

The Effect of Poetry Therapy on Psychological Outcomes: A Systematic Review

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ABSTRACT

Poetry therapy engages mental health clients to evoke emotional expression through poetic techniques and cognitive skills. It belongs to the class of expressive arts therapy. Notably, the fragmented body of academic literature provides evidence on the effectiveness of poetry therapy on psychological outcomes for multiple populations. The current systematic review has evaluated the effect of poetry therapy on psychological outcomes. Within a time frame of a decade (2016 - 2026) a complete study search spanning Scopus, Web of Science, and Google Scholar were undertaken. A combination of keywords spanning both poetry therapy and mental health was employed during the searches. Studies reporting psychological outcomes and using poetry therapy interventions were included. The PRISMA framework was utilized in the selection process and the data were collated and synthesized in a narrative form. A total of ten studies were included, comprising randomized controlled trials, quasi-experimental studies, and a case study. Evidence from all studies shows that poetry therapy is beneficial for the psychological well-being of study participants irrespective of the study sample. By far, anxiety was the most reduced symptom post therapy, followed by depression and PTSD. The positive effect of poetry therapy was evident among the studied clinical populations, which consisted of individuals suffering from acute myocardial infarction, cancer, and PTSD, as well as the studied non-clinical populations, comprising students and adolescents. Both standalone and combined poetry therapy interventions were effective, and even short-duration interventions (e.g., four sessions) demonstrated significant benefits. However, variability in study design, intervention formats, and outcome measures was noted. The results suggested that poetry therapy was a promising flexible intervention for addressing the majority of psychological outcomes. Despite encouraging findings, further high-quality randomized controlled trials with standardized methodologies are needed to strengthen the evidence base and support broader clinical application.

Keywords: Poetry Therapy, Psychological, depression, Anxiety, PTSD

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Introduction

Mental health disorders such as depression, anxiety, post-traumatic stress disorder (PTSD), and stress-related conditions continue to represent a major public health challenge worldwide. The prevalence of psychological disorders has increased considerably in recent decades, affecting individuals across different age groups, cultures, and socioeconomic conditions. These conditions not only impair emotional functioning, but also negatively influence cognitive performance, interpersonal relationships, occupational functioning, and overall quality of life (1). In contemporary societies, the burden of psychological distress has become even more complex due to the interaction of social isolation, technological dependency,

academic pressure, chronic illness, and traumatic experiences. Emerging evidence further demonstrates that psychological suffering is multidimensional and intertwined with digital lifestyles, social disconnection, and existential concerns, all of which contribute to emotional dysregulation and reduced well-being (2). Despite substantial advances in psychopharmacology and psychotherapy, many individuals continue to experience persistent symptoms, treatment resistance, limited access to mental health care, or reluctance toward conventional therapeutic interventions.

Traditional psychiatric and psychological interventions, although effective for many individuals, are often associated with barriers such as stigma, financial costs, cultural incongruence, and inadequate accessibility. Pharmacological treatments may also produce adverse side effects, long-term dependency concerns, or incomplete symptom remission. Even innovative biomedical approaches designed for neurological and psychiatric treatment require specialized delivery systems and may not fully address emotional expression and meaning-making processes (3). Consequently, there has been increasing attention toward complementary and integrative therapeutic approaches capable of addressing emotional suffering through more accessible, humanistic, and creative modalities. Within this context, expressive arts therapies have emerged as promising interventions for promoting emotional healing, psychological resilience, and self-expression.

Poetry therapy is one of the most distinctive forms of expressive arts therapy. This therapeutic approach utilizes reading, writing, reciting, and discussing poetry as mechanisms for emotional exploration and psychological transformation. Poetry therapy operates on the assumption that poetic language possesses symbolic, metaphorical, and narrative properties capable of facilitating emotional catharsis, self-awareness, and cognitive reframing. Through poetry, individuals may articulate difficult emotions that are otherwise inaccessible through ordinary discourse, thereby creating opportunities for psychological insight and emotional integration (4). In addition, poetry provides a safe symbolic distance through which painful experiences can be examined without overwhelming the individual. This symbolic mediation may be particularly beneficial for trauma survivors, individuals with chronic illness, and persons experiencing emotional suppression or existential distress.

The theoretical foundations of poetry therapy have expanded substantially in recent years. Contemporary frameworks emphasize that poetry functions not only as an artistic medium but also as a linguistic and psychological structure capable of reorganizing emotional experiences. Trebes proposed a triadic framework involving symbol, space, and time in poetry therapy, arguing that poetic expression creates a transitional psychological space in which traumatic memories, fragmented identity experiences, and emotional conflicts can be reconstructed into coherent narratives (5). Such frameworks suggest that poetry therapy may facilitate emotional regulation by enabling individuals to externalize internal experiences and reinterpret them within meaningful symbolic systems. The integration of metaphor, rhythm, imagery, and narrative sequence may therefore contribute to both cognitive restructuring and affective processing.

The growing interest in poetry therapy has been accompanied by increasing empirical investigation regarding its effectiveness for diverse psychological outcomes. A recent systematic review and meta-analysis highlighted the therapeutic role of poetry in reducing emotional distress and improving mental health indicators across multiple populations (6). The findings of this growing body of literature suggest that poetry therapy may contribute to reductions in depression, anxiety, stress, hopelessness, loneliness, and PTSD

symptoms while simultaneously enhancing psychological well-being, resilience, and emotional regulation. Importantly, poetry therapy appears to possess substantial flexibility because it can be delivered individually or in group settings, as a standalone intervention or integrated within broader therapeutic programs.

One of the most important contemporary applications of poetry therapy involves addressing loneliness and social isolation. Emotional isolation has emerged as a significant psychological concern globally, particularly among vulnerable populations such as older adults, individuals with chronic illness, and socially marginalized groups. Evers and Dam conceptualized poetry therapy as a multilevel intervention capable of reducing loneliness by fostering emotional connection, social communication, and shared meaning-making processes (7). Poetry may therefore function not only as an intrapsychic therapeutic mechanism but also as a relational and interpersonal intervention capable of strengthening social belonging and emotional intimacy.

Research investigating poetry therapy in educational and non-clinical populations has also produced encouraging findings. Park and colleagues demonstrated that group poetry therapy significantly reduced stress and anxiety while improving ego-resilience and psychological well-being among nursing students (8). These findings are particularly important because university students frequently experience academic stress, emotional exhaustion, and psychological vulnerability associated with competitive educational environments. Poetry therapy may provide students with opportunities for emotional expression, stress relief, and reflective self-awareness, thereby functioning as both a preventive and developmental intervention.

The effectiveness of poetry therapy has also been extensively examined among individuals experiencing trauma-related symptoms and medical illnesses. Cardiovascular disease patients, particularly those who experience myocardial infarction, often report severe anxiety, fear of death, intrusive thoughts, and post-traumatic stress symptoms following hospitalization. Mirzaee and colleagues reported that poetry therapy significantly reduced PTSD symptoms among myocardial infarction patients (9). Similarly, poetry therapy interventions were associated with reduced anxiety levels among patients with myocardial infarction in subsequent research (10). Additional evidence demonstrated that poetry therapy effectively reduced both anxiety and PTSD symptoms in cardiac patients recovering from myocardial infarction (11). These findings suggest that poetry therapy may facilitate emotional adaptation during periods of severe medical stress and psychological vulnerability.

The application of poetry therapy has expanded beyond cardiac populations to include oncology settings and chronic illness management. Women diagnosed with breast cancer frequently experience substantial psychological distress involving anxiety, depression, uncertainty, fear, and existential suffering. Daboui and colleagues investigated Masnavi-based poetry therapy among women with breast cancer and found significant reductions in anxiety, depression, and stress following intervention (12). The incorporation of culturally meaningful poetic forms such as Masnavi may enhance emotional engagement and therapeutic resonance within specific cultural contexts. These findings indicate that poetry therapy may represent a culturally adaptable intervention capable of addressing emotional suffering among patients confronting life-threatening illnesses.

Similarly, poetry therapy has demonstrated effectiveness among patients with chronic kidney disease undergoing hemodialysis. Hemodialysis patients often experience hopelessness, depression, social isolation,

and emotional exhaustion due to the chronic and restrictive nature of treatment. Çakmak and colleagues reported that poetry therapy significantly reduced hopelessness, loneliness, and depression among hemodialysis patients (13). Such findings reinforce the idea that poetry therapy may address not only symptom reduction but also existential and interpersonal dimensions of suffering.

Childhood anxiety and developmental emotional difficulties also represent important areas for poetry therapy intervention. Amini and Pashmdarfard examined the effects of poetry and rhythmic movement therapy in a child with myelomeningocele and reported meaningful reductions in childhood anxiety (14). The combination of poetry with movement-based interventions may enhance emotional engagement and sensory integration among children, particularly those experiencing developmental or neurological challenges. These findings suggest that poetry therapy possesses adaptability across developmental stages and may be integrated with other expressive modalities.

In recent years, increasing attention has been directed toward poetry therapy for trauma survivors and individuals with PTSD. Trauma often disrupts narrative continuity, emotional expression, and self-coherence, making verbal disclosure particularly challenging. Poetry therapy may provide symbolic and metaphorical pathways through which traumatic experiences can be processed indirectly and safely. Naz and colleagues demonstrated significant reductions in PTSD symptoms among female trauma survivors following poetry therapy interventions (15). Likewise, Beiranvand and colleagues found that cognitive self-compassion interventions emphasizing poetry therapy improved psychological well-being and reduced PTSD symptoms among women (16). These studies collectively support the notion that poetry therapy may facilitate trauma processing through emotional expression, self-compassion, and symbolic reconstruction of painful experiences.

Adolescence represents another critical developmental period characterized by heightened emotional sensitivity, identity formation, and vulnerability to depression and anxiety. Contemporary adolescents are increasingly exposed to academic pressures, social comparison, digital overstimulation, and emotional isolation, all of which may increase psychological distress. Ouyang and colleagues investigated poetry therapy grounded in psychological theory among adolescents with depression and reported improvements in depressive symptoms (17). Similarly, Yang and Zheng demonstrated that CBT-based poetry therapy promoted positive psychological functioning among Chinese adolescents (18). These findings suggest that poetry therapy may provide adolescents with developmentally appropriate opportunities for emotional articulation, self-reflection, and cognitive-emotional integration.

Despite the promising findings reported across diverse studies, the literature on poetry therapy remains fragmented and methodologically heterogeneous. Existing studies vary considerably regarding intervention duration, session structure, participant characteristics, therapeutic frameworks, and outcome measures. Some studies utilize poetry therapy as a standalone intervention, whereas others integrate it within broader therapeutic or pharmacological programs. Variability also exists regarding measurement instruments used to assess depression, anxiety, PTSD, stress, and psychological well-being. Such heterogeneity complicates direct comparison of findings and limits the ability to establish standardized evidence-based guidelines.

Another important limitation concerns the geographical concentration of existing research. A substantial proportion of poetry therapy studies have been conducted in Asian and Middle Eastern contexts, including Iran, China, Pakistan, Turkey, and South Korea. Cultural familiarity with poetry, metaphorical expression,

and literary traditions may influence participant engagement and intervention effectiveness. Therefore, questions remain regarding the generalizability of findings across different cultural and linguistic contexts. Furthermore, many studies involve relatively small sample sizes, quasi-experimental designs, or short intervention periods, thereby limiting the strength of causal conclusions.

Although systematic reviews and meta-analyses have begun to synthesize portions of the literature, there remains a need for updated and comprehensive examination of poetry therapy across multiple psychological outcomes and populations. In particular, understanding whether poetry therapy demonstrates consistent effectiveness across clinical and non-clinical populations, standalone versus integrated interventions, and short-term versus long-term programs remains essential for informing future clinical practice and research. Moreover, identifying the psychological domains most responsive to poetry therapy may contribute to the development of more targeted intervention models.

Given the increasing global interest in integrative mental health interventions and the growing empirical evidence supporting expressive therapies, a comprehensive synthesis of poetry therapy research is both timely and necessary. Therefore, the aim of the present study was to systematically review the existing literature on the effectiveness of poetry therapy in improving psychological outcomes, including depression, anxiety, PTSD, stress, and psychological well-being, across clinical and non-clinical populations.

Methods and Materials

A systematic literature search was conducted to identify relevant studies examining the effects of poetry therapy on psychological outcomes. The search was performed across three major electronic databases: Scopus, Web of Science, and Google Scholar. The search strategy combined keywords related to poetry therapy and mental health outcomes using Boolean operators (AND, OR). The primary search terms included:

- “Poetry therapy” OR “poetry intervention” OR “expressive writing”
- AND “depression” OR “anxiety” OR “stress” OR “PTSD” OR “psychological well-being” OR “mental health”

The search was limited to studies published between 2016 and 2026 to ensure inclusion of recent and relevant evidence. Reference lists of selected articles were also manually screened to identify additional eligible studies.

Titles and abstracts were initially screened to remove irrelevant studies, followed by full-text assessment of potentially eligible articles. Duplicate records were identified and removed prior to screening. A PRISMA flow diagram was used to illustrate the process of study identification, screening, eligibility assessment, and final inclusion (Figure 1).

Studies were included in this systematic review if they involved human participants from either clinical or non-clinical populations and employed poetry therapy as a primary or core component of the intervention. Eligible studies were required to report at least one psychological outcome, such as depression, anxiety, stress, post-traumatic stress disorder (PTSD), or psychological well-being. Only empirical studies, including randomized controlled trials, quasi-experimental designs, and controlled clinical trials, were considered for inclusion. Furthermore, studies were included only if they were published in English and full-text versions were accessible.

Studies were excluded if they were review articles, meta-analyses, theoretical papers, or conference abstracts. Case reports were generally excluded due to limited methodological rigor, although exceptions were considered based on relevance and data quality. Studies were also excluded if poetry therapy was not clearly defined or was not a central component of the intervention, or if its effects could not be distinguished from other co-interventions. In addition, studies that did not report relevant psychological outcomes or were duplicate publications were removed from the review.

Relevant data were extracted from each included study using a standardized extraction table. Due to heterogeneity in study designs, populations, interventions, and outcome measures, a narrative synthesis approach was adopted rather than a meta-analysis. The results were organized thematically based on psychological outcomes and study characteristics.

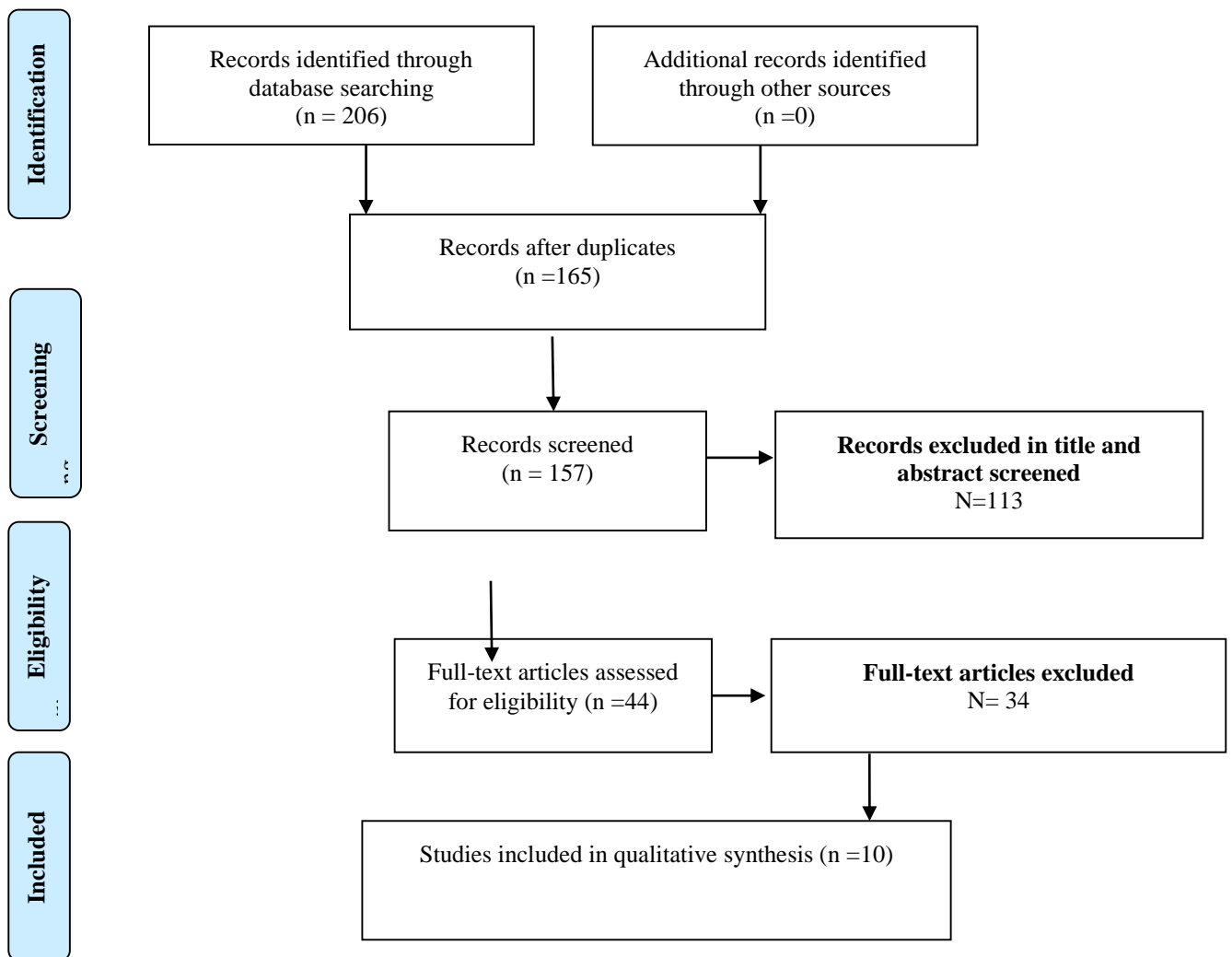


Figure 1 :Diagram of Study Selection Process

Findings and Results

The findings of this systematic review demonstrated that poetry therapy had positive effects across multiple psychological outcomes. The reviewed studies consistently reported reductions in depression, anxiety, PTSD symptoms, stress, hopelessness, and emotional distress, alongside improvements in psychological well-being and resilience. Although the magnitude of outcomes varied according to population

type, intervention structure, and methodological design, the overall direction of findings supported the therapeutic value of poetry-based interventions.

Depression

Depression was one of the most frequently assessed outcomes among the included studies. Evidence from clinical and adolescent populations demonstrated that poetry therapy was associated with meaningful reductions in depressive symptoms. Improvements were observed among women with breast cancer, hemodialysis patients, and adolescents with depression. These findings suggest that poetry therapy may function effectively across different forms of emotional suffering and medically vulnerable populations.

Despite the generally positive findings, variability was observed in the instruments used to assess depressive symptoms. Some studies employed standardized psychological scales such as the DASS-21 and Self-Rating Depression Scale, while others used broader emotional distress indicators. This methodological variability limited direct comparison of effect sizes across studies. Nevertheless, the consistency of symptom reduction across different intervention formats and populations indicated that poetry therapy may represent an effective supportive intervention for depression-related symptoms.

Anxiety

Anxiety emerged as the most consistently improved psychological outcome across the reviewed studies. Significant reductions in anxiety were observed among nursing students, cardiac patients, adolescents, and pediatric populations following poetry therapy interventions. The consistency of these findings across both clinical and non-clinical groups suggests that poetry therapy may be particularly effective in addressing emotional tension, stress-related arousal, and generalized psychological distress.

The reviewed studies indicated that anxiety reduction occurred even within relatively short intervention periods. Several interventions involving four-session poetry therapy programs produced measurable improvements in emotional regulation and anxiety symptoms. In addition, group-based poetry therapy programs appeared effective in promoting stress relief and emotional expression among student populations. Overall, anxiety-related findings demonstrated the strongest consistency and lowest variability among all examined psychological outcomes.

Post-Traumatic Stress Disorder (PTSD)

The reviewed evidence also demonstrated strong therapeutic effects of poetry therapy on PTSD symptoms and trauma-related distress. Significant symptom reductions were observed among myocardial infarction patients, women with PTSD, and trauma-exposed individuals. These improvements were evident across randomized clinical trials, quasi-experimental studies, and controlled interventions.

A notable feature of PTSD-related studies was the predominance of clinical and trauma-focused populations. The findings suggested that poetry therapy may facilitate emotional processing and psychological integration among individuals experiencing trauma-related symptoms. However, substantial variation existed regarding sample size and intervention intensity. While some studies involved large-scale controlled interventions, others utilized very small samples or brief intervention frameworks. Despite this variability, the convergence of positive outcomes across different methodological contexts supported the potential role of poetry therapy as a trauma-sensitive intervention.

Psychological Well-being, Resilience, and Other Outcomes

In addition to symptom reduction, several studies examined broader indicators of emotional functioning and psychological well-being. Improvements were reported in stress management, ego-resilience, psychological well-being, and emotional adjustment. Group poetry therapy interventions among nursing students demonstrated positive changes in resilience and well-being, while interventions involving women with PTSD also showed improvements in emotional functioning and self-compassion-related outcomes.

However, findings for some psychosocial variables were less consistent. In particular, loneliness outcomes demonstrated mixed results, with one study reporting an unexpected increase in loneliness despite reductions in hopelessness and depression. These inconsistencies may reflect differences in population characteristics, intervention delivery format, or contextual variables associated with group participation and emotional disclosure.

Overall, poetry therapy demonstrated broader positive effects on emotional and psychological functioning, although these outcomes appeared more variable than symptom-focused indicators such as anxiety and PTSD.

The characteristics and findings of the included studies are summarized in Table 1.

Table 1. Characteristics of Included Studies in the Systematic Review

Author (Year)	Country	Study Design	Sample	Population	Intervention	Duration	Outcomes Measured
Park et al. (2022)	South Korea	Quasi-experimental (nonequivalent control group pretest–posttest)	n = 49 (IG=24, CG=25)	Nursing students	10-session group poetry therapy program (based on Mazza model)	10 sessions	Stress, anxiety, ego-resilience, psychological well-being
Mirzaee et al. (2018)	Iran	Randomized clinical trial	n = 60 (test vs control)	Patients with myocardial infarction	Poetry reading therapy (4 sessions, 45 min each)	4 weekly sessions	Anxiety level
Jahanpour et al. (2019)	Iran	Controlled clinical trial	Not clearly stated (MI patients)	Patients with myocardial infarction	Poetry therapy (4 sessions, 45 min weekly)	4 sessions	Anxiety and post-traumatic stress disorder (PTSD)
Daboui et al. (2022)	Iran	Quasi-experimental (controlled pretest–posttest)	n = 91 (IG=31, CG=60)	Women with breast cancer	Masnavi-based poetry therapy (group sessions)	6 weekly sessions	Anxiety, depression, stress (DASS-21)
Amini & Pashmdarfar d (2019)	Iran	Case study (single-subject design)	n = 1	Child with myelomeningocel e (12 years old)	Poetry therapy + rhythmic movement therapy	10 sessions	Childhood anxiety (Spence Anxiety Scale)
Çakmak et al. (2025)	Turkey	Quasi-experimental	n = 22 (IG=11, CG=11)	Hemodialysis patients	Poetry therapy (group sessions)	12 sessions (3 sessions/week for 4 weeks)	Hopelessness, loneliness, depression
Ouyang et al. (2026)	China	Randomized controlled trial	n = 100 (IG=50, CG=50)	Adolescents with depression	Poetry therapy based on psychological theory + medication	Not clearly specified (intervention period during trial)	Depression (Self-Rating Depression Scale - SDS)
Naz et al. (2024)	Pakistan	Quasi-experimental (pre-post design)	n = 5	Female patients with PTSD	Individual poetry therapy sessions	4 sessions (1-week program, alternate days)	PTSD symptoms (DSM-5 PTSD Self-Report Scale)

Mirzaee et al. (2016)	Iran	Randomized clinical trial	n = 60	Patients with myocardial infarction and PTSD	Poetry therapy (reading sessions)	4 sessions (45 min each, weekly)	PTSD symptoms
Beiranvand et al. (2021)	Iran	Controlled experimental study	n ≈ 272 (experimental vs control)	Women with PTSD	Cognitive self-compassion training with poetry therapy elements	10 sessions (90 minutes each)	PTSD symptoms, psychological well-being

Population Type

The reviewed studies demonstrated that poetry therapy was effective across a diverse range of populations, including both clinical and non-clinical groups. The majority of studies focused on clinical populations such as myocardial infarction patients, women with breast cancer, individuals with PTSD, and hemodialysis patients. Within these groups, poetry therapy was consistently associated with reductions in depression, anxiety, stress, and PTSD symptoms.

In contrast, studies involving non-clinical populations primarily examined emotional well-being, stress management, resilience, and preventive mental health outcomes. Nursing students and adolescents participating in poetry therapy programs demonstrated improvements in emotional regulation, resilience, and psychological functioning.

The reviewed evidence therefore suggested that poetry therapy may function both as a symptom-oriented intervention in clinical settings and as a developmental or preventive strategy in non-clinical populations.

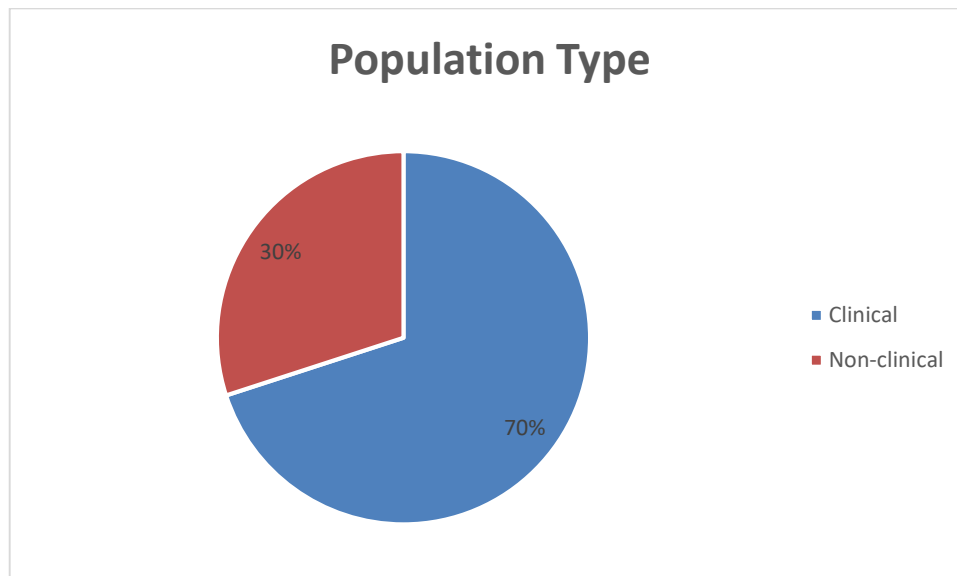


Figure 2: Poetry therapy is effective across a diverse range of populations

Type of Intervention

The reviewed studies employed both standalone poetry therapy interventions and combined therapeutic approaches. Most interventions involved structured reading, writing, discussion, or interpretation of poetry within individual or group formats. These standalone interventions consistently produced improvements in anxiety, depression, PTSD symptoms, and stress-related outcomes.

Several studies also incorporated poetry therapy within broader therapeutic frameworks. Combined interventions included Masnavi-based poetry therapy, poetry integrated with rhythmic movement therapy,

cognitive self-compassion programs incorporating poetry elements, and poetry therapy combined with pharmacological treatment. These interventions demonstrated positive psychological outcomes across multiple domains, including emotional well-being and trauma-related symptoms.

The findings highlighted the flexibility and adaptability of poetry therapy across different therapeutic settings and intervention models. However, integrated approaches also made it difficult to isolate the independent effects of poetry therapy from accompanying therapeutic components.

Duration and Intensity of Intervention

The duration and intensity of poetry therapy interventions varied considerably across the reviewed studies. Intervention length ranged from brief four-session programs to more intensive interventions involving up to twelve sessions.

Short-duration interventions were most commonly implemented among clinical populations, particularly individuals with myocardial infarction and PTSD symptoms. Despite their brevity, these interventions consistently resulted in measurable reductions in anxiety and trauma-related symptoms.

Moderate and intensive interventions involving six to twelve sessions demonstrated broader improvements in depression, stress, psychological well-being, and resilience. However, the findings did not demonstrate a clear dose-response relationship between intervention duration and therapeutic effectiveness. Both brief and extended interventions produced significant psychological improvements.

These findings suggested that intervention quality, participant engagement, and therapeutic structure may play a more important role than duration alone in determining treatment effectiveness.

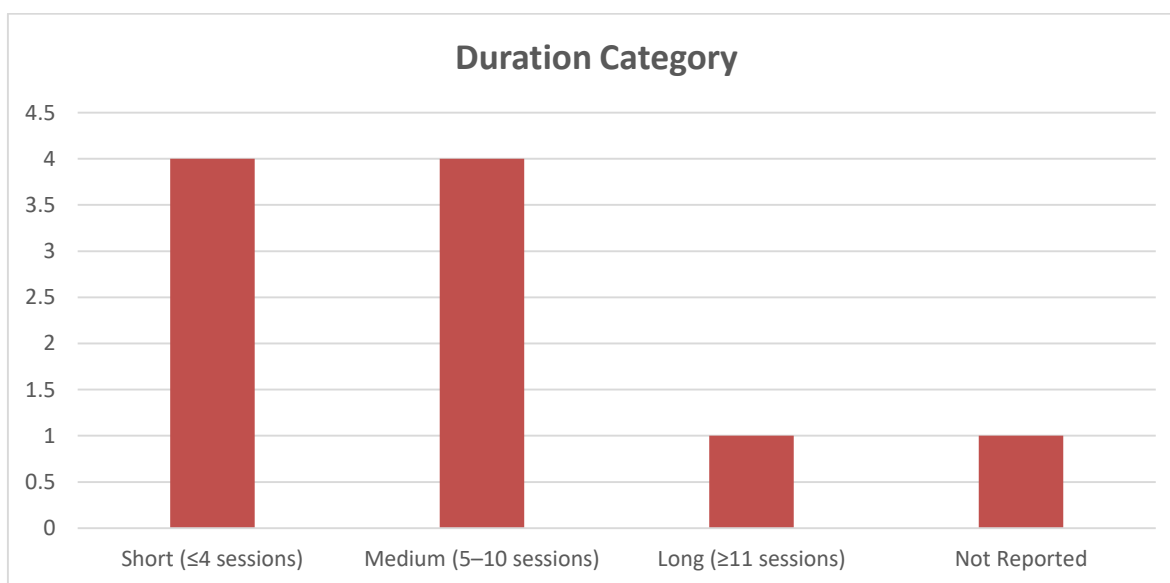


Figure 3: The duration and intensity of poetry therapy

Geographical Distribution

The geographical distribution of the reviewed studies revealed a strong regional concentration within Asian countries, particularly Iran. Additional studies were conducted in China, Pakistan, Turkey, and South Korea. This distribution indicated that the current evidence base for poetry therapy is largely derived from Asian and Middle Eastern cultural contexts.

The consistency of findings across these countries demonstrated positive effects of poetry therapy on depression, anxiety, PTSD symptoms, stress, and psychological well-being. Several interventions also

incorporated culturally familiar poetic traditions and literary forms, suggesting the importance of cultural relevance in therapeutic engagement.

Although positive outcomes were observed across multiple countries, the limited geographical diversity of studies may restrict the generalizability of findings to broader international contexts. Nevertheless, the convergence of evidence across different regional subcontexts supported the overall effectiveness of poetry therapy as a psychological intervention.

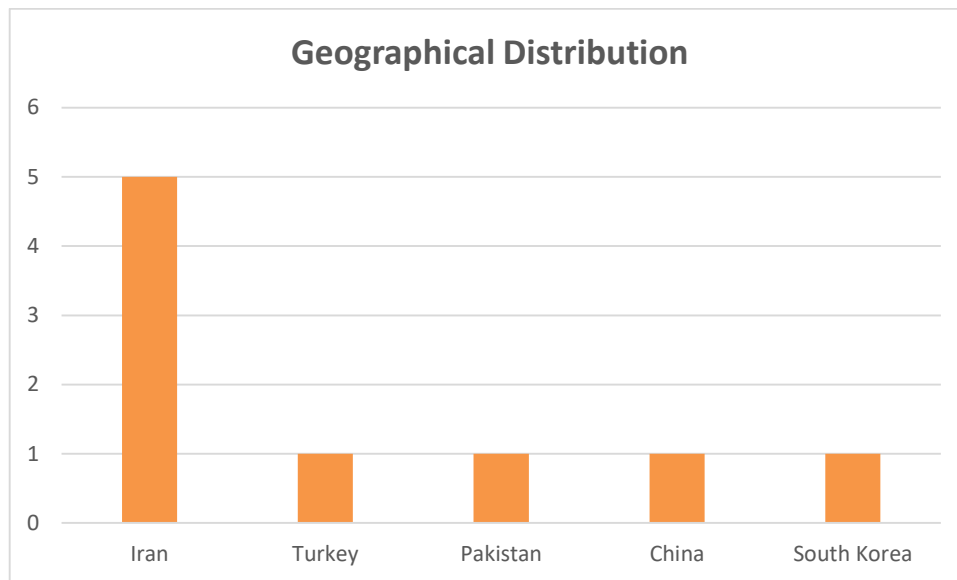


Figure 4: Geographical distribution of the included studies

Discussion and Conclusion

The findings of the present systematic review demonstrated that poetry therapy exerts significant positive effects on a wide range of psychological outcomes, including depression, anxiety, PTSD, stress, hopelessness, loneliness, psychological well-being, and emotional resilience. Overall, the evidence synthesized from studies conducted between 2016 and 2026 suggests that poetry therapy is a flexible and transdiagnostic intervention that can be effectively implemented across both clinical and non-clinical populations. One of the most important findings of the review was the consistency of therapeutic outcomes despite substantial differences in study design, intervention format, and participant characteristics. This consistency indicates that poetry therapy may operate through fundamental psychological mechanisms related to emotional expression, symbolic communication, cognitive reframing, and meaning-making processes (4, 5).

Among all examined psychological outcomes, anxiety appeared to be the most consistently reduced symptom following poetry therapy interventions. Studies conducted among myocardial infarction patients, nursing students, and pediatric populations uniformly demonstrated significant reductions in anxiety levels following participation in poetry-based interventions (8, 10, 11, 14). These findings may be explained by the capacity of poetry therapy to facilitate emotional ventilation and reduce physiological arousal associated with stress and fear. Poetic expression allows individuals to externalize internal emotional tension and organize distressing experiences into coherent symbolic narratives, thereby reducing cognitive overload and emotional suppression. Furthermore, the rhythmic and metaphorical nature of poetry may contribute to relaxation, emotional containment, and attentional redirection, all of which are associated with anxiety

reduction. The current findings are also theoretically aligned with contemporary perspectives emphasizing the role of expressive therapies in improving emotional regulation and psychological adaptability (6).

The review also revealed substantial evidence supporting the effectiveness of poetry therapy for depressive symptoms. Significant reductions in depression were reported among adolescents, women with breast cancer, and hemodialysis patients following poetry therapy interventions (12, 13, 17). Depression is often characterized by hopelessness, emotional numbness, cognitive rigidity, and impaired self-expression. Poetry therapy may address these difficulties by encouraging reflection, emotional articulation, and symbolic reinterpretation of painful experiences. Through poetic engagement, individuals may reconstruct negative self-perceptions and reconnect with emotional meaning and interpersonal connection. The findings of Ouyang and colleagues demonstrated that psychologically informed poetry therapy significantly improved depressive symptoms among adolescents (17), while Yang and Zheng further showed that CBT-based poetry therapy promoted positive psychology and emotional functioning among young people (18). These findings suggest that poetry therapy may be particularly beneficial during adolescence, a developmental stage characterized by heightened emotional sensitivity and identity exploration.

Another important finding of the review concerned the effectiveness of poetry therapy for PTSD and trauma-related symptoms. The included studies consistently demonstrated reductions in PTSD symptoms among myocardial infarction patients, women with trauma histories, and individuals experiencing severe psychological distress (9, 11, 15, 16). Trauma often disrupts narrative coherence and impairs the ability to verbally process distressing experiences. Poetry therapy appears to offer a psychologically safe and symbolically mediated framework through which traumatic experiences can be revisited and emotionally integrated. Metaphor, imagery, and narrative structure may allow trauma survivors to communicate painful emotions indirectly while preserving emotional safety and self-protection. In addition, poetry therapy may reduce emotional avoidance and increase psychological flexibility by enabling individuals to reinterpret traumatic experiences within broader existential and personal frameworks. The positive findings observed across multiple PTSD-related studies reinforce the idea that poetry therapy may function as an effective complementary trauma-focused intervention.

The review additionally demonstrated that poetry therapy contributes to broader dimensions of psychological well-being beyond symptom reduction. Improvements in resilience, stress management, emotional functioning, and psychological well-being were particularly evident among students and women receiving self-compassion interventions incorporating poetry (8, 16). These findings are important because they indicate that poetry therapy is not solely a pathology-oriented intervention, but also a developmental and preventive strategy capable of enhancing positive psychological functioning. In educational settings, poetry therapy may improve emotional awareness, interpersonal communication, and coping capacity, thereby strengthening resilience against future stressors. The findings align with emerging perspectives emphasizing the role of expressive arts interventions in promoting holistic mental health and psychological flourishing (7).

The current review also highlighted the applicability of poetry therapy across highly diverse clinical populations. Positive outcomes were observed among patients with cardiovascular disease, breast cancer, chronic kidney disease, PTSD, and childhood neurological conditions (9-14). These findings suggest that poetry therapy may be particularly useful for populations experiencing chronic illness and medically related

psychological distress. Chronic medical conditions are often associated with fear, uncertainty, hopelessness, identity disruption, and social isolation. Poetry therapy may help patients articulate emotional suffering, restore a sense of agency, and reconstruct meaning in the context of illness. The findings of Çakmak and colleagues regarding reduced hopelessness among hemodialysis patients (13) are especially important because hopelessness is strongly associated with poor psychological adjustment and reduced treatment adherence in chronic illness populations.

One notable finding of the review was the effectiveness of relatively short-duration interventions. Several studies demonstrated significant psychological improvements after only four sessions of poetry therapy (9-11, 15). This finding suggests that poetry therapy may produce rapid emotional benefits even within brief intervention frameworks. The accessibility and low-cost nature of poetry therapy therefore make it a potentially practical intervention for community mental health services, hospitals, schools, and rehabilitation settings. At the same time, longer interventions involving six to twelve sessions also demonstrated substantial improvements in depression, stress, well-being, and resilience (8, 12, 13). Interestingly, the review did not identify a clear dose-response relationship between intervention duration and therapeutic effectiveness. This may indicate that intervention quality, participant engagement, emotional resonance, and therapeutic structure are more important than intervention length alone.

The findings also demonstrated that poetry therapy can be effectively integrated into broader therapeutic frameworks. Several studies combined poetry therapy with rhythmic movement, self-compassion training, pharmacological treatment, or CBT-based approaches (14, 16-18). These integrated interventions produced significant psychological improvements, suggesting that poetry therapy may enhance the effectiveness of existing therapeutic modalities. For example, combining poetry therapy with cognitive approaches may strengthen emotional insight and facilitate cognitive restructuring through metaphorical and narrative processes. Similarly, integration with self-compassion interventions may enhance emotional acceptance and reduce self-criticism among trauma survivors. However, while combined interventions demonstrate versatility, they also create methodological challenges regarding the isolation of poetry therapy's independent therapeutic effects.

An important contextual finding of the review concerns the geographical distribution of evidence. Most included studies originated from Iran and other Asian countries such as China, Pakistan, Turkey, and South Korea (8, 13, 15, 17). This regional concentration may partly reflect the cultural significance of poetry and literary traditions within these societies. In many Asian and Middle Eastern cultures, poetry represents not merely an artistic activity but a socially and emotionally meaningful form of communication. Consequently, participants may demonstrate greater emotional engagement and receptivity toward poetry-based interventions. The use of culturally familiar poetic forms, such as Masnavi-based therapy in Iran (12), further illustrates the importance of cultural adaptation in therapeutic implementation. Nevertheless, the limited representation of Western and multicultural contexts raises questions regarding generalizability and indicates the need for more geographically diverse research.

The review findings should also be interpreted in light of several methodological considerations. Although most studies reported positive outcomes, substantial heterogeneity existed regarding intervention protocols, outcome measures, participant characteristics, and research designs. Some studies utilized randomized controlled trials, whereas others employed quasi-experimental or case-study methodologies. Sample sizes

also varied considerably, ranging from single-case interventions to large controlled studies. Such variability complicates direct comparison of effect sizes and limits the possibility of drawing definitive conclusions regarding optimal intervention formats. Nonetheless, the convergence of findings across diverse methodological contexts strengthens confidence in the general therapeutic value of poetry therapy.

Overall, the findings of the present review support the growing recognition of poetry therapy as an effective and adaptable mental health intervention. The consistent improvements observed across depression, anxiety, PTSD, stress, and psychological well-being indicate that poetry therapy may address both emotional suffering and positive psychological functioning. Through mechanisms involving symbolic expression, emotional catharsis, narrative reconstruction, self-reflection, and interpersonal connection, poetry therapy appears capable of facilitating meaningful psychological change across multiple populations and settings. These findings align with broader movements in global mental health emphasizing accessible, culturally sensitive, and holistic approaches to psychological care (1, 2).

One of the primary limitations of the present review concerns the heterogeneity of the included studies. Considerable variability existed in intervention duration, therapeutic structure, outcome measures, sample characteristics, and study design, which limited direct comparison between studies and reduced the ability to conduct quantitative synthesis. Additionally, many studies involved relatively small sample sizes or quasi-experimental designs, which may reduce statistical power and increase the risk of bias. Another important limitation was the geographical concentration of studies within Asian and Middle Eastern contexts, particularly Iran, which may limit the generalizability of findings to other cultural settings. Furthermore, some studies combined poetry therapy with other interventions, making it difficult to isolate the independent effects of poetry therapy itself.

Future research should prioritize the implementation of rigorous randomized controlled trials with larger and more culturally diverse samples. Standardized intervention protocols and consistent outcome measures are needed to improve comparability across studies and strengthen the evidence base. Longitudinal studies examining the long-term sustainability of therapeutic effects would also contribute substantially to the literature. Additionally, future investigations should explore the underlying psychological and neurocognitive mechanisms through which poetry therapy influences emotional regulation, trauma processing, and resilience. Comparative studies evaluating poetry therapy against other expressive arts therapies or traditional psychotherapeutic approaches would further clarify its unique contributions and clinical utility.

From a practical perspective, the findings of this review suggest that poetry therapy can be integrated into a wide range of mental health and healthcare settings, including hospitals, schools, universities, rehabilitation centers, and community mental health programs. Mental health professionals may incorporate poetry-based interventions as low-cost and culturally adaptable strategies for promoting emotional expression and psychological well-being. Educational institutions may use poetry therapy programs to enhance resilience and stress management among students, while healthcare providers may integrate poetry therapy into supportive care for patients with chronic illnesses and trauma-related conditions. Training programs for therapists and counselors should also consider incorporating expressive arts and poetry-based techniques to expand therapeutic flexibility and culturally sensitive care.

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Authors' Contributions

All authors equally contributed to this study.

Declaration of Interest

The authors of this article declared no conflict of interest.

Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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