serves to stimulate cogni-

tion. An emphasis on poetics, meter, rhyme, and form serves as a way of pleasurable organizing and sharing experience. The creative energies called upon in creating a group poem serve to reduce isolation as patients feed into each other's memories and connect to each other's experience. Self-esteem and ego integrity are enhanced as the poem, the finished product of the group's effort, is tangible evidence of the role each played in history.

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