

The art of medicine

Enjoying and enduring: groups reading aloud for wellbeing

Since the creation of the *Epic of Gilgamesh* some 4000 years ago, human beings have had a powerful technology with which to record, analyse, and explore their existence. I am talking about literature, which replicates more faithfully than any other man-made form the sense, structure, and feel of experience itself, while at the same time affording a safe distance from which to refract that experience. The ancient Egyptians understood this, inscribing “the medicine chest of the soul” over the door of the great library at Thebes.

In recent years, there has been a move towards integrating some aspects of literature into the medical and psychotherapeutic toolkit. Since 2001, The Reader Organisation in the UK has been pioneering Get Into Reading (GIR), with the help of colleagues from the Schools of English and of Medicine at the University of Liverpool, and with several Merseyside National Health Service (NHS) Trusts. The Reader Organisation is now training staff members and service-users, including the Chief Executive and the Medical Director of Mersey Care NHS Trust, to deliver weekly read-aloud reading groups, already pioneered in over 80 community settings. GIR is a simple intervention. Group members meet weekly for an hour or two, and just two things happen: a facilitator or group member reads aloud; the reading is broken up by conversation and response to the text. Our hypothesis is that reading literature aloud with others offers something uniquely valuable.

What does reading literature offer that reading a newspaper, chatting, knitting, dancing, or participating in a choir does not? As Maryanne Wolf has noted in *Proust and the Squid; The Story and Science of Reading and the Brain* (2008), reading literature offers exposure to “both the commonality and the uniqueness of our thoughts”. For someone in a depressive state to be (as Wolf puts it) “no longer limited by the confines of his or her own thinking” may in itself have a therapeutic value. Our belief in not giving group members targeted self-help books is the other major structural principle: what literature offers is the opportunity for people to discover a relation to the book rather than the book narrowly proposing it. Deeper, wider, and richer resources are offered within the broadly human realm than are offered through the medicalised “self-help” pigeonhole. The decision not to go for immediate and obviously “relevant” connections is related, I believe, to a need to get the brain functioning along different connections of pathways—the more difficult, the more rich, the less immediately relevant a text the more therapeutic it might be. If the connection with a book comes as a surprise, an active emotional discovery, there may be a more dynamically creative result. That is why the rule here is that the book matters in its own right in GIR,

because, paradoxically, that is what produces a deeper effect on the reader. In GIR you can use your difficulties to imagine, to give and find sympathy and relationship.

Here is an example that I encountered at an NHS meeting. The speaker told assembled medics and managers that he had had a severe breakdown while teaching English in a desperately failing school. He was still suffering badly and did not expect to work again. He had found that the poetry of Gerard Manley Hopkins offered him, if not active help, then something like serious company. He said, “when things are really bad it helps to see that someone else has been there and hung on, it helps to see that someone has managed to get it in order”. And then the poem, taped to the back of this man’s diary, was read aloud:

“O the mind, mind has mountains; cliffs of fall
Frightful, sheer, no-man-fathomed. Hold them cheap
May who ne’er hung there..”.

Hopkins’ poem neither changed nor expunged the experience, nor did it distract this man from it. No one would claim the poem was a cure, but it did offer recognition, solidarity, and perhaps a safe harbour.

Let me add some thoughts from my own experience as a reader. Someone reads out “O the mind, mind has mountains” and as the reading voice is registered in my mind I am already processing and expanding upon the content. In a split second I am checking with myself: does the mind have mountains? An image of a sheer cliff face flashes upon what the poet Wordsworth calls the “inward eye”; I remember being frightened on a scree slope somewhere on Snowdon when I was about 14 years old; I think fleetingly of my friend Wil who died in a climbing accident; I feel a vertiginous drop as I remember a time of extreme mental distress and almost feel that distressing memory as “fall”; I’m also registering the crying repetition of the word mind, “o the mind, mind”. I’m slowing this down and reimagining it in order to write it down here, but as it happens in real time I’ve barely registered any of this. That is why stopping to talk, as the reading happens, becomes important.

But such literature is a gift that it is hard for some to receive. The man in my example was a literature graduate. But many people have difficulties with literacy and not everyone has easy access to the great writing, ranging from Doctor Seuss to William Shakespeare, which we might want to call “literature”. Reading aloud can give immediate access to complex writing that might otherwise be at least daunting and at worst unavailable to a large section of the population.

It is worth noting that in the history of civilisation, the notion that reading should be silent and private, rather than communal and out-loud, is a fairly recent development. In

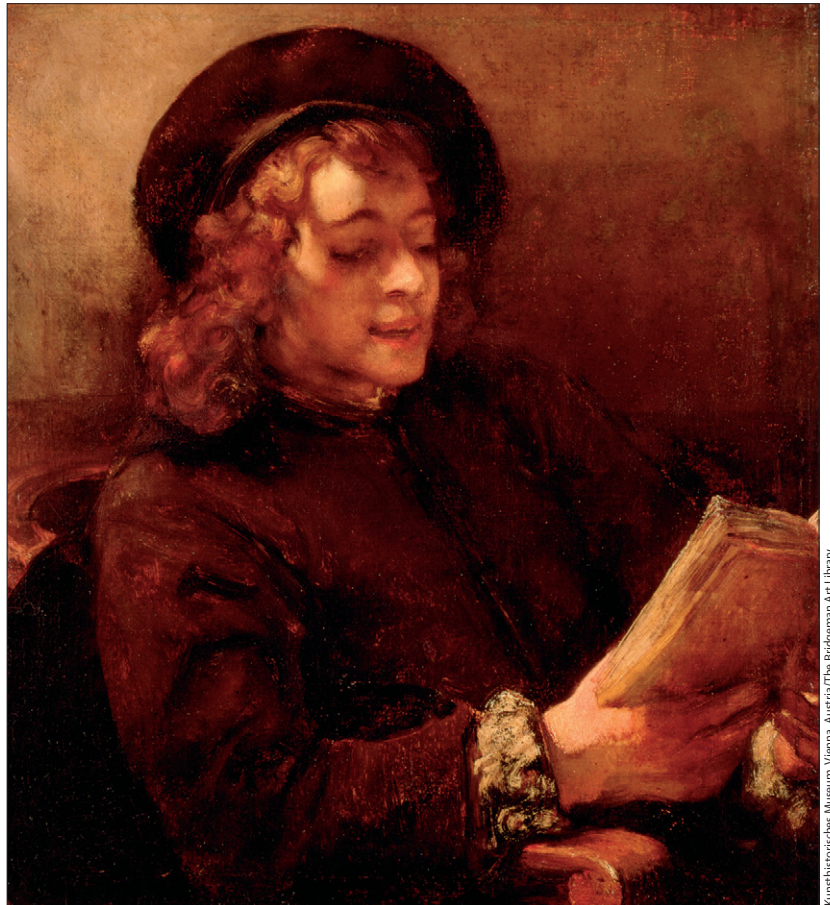
his *Confessions* (AD 397), Augustine records with surprise seeing Ambrose reading silently, “his eyes scanned the page and his heart sought out the meaning, but his voice was silent and his tongue was still.” Voiced reading was the norm, creating a community of listeners: we return to that tradition in GIR but from within a culture where silent and private reading is now the norm instead. Reading aloud now offers experiences and benefits not available elsewhere.

Literary texts of the past 300 or so years, though obviously with an oral component, are for the most part not meant for oral performance. That means that reading aloud is much slower than reading done by the solitary individual in his or her head, and it demands not only a different sort of attention (translating from outside to in, from out there to my personal relation), but also calls for a greater attention to human detail unfolding in time. Reading aloud thus offers a counter to an over-busy world of visual scanning or ephemeral print.

The read-aloud model facilitates the creation of a series of powerful interplays: between the written text and the aural experience; between hearing the text from outside and processing it within; between one’s own experience and that of the author and characters; between the privacy of personal consciousness and the public experience of group discussion. And always there is the group. For by reading aloud in a group it may be that readers experience what we might call interpersonality both with the book, and its author and characters, and with other group members. Group members have often reported a sense of the book itself as a voiced human presence in the group and at its emotional centre. To see oneself in others; to see others in oneself: this is the rich experience going on within the group and with the books.

For people who have become competent readers, and especially for those who have become readers of literature, such as our English teacher, reading is largely a private and solitary activity. Those who wish to engage with others through books (members of book clubs, colleagues meeting over the water-cooler, people taking literature courses) usually do so by having the reading experience in private and then talking about that experience or the ideas arising from that experience at the meeting or class. Especially when set against the utterly primal excitement that the reading experience can sometimes involve, this disjunction between having the experience and sharing the meaning makes much literary talk feel at best second-hand, and at worst, unreal. The reading-aloud group model offers something live: the sharing of the experience itself, the reading together, and also the immediate discussion of that complex experience in a social community.

“The mind does have mountains”, a group member may remark. “That’s a great description of how it feels.” “Yes, I’ve been there”, another member may add—or not, if she chooses to remain silent. But the thought “Yes I’ve been



Titus Reading (1656–57) by Rembrandt Harmensz van Rijn

there” will be registered even if the expression is not yet ripe. Seeing others grappling with difficulty, attempting expression, overcoming silence, using personal resonances, may be another “active ingredient”. Having the language, both verbal and syntactical, to describe complex experience may be a key component in developing the ability to survive mental tribulation.

With the Schools of English and Medicine at the University of Liverpool, GIR and The Reader Organization are involved in a research project to test these thoughts, questions, claims, and hypotheses in various ways—from brain imaging to group observation and structured interviewing. What we believe we know is that in practice this model works. We now have to see why, how, to what extent, with whom, compared with what else. Samuel Johnson wrote “The only end of writing is to enable the readers better to enjoy life, or better to endure it.” My hypothesis is that the two—the enjoying and the enduring—are connected.

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