## Top entry page

# **Writing Cures**

# Introduction

"Writing is a form of therapy; sometimes I wonder how all those who do not write, compose, or paint can manage to escape the madness, melancholia, the panic and fear which is inherent in a human situation." - **Graham Greene**.

Writing holds an incredibly important status as a form of cultural expression. As a means of passing on stories, messages and lessons from one generation to another, writing holds incredible power in human civilization. As an expressive modality too, writing has become important not only for humanity in general, but for the individual. Writing is a way for individuals to structure internal and difficult thoughts and feelings into their own narrative which they can then work through. In more recent years writing has come to be recognized, as Graham Greene suggests above, as a "form of therapy". Within the literature now, written disclosure has been empirically tested across a range of different populations both clinical and non-clinical, with the general consensus being that engaging in expressive writing does seem to be associated with a number of beneficial health outcomes. Since Pennebaker's (1986) introduction of the expressive writing paradigm, written disclosure tasks have been adapted over the years and are now an important part of many holistic, health and psychiatric interventions. From letter writing to blogging, it appears that there may be something in the "writing cure".

Below are a few resources to help you get started.



http://books.google.co.uk/bookshl=en&lr=&id=apBoAgAAQBAJ&oi=fnd&pg=PA417&dq=pennebaker+chung+2011&ots=72G7uwK4vT&sig=IRyQcHLzO\_FfUw3hkmIZPp8OEY8 (http://books.google.co.uk/bookshl=en&lr=&id=apBoAgAAQBAJ&oi=fnd&pg=PA417&dq=pennebaker+chung+2011&ots=72G7uwK4vT&sig=IRyQcHLzO\_FfUw3hkmIZPp8OEY8

This literature synthesis by Pennebaker & Chung (2011) is a great place to start. It gives a good outline of meta-analytic findings and clearly explains the mechanisms behind the expressive writing paradigm.

## Browse this...

Also, here is a link to the publications page of Pennebaker's website, a really useful place to go when studying this area:

http://homepage.psy.utexas.edu/HomePage/Faculty/Pennebaker/Reprints/index.htm (http://homepage.psy.utexas.edu/HomePage/Faculty/Pennebaker/Reprints/index.htm)

## Have a listen...

Radio 4 feature with Pennebaker - follow the link below.

http://www.bbc.co.uk/programmes/b01rrc11 (http://www.bbc.co.uk/programmes/b01rrc11)

# History

## A Snapshot of the Relevant Literature.



©2010 DEBBIE RIDPATH OHI & THERESE WALSH.

Although it is only in very recent history that the therapeutic value of writing has been empirically tested, there are numerous references to the expressive arts being used across ancient history in a healing capacity; there are reports even of the Egyptians encouraging those deemed mentally ill to engage in artistic activity (Malchiodi, 2013). Really though, it was after the psychological fallout of the WWI that expressive techniques began to be used in a more holistic approach to psychological recovery. As the psychoanalytic approach became more dominant, writing as a form of expression was used as an alternative, when clients were discussing issues which they were unwilling to relay verbally. Thereafter, there writings would be explored by the therapist for particular psychological themes.

In terms of the expressive writing therapies which are consistent with today however, the 1980's is really when expressive writing began to be investigated as a viable therapeutic technique.

#### The 1980's & The Birth of the Expressive Writing Paradigm

Pennebaker & Beall (1986) were first to employ the format now traditionally used when investigating expressive writing. Subjects were either in one of two groups - the expressive group or the neutral group. Whilst the neutral group wrote on neutral topics, the expressive group wrote on emotionally charged topics (i.e traumatic experiences in their life). The groups were told to write consecutively for 4 days. It was found that being in the expressive group was significantly associated with fewer physician visits in the following months. As a follow up, participants were asked to qualitatively indicate whether they thought the writing task had benefited them in any way; the response was "uniformly positive" (Adams, 2012). From this, Pennebaker's Expressive Writing Paradigm was replicated and reused in various ways in order to examine the potential health benefits of written emotional disclosure.

With regards to the mechanisms by which expressive writing may work there is a number of theories (discussed later in this wiki page) Aside from the more specific theories, Pennebaker & Segal (1999) said this about journal writing as a general explanation:

"Keeping a journal may facilitate the process of forming a narrative about experiences, as well as reinforce progress and support the change of maladaptive behaviors" (pg 1251, Pennebaker & Seagal, 1999)

Here, and indeed from the rest of the literature generally, it seems that thiis process of "forming a narrative" may serve to provide **perspective** and **distance** in relation to past events that individuals have endured.

#### A Proliferation of Studies

Following on from the initial studies conducted in the 1980's, the amount of literature looking at expressive writing jumped from a steady increase - 20 studies published by 1996 - to an explosion - 200 studies published by 2009 (Pennebaker & Chung, 2011). Why is there such an interest in this area of study? Well apart from the increasing evidence that writing holds a number of health benefits, expressive writing interventions are cost-effective, economically viable and non-invasive (Pennebaker, 2004). Following on from concerns raised by Mead et al. (2003) and reiterated by Frisina, Borod & Lepore (2004), that there were not enough randomized controlled studies, there has been a greater emphasis on RCTs in recent years. Ultimately, a range of physiological, psychological, social and behavioral health benefits have become associated with written emotional disclosure (Baikie & Willhelm, 2005). Research is now beginning to focus on different ways in which the Expressive Writing Paradigm can be adapted to different populations and looking specifically at where and when written emotional disclosure is and is not effective.

#### What do the meta-analyses say ?

Although there is an enormous collection of studies dedicated to the therapeutic benefits of writing, it is notable that within this particular area of research they range from the very high quality, to the very low quality. It is worth then having a quick look on what meta-analytic studies have to say on the subject.

#### Smyth (1998)

Based on studies using healthy participants, Smyth (1998) found that expressive writing was positively correlated with greater general health outcomes, with the strongest correlation being found between physiological and psychological outcomes.

#### Frisina, Borod & Lepore (2004)

Interestingly, this meta-analysis found that expressive writing yielded a greater benefit physiologically than it did psychologically. It did note however, that the small effect sizes for the psychological benefits could be related to small and heterogeneous samples used in some studies.

## Harris, (2006)

Harris (2006) found that whilst writing about stressful experiences was associated with a reduction in health care utilisations in <u>healthy samples</u>, this did not translate to clinical populations: including those suffering from psychiatric disorders.

#### Frattaroli (2006)

The largest, and perhaps the most rigorous meta-analysis of emotional disclosure (including written) Frattaroli (2006) included 146 studies of randomized emotional disclosure experiments. Her results indicated that, overall, written emotional disclosure was effective and was associated with a number of beneficial health outcomes.

As you can see, there is varying agreement about the overall effectiveness of expressive writing as a therapeutic technique. The section below goes into more detail about some of the health benefits that have been associated with the expressive writing paradigm in individual studies.

## **Benefits**

#### Physiological

Traditionally, the health benefits of engaging in expressive writing have been measured by observing health care utilization. Although Harris' (2006) meta-analysis did not find a significant relationship overall between written disclosure and health care utilisation, it has been suggested that actually the physiological benefits of EW interventions are GREATER than the psychological benefits (Frisina, Borod & Lepore (2004) Individually, there is a large number of studies which have reported a **decrease in physician** 



visits following participants engagement with expressive writing (see Chung & Pennebaker, 2011). The general health benefits associated with expressive writing are varied; raging from observed **decreases in blood pressure** (Davidson et al. 2002) to **improved liver and lung function** (Baikie & Willhelm, 2005) Outwith the physical health of those who are generally healthy, the expressive writing paradigm has also been found to have physiological benefits for those suffering from serious illnesses. By far the greatest proportion of the literature in this particular area is dedicated to **cancer patients**. Participating in regular EW interventions has been associated with a **decrease in severity of self reported somatic symptoms of the illness** (Stanton et al. 2002, Low et al, 2006, Milbury et al. 2014) and ,ultimately, has been associated with **greater quality of life outcomes** for those who survive the illness (Craft et al. 2013). In other areas, expressive writing has been positively correlated in **greater immune functioning generally** (Frattaroli, 2006) and with those suffering from **auto-immune disorders** (Rivkin et al, 2006)

Here is a short video illustration of expressive writing therapy adapted for cancer patients:

#### **Psychological Functioning and Well being**

There is a myriad of studies which support the idea that expressive writing can have a positive effect on psychological functioning both in clinical and non-clinical populations. As is reviewed by Smyth, Pennebaker and Arigo (2012) in their literature synthesis, studies have shown that participation in written disclosure exercises is correlated with a **reduction in distress, negative mood, perceived stress and depressive symptoms** whilst simultaneously being associated with an **increase in life satisfaction** (Smyth, Pennebaker and Arigo, 2012). With regards to expressive writing and its benefit to those with mental illness, findings have varied from study to study, although overall it has been found that EW is associated with **greater psycho-social functioning in both clinical and non-clinical populations** (Frattorili, 2006). Recent research has suggested that adapted EW interventions may be more successful, if for example, individuals are suffering from mood disorders (Baikie et al, 2012).As expressive writing disclosure is bound up with trauma management, you might expect for it to be particularly effective for those with PTSD. In actuality, there has been inconsistent evidence for expressive writing when integrated into PTSD treatment strategies, although more recent studies have indicated that it could have a positive effect in the case of PTSD if the emotional writing task is appropriately adapted (Smyth , Hockeymeyer & Tulloch, 2008) .

#### Behavioral

It has been suggested that, **actual self-reported changes in behavior may be less obvious** as individuals may not be aware of behavioral changes. Indicators of behavioral change have been noted though, most significantly in samples of college students where those in the expressive writing condition exhibited an increase in GPA in the following months (Cameron & Nicholls , 1998, Lumley & Provenzano, 2003). Other studies have noted that in a sample of university staff in the EW condition had a **decrease in absences** in the following months (Francis & Pennebaker, 1997). Spera et al (1994) even noted that senior professions in the EW condition who has lost their job **went on to find employment more quickly.** With regards to illness related behaviours such as, for example in those suffering from addictions, recent research has suggested that expressive writing is **associated with a decrease in addiction related behaviors** in a sample of drug dependent women (Meshberg-Cohen et al. 2013).

# **Types of Therapies**

## **Expressive Writing**

One of the key researchers into the effects of expressive writing on emotional disclosure is Pennebaker. His research has indicated that by expressing one's deepest emotions and thoughts on negative experiences through writing, may lead to an improvement in physical and mental. Further meta-analysis found that these effects are robust and have a similar effectiveness to outcomes from other interventions (Smyth, 1998).

## **Positive Writing**

Rather than writing about negative thoughts and experiences, as done through expressive writing, positive writing therapy focuses on intensely joyful experiences. Smyth's (1998) meta-analysis found there were similar health improvements in both positive writing and expressive writing interventions. Further studies have found that there are physical health benefits and enhanced psychological well-being after writing about "best possible future selves" (King, 2001) and increased positive mood with fewer health centre visits in intensely positive writing groups vs. control groups (Burton & King, 2004).

## Writing vs. Speaking

Writing therapies and interventions were initially used by Freud in psychoanalysis, although this eventually fell out use while the "talking cure" took over in popularity. Recently however, writing interventions have been utilised by therapists due to their low-cost and ability to be distributed to many clients easily.

It has been suggested that writing interventions are just as effective as "traditional" therapies. In 1991 Donnelly & Murray found that clients in both speaking and writing interventions reported a reduction in negative mood and increase in self-esteem. While expressive speaking and writing therapies about traumatic events have also been found to increase positive feelings about self, although both writing and speaking groups did report a negative mood immediately after each session, much like watching a sad film however, this passed and the overall effect was positive (Murray & Segal, 1994).

It has been found that there are no differences in effectiveness between 4 disclosure methods (talking to facilitator, talking to a passive listener, speaking alone, and writing) (Slavin-Spenny et al., 2011). Therefore arguing that it is not whether anyone is listening or going to read what is written, it is the process of dealing with emotions that causes the positive changes previously discussed.

However, the majority of the studies lack generalisability to clinical populations, participants were not actively seeking therapy and sessions were shorter than normally found in a clinical practice.



# **Current Therapies**

Despite differences is whether the therapy focuses on expressive or positive writing there are, as in verbal and speaking therapies, many other differences in the types of interventions available.

## **Cognitive Writing**

Cognitive writing is a structured form or writing therapy where the client is more conscious of what is being written than say in flow (Brand, 1979). Cognitive writing may also include aspects of expressive and positive writing. Burton & King (2004) found that writing about an Intensely Positive Experience (IPE) or Intensely Bad Experience (IBE) for 10-20 minutes every couple of days, including thoughts, feeling and emotions that were present, enhanced psychological wellbeing. The emotional tone of the intervention had little impact on the positive outcomes and King (2002) argued that as long as the individual is able to understand their emotional reactions and gain insight into their priorities then whether an IPE or IBE was written about had little influence.

## **Creative Writing**

Creative writing differs from cognitive writing in that rather than writing about a positive or negative experience, individuals write poems or stories. This assignment can be pre-structured, where specific instructions on the form and/or content is provided, or a free-writing assignment where no instructions are provided and individuals have a choice in how and what is written about (Mazza, 2003).

## Poetry Therapy



Poetry therapy is a subset of creative writing, and a form of expressive arts therapy which is becoming more popular in clinical settings due to its emphasis in emotional expressiveness (Rickett, Greive, & Gordon, 2011). Hyness & Hynes-Berry (1994) argue that poetry therapy allows individuals to express emotions, define ideas, look at assumptions, validate feelings, contextualise experiences and become aware of the impact of personal choices. The National Association of Poetry Therapy (NAPT) state that poetry therapy involves poetic and narrative techniques as well as bibliotherapy.

There are many similarities between psychotherapy and poetry therapy. Both involve metaphors, mental imagery and metalisation – the capacity to think about ones feelings. Poetry therapy provides a chance to make a 'second story' which may allow or assist patients in making sense of their experiences (Holmes, 2008).

In clinical settings, poetic therapeutic interventions have been found to produce a decrease in suppression of emotions and reduce feelings of anxiety in cancer patients (Bracegirdle, 2011). Poetry therapy is non-invasive, enjoyable and therapeutic and has been argued to be suitable for a wide range of interventions (Tegner et al., 2009).

# **Journal Writing**



As argued by Duncan, Miller & Sparks (2004) it is the aim of all therapies, no matter how diverse the treatments and style, that the clients ability for self-therapy is developed to the point they no longer need external support. Keeping a journal, diary or log focussing on the expression of emotions and attempting to understand internal motivations is often used both during and after therapy has finished. Journal writing is not simply for catharsis, and can provide a new insight and approach to difficult problems (Mazza, 2003). Wright (2003) argued that through journal writing, positive therapeutic effects are attributed to the client more than would be in a group therapy session. This has been supported by a case study which found a compassionate change and increase in wellbeing due to a newly developed ability to attribute compassion to "herself", while she was able to deal with negative emotions by working through them (Wrights, 2009).

## Blogging

With the growth of the internet, therapies have become more available to a larger number of people. Blogs, described as: "interactive, online journal similar to personal diaries that may contain personal videos and photographs" (Ko & Kou, 2008) and provide a space for catharsis (Nardi et al., 2004).

Due to the nature of the internet being an interactive space, there is a huge potential for social support, positive interactions and friendships due to the ability for "readership" (Miura & Yamashita, 2007). After natural disasters and deaths of significant public figures it has been found that online communities respond to each other's pain and offer one another support. Analysis of language used after the death of Princess Diana showed a higher level of collectivist phrases than individual "language", which gradually shifted back to "normal" over time (Stone & Pennebaker, 2002).

Active bloggers on MySpace felt a greater sense of belonging than non-blogging users and blogging has been found to increase measures of reliable alliance, enhance ones sense of wellbeing and tendency to count on others for assistance (Baker & Moore, 2008). Blogging has also showed significant positive changes in adolescents experiencing emotional and social difficulties (Boneil-Nissim & Barak, 2011).



## **Letter Writing**

Some therapist may suggest letter writing, where a client writes a letter either to themselves or to someone else, with the possibility of sending it, although sending the letter is rarely done. This allows the client to vent thoughts and feelings and tell the truth without concern about how these thoughts and feelings may upset the receiver or impact the relationship (Mazza, 2003).

# **Practical writing exercise**

It can be difficult knowing exactly where to start is you choose to engage in expressive writing as a coping mechanism. Below are the instructions that can help you to use expressive writing cures.

Initially there are steps that must be followed in order to fully benefit from writing about your innermost thoughts and feelings.

- It is important to find a peaceful space to write in, somewhere you are unlikely to experience any interruptions. Often before bed is the easiest time to do this
- You must write everyday for about 3 or 4 days. Set aside the same amount of time to write for. A minimum of 15 minutes is an appropriate amount.
- It is important not to overthink your writing. There is no need to worry about perfect punctuation or poor spelling: Writing continuously is the most important thing.
- Whether you choose to write about the same issue everyday or wish to explore a variety of concerns is entirely up to you.

## What should you write about?

Generally there is a large scope for what you should write about. Suggestions include, something that has been worrying you or has be frequenting your dreams. You may also choose to write about an issue you have often found yourself avoiding or an element of life that is holding you back. The **most important thing** is that you write about something that is important to you and evokes emotion. The aim of the exercise is for you to write about your deepest thoughts and feelings.

For more advice on how to undertake writing exercises successfully it is worth visiting Pennebaker's homepage - the leading researcher in expressive writing therapies.



(http://homepage.psy.utexas.edu/HomePage/Faculty/Pennebaker/Home2000/WritingandHealth.html)http://homepage.psy.utexas.edu/HomePage/Faculty/Pennebaker/Home20 (http://homepage.psy.utexas.edu/HomePage/Faculty/Pennebaker/Home2000/WritingandHealth.html)

For a visual illustration and detailed description of how this method is carried out, the following video may prove to be very beneficial.

# Why do writing cures work: The mechanisms behind the benefits

The use of expressive writing as a method of disclosure has been demonstrated to have great benefits for the well-being of oneself. While empirical research in the field has

implied that writing about both intensively positive and negative events in one's life can have the potential capacity for physical and psychological health improvements. Exactly why this phenomenon occurs however remains unclear, though several theories have been proposed that aim to uncover why writing about our life events can improve our wellbeing.

## The Inhibition Theory

This theory originally proposed by Pennebaker (1985) suggests that those individuals who intentionally inhibit their emotions in relation to negative life events may have poorer physical and psychological health due to the added stress placed on them that derives from actively holding back feelings. The idea follows that being forced to confront these feelings by writing about them, removes the added stress gained by initially inhibiting deep feelings (Pennebaker & Chung, 2011).

#### Does this theory explain the phenomenon?

While decreased stress is commonly associated with improved health, it is not clear that reduced inhibition is directly linked to decreased stress (Sloan & Marx, 2004). Moreover, research has suggested that benefits may be evident after expressive writing regardless of whether an individual has previously disclosed the feelings about the event to others (Greenberg & Stone, 1992). This evidence may incline one to reject the inhibition theory as a possible explanation, despite suggestions that reduced inhibition does improve well-being. Swanbon et al (2008) discovered that upon completion of an expressive writing task, gay men were more open than a control group about being homosexual, thus implying that this method of disclosure can reduce inhibition. Overall this theory is not generally considered to be a useful explanation for the healing power of writing cures, partly due to the experimental evidence and additionally because of the difficulties on measuring inhibition (Pennebaker & Chung, 2011).

#### The Exposure Model

Deriving from the classical conditioning methods of psychotherapy, this model suggests that individuals may become habituated to a trauma by expressively writing about it several times, and thus they may be able to change the emotions associated with that event (Pennebaker & Chung, 2011). For example, if fear is highlighted upon writing about a traumatic event then according to this theory, the fear will be reduced with increased exposure to these feelings (Foa & Kozak, 1986).

## Does this theory explain the phenomenon?

There is a large body of work that serves to explain how exposure to a traumatic event can improve well-being via expressive writing. Sloan et al (2005) conducted a study in which students were required to write about either the same traumatic experience or different traumatic experiences. Results of this study concluded that those who wrote repeatedly about the same experience displayed improved health improvements compared to others, suggesting that the exposure model may have a part to play in explaining why expressive writing proves to be successful. Not all evidence has been in favor of a habituation model as an explanation for why writing works. Kloss & Lisman (2002) discovered that when given an expressive writing task, anxiety surrounding the traumatic event increased after writing. Therefore, it is not clear that exposure to an event via writing is the best explanation for this phenomenon.

## **Cognitive Adaptive Theory**

This theory is based on the underlying principle that we all have models and schemas about the world that we believe to be true (Sloan & Marx, 2004). When we experience a traumatic event, our inner models about what we believe to be true are altered. In order to deal with this we must change our views about the trauma to align with the models we already possess (Horowitz, 1986). By accomplishing mastery over traumatic events, individuals may begin to achieve increased well-being (Taylor, 1983).

#### Does this theory explain the phenomenon?

In order to evaluate whether cognitive processing has been altered researchers often examine the change in emotive or negative words in the writing of participants, though ultimately this is a difficult concept to measure (Baikie &Wilhelm, 2005) and thus findings, are mixed (Sloan & Marx, 2004). In order to investigate whether the cognitive adaptive model could be supported researchers tested the appraisal of an event, claiming that positive change in appraisal would support a theory of cognitive adaption (Park & Blumberg, 2002). Evidence suggests that when asked to write expressively about a traumatic topic judgments of the event improves, thus potentially verifying the cognitive adaptive model. However this theory proves difficult to measure and results remain mixed. Furthermore it is unlikely that this theory is more justified in its explanation than previously suggested mechanisms.

#### So do we know why they work?

It is unclear exactly why the disclosure produced by writing techniques proves to be a successful method of improving physical and psychological well-being. No one theory has conclusive evidence in its favor and thus it is likely that it is a complex mix of elements derived from each theory that best help explain why this phenomenon occurs (Pennebaker, 2004). Recent research has moved towards investigating other contributing factors such as the meaningfulness of the writing (Schutte et al, 2012) and the importance of emotions in the disclosure (Krantz & Pennebaker, 2007), and it is possible that these factors alongside the theories discussed may explain why writing cures prove to be beneficial.

For an interesting review on the theories of writing cures, and an extensive list of the relevant literature, a note-worthy paper is listed below:

Sloan, D. M. and Marx, B. P. (2004), Taking Pen to Hand: Evaluating Theories Underlying the Written Disclosure Paradigm. *Clinical Psychology: Science and Practice*, 11: 121–137.

(http://onlinelibrary.wiley.com/doi/10.1093/clipsy.bph062/full)http://onlinelibrary.wiley.com/doi/10.1093/clipsy.bph062/full (http://onlinelibrary.wiley.com/doi/10.1093/clipsy.bph062/full)

## References

Adams, K. (2013). Expression and Reflection: Toward a New Paradigm in Expressive Writing. Expressive Writing: Foundations of Practice, 1.

Baker, J. & Moore, S. (2008). Blogging as a Social Tool: A Psychosocial Examination of the Effects of Blogging, Cyberpsychology & Behavior , 11, 747-749.

Baikie, K., A., Wilhelm, K., (2005) Emotional and physical health benefits of expressive writing. Advances in Psychiatric Treatment (11), 338-346.

Baikie, K. A., Geerligs, L., & Wilhelm, K. (2012). Expressive writing and positive writing for participants with mood disorders: An online randomized controlled trial. *Journal of affective disorders*, 136(3), 310-319.

Boniel-Nissim, M., & Barak, A. (2011). The Therapeutic Value of Adolescents' Blogging About Social-Emotional Difficulties. Psychological Services, 11, 1541-1559.

Bracegirdle, C. (2011). Writing poetry: Recovery and growth following trauma. Journal of Poetry therapy, 24, 79-91.

Brand, A.G. (1979). The uses of writing in psychotherapy, Journal of Humanistic Psychology, 19(4), 53-72.

Burton, C.M., & King, L.A. (2004). The health benefits of writing about intensely positive experiences. Journal of Research in Personality, 38, 150-163.

Cameron, L. D., & Nicholls, G. (1998). Expression of stressful experiences through writing: Effects of a self-regulation manipulation for pessimists and optimists. *Health Psychology*, 17(1), 84.

Craft, M. A., Davis, G. C., & Paulson, R. M. (2013). Expressive writing in early breast cancer survivors. Journal of Advanced Nursing, 69(2), 305-315.

Davidson, K., Schwartz, A. R., Sheffield, D., et al (2002) Expressive writing and blood pressure. In The Writing Cure: How Expressive Writing Promotes Health and Emotional

Well-being. Washington, DC: American Psychological Association.

Donnelly, D. A., & Murray, E. J. (1991). Cognitive and emotional changes in written essays and therapy interviews. Journal of Social and Clinical Psychology, 10, 334-350.

Duncan, B. L., Miller, S. D., & Sparks, J. A. (2004). The heroic client: A revolutionary way to improve effectiveness through client-directed, outcome-informed therapy. John Wiley & Sons.

Foa, E., B., Kozak, M., J., (1986). Emotional Processing of Fear: Exposure to Corrective information. Psychological Bulletin (99), 20-35.

Francis, M. E., & Pennebaker, J. W. (1992). Putting Stress into Words: The Impact of Writing on Physiological, Absentee, and Self-Reported Emotional Well-Being Measures. American Journal of Health Promotion, 6(4), 280-287

Frattaroli.J.(2006).Experimental disclosure and its moderators: A meta-analysis., Psychological Bulletin, 132, 823-865.

Frisina, P.G., Borod, J.C., & Lepore, S.J. (2004). A meta-analysis of the effects of written emotional disclosure on the health outcomes of clinical populations. *The Journal of Nervous and Mental Disease*, 192, 629-634.

Harris, A. H. (2006). Does expressive writing reduce health care utilization? A meta-analysis of randomized trials. Journal of consulting and clinical psychology, 74(2), 243.

Holmes, J. (2008). Mentalisation and metaphor in poetry and psychotherapy. Advances in Psychiatric Treatment, 14,167–171.

Hynes, A., & Hynes-Berry, M. (1994). Biblio/poetry therapy the interactive process: A handbook. St. Cloud, MN: North Star Press.

King, L.A., 2001. The health benefits of writing about life goals. Personality & Social Psychology Bulletin 27 (7), 798-807.

King, L. A. (2002). Gain without pain: Expressive writing and self-regulation. Washington: American Psychological Association.

Kloss, J. D., & Lisman, S. A. (2002). An exposure-based examination of the effects of written emotional disclosure. British Journal of Health Psychology, 7(1), 31-46.

Ko, H. & Kou, F. (2008). Can Blogging Enhance Subjective Well-Being Through Self-Disclosure? Cyberpsychology & Behavior, 12, 75-79.

Krantz, A.M., Pennebaker, J.M., (2007). Expressive Dance, Writing, Trauma, and Health: When Words have a Body. Whole Person Healthcare Volume 3: The Arts and Health. 201-229.

Low, C. A., Stanton, A. L., & Danoff-Burg, S. (2006). Expressive disclosure and benefit finding among breast cancer patients: mechanisms for positive health effects. *Health Psychology*, 25(2), 181.

Lumley, M. A., & Provenzano, K. M. (2003). Stress management through written emotional disclosure improves academic performance among college students with physical symptoms. *Journal of Educational Psychology*, 95(3), 641.

Malchiodi, C. A. (Ed.). (2013). Expressive therapies. Guilford Publications.

Mazza, N. (2003). Poetry therapy: theory and practice. New York: Brunner-Routledge.

Meads, C., Lyons, A. C., & Carroll, D. (2003). The impact of the emotional disclosure intervention on physical and psychological health: A systematic review. University of Birmingham, Department of Public Health and Epidemiology.

Meshberg-Cohen, S., Svikis, D., & McMahon, T. J. (2013). Expressive Writing as a Therapeutic Process for Drug Dependent Women. Substance Abuse, (just-accepted).

Milbury, K., Spelman, A., Wood, C., Matin, S. F., Tannir, N., Jonasch, E., ... & Cohen, L. (2014). Randomized Controlled Trial of Expressive Writing for Patients With Renal Cell Carcinoma. *Journal of Clinical Oncology*, JCO-2013.

Miura, A. & Yamashita, K. (2007). Psychosocial and social influences on blog writing. Journal of Computer Mediated Communication, 12, 1452–71.

Murray, E.J. & Segal, D.L. (1994). Emotional Processing in Vocal and Written Expression of Feelings About Traumatic Experiences. Journal of Traumatic Stress, 7, 391-405.

Nardi, B., A., Schiano, D., J., Gumbrecht, M., et. al. (2004). Why we blog. Communications of the Association for Computing Machinery, 47, 41–6.

Pennebaker, J. W. (1985) Traumatic experience and psychosomatic disease. Exploring the roles of behavioural inhibition, obsession, and confiding. *Canadian Psychology*, (26), 82–95.

Pennebaker, J.W. & Beall, S.K. (1986). Confronting a traumatic event: Toward an understanding of inhibition and disease. Journal of Abnormal Psychology, 95, 274-281.

Pennebaker, J.W., & Susman, J.R. (1988). Disclosure of traumas and psychosomatic processes. Social Science & Medicine, 26, 327-332

Pennebaker, J. W., & Seagal, J. D. (1999). Forming a story: The health benefits of narrative. Journal of clinical psychology, 55(10), 1243-1254.

Pennebaker, J. W. (2004a). Theories, therapies, and taxpayers: On the complexities of the expressive writing paradigm. *Clinical Psychology: Science and Practice*, *11*(2), 138-142.

Pennebaker, J.W., Chung, C.K., (2011). Expressive Writing: Connections to Physical and Mental Health. Oxford Handbook of Health Psychology. New York: Oxford University Press.

Rickett, C., Greive, C. & Gordon, J. (2011). Somethingto hang my life on : the health benefits of writing poetry for people with serious illnesses. *Australasian Psychiatry*, 19, 265-268.

Rivkin, I. D., Gustafson, J., Weingarten, I., & Chin, D. (2006). The effects of expressive writing on adjustment to HIV. AIDS and Behavior, 10(1), 13-26.

Schutte, N.S., Searle, T., Meade, S., Dark, N.A., (2012) The Effect of meaningfulness and Integrative Processing in Expressive Writing on positive and Negative Affect and Life Satisfaction. *Cognition and Emotion*. 26 (1), 144-152.

Slavin-Spenny, O.M., Cohen, J.L., Oberleitner, L.M. & Lumley, M.A. (2011). The Effects of Different Methods of Emotional Disclosure: Differentiating Post-Traumatic Growth from Stress Symptoms. Journal of Clinical Psychology, 67, 993-1007.

Sloan, D. M., & Marx, B. P. (2004). Taking pen to hand: Evaluating theories underlying the written disclosure paradigm. *Clinical Psychology: Science and Practice*, *11*(2), 121-137.

Sloan, D. M., Marx, B. P., & Epstein, E. M. (2005). Further examination of the exposure model underlying the efficacy of written emotional disclosure. *Journal of Consulting and Clinical Psychology*, 73(3), 549.

Spera, S.P., Buhrfeind, E.D., & Pennebaker, J.W. (1994). Expressive writing and coping with job loss. Academy of Management, Journal, 37(3), 722-733.

Smyth, J.M. (1998). Written emotional expression: Effect sizes, outcome types, and moderating variables. Journal of Consulting & Clinical Psychology, 66, 174-184.

Smyth, J. M., Hockemeyer, J. R., & Tulloch, H. (2008). Expressive writing and post-traumatic stress disorder: Effects on trauma symptoms, mood states, and cortisol reactivity. *British Journal of Health Psychology*, 13(1), 85-93.

Smyth, J. M., Pennebaker, J. W., & Arigo, D. (2012). 8 What Are the Health Effects of Disclosure? Handbook of health psychology, 175.

Stanton, A. L., Danoff-Burg, S., Sworowski, L. A., Collins, C. A., Branstetter, A. D., Rodriguez-Hanley, A., ... & Austenfeld, J. L. (2002). Randomized, controlled trial of written emotional expression and benefit finding in breast cancer patients. *Journal of Clinical Oncology*, 20,4160-4168.

Stone, L. D., & Pennebaker, J. W. (2002). Trauma in real time: Talking and avoiding online conversations about the death of Princess Diana. *Basic and Applied Social Psychology*, 24(3), 173-183.

Taylor, S. E. (1983). Adjustment to threatening events: A theory of cognitive adaptation. American psychologist, 38(11), 1161.

Tegnér, I., Fox, J., Philipp, R., & Thorne, P. (2009). Evaluating the use of poetry to improve well-being and emotional resilience in cancer patients, *Journal of Poetry Therapy*, 22, 121-131.

Wright, J.K. (2003) Five Women talk about work-related brief therapy and therapeutic writing. Counselling and Psychotherapy Research, 3, 204-209.