



Original Research Article

Role of Literature in Health Humanities

Article History:

Name of Author:

Dr Chaithanya Antony ¹

Affiliation: Guest faculty, Union Christian College, Aluva affiliated to Mahatma Gandhi University kottayam Kerala.

Corresponding Author:

Received: 02-12-2025

Revised: 30-12-2025

Accepted: 13-01-2026

Published: 21-02-2026

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-Noncommercial-Share Alike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

Abstract: Health humanities is an interdisciplinary field that explores connections between medicine, health sciences, the arts, philosophy, social sciences, and other areas of human culture. The core of health humanities is a cross-cutting analysis of medicine and the health sciences as a cultural phenomenon and a reflection on the diversity of human experience of health and illness. The goal is to generate and incorporate new knowledge into treatment practices, health research, medical curricula, public health, and other domains. Such analyses involve various perspectives from both inside and outside of medicine. It examines how the arts and humanities can be applied to health and well-being issues. It involves the application of the creative or fine arts, including visual arts, music, and performing arts, as well as humanities disciplines such as literary studies, languages, law, history, philosophy, and religion, to questions of human health and well-being (What is Health). This paper focuses on the health humanities, drawing on literature.

Keywords: Health Humanities, Art Therapy, Health Literature, Psycho Analytical novel.

INTRODUCTION

This practice of health management was not recently developed but is old, dating back to ancient periods. In ancient times, people never acknowledged the scientific benefits of art forms upon human brain functions, but they indulged themselves in dance, drama, music, drawings, etc to escape from mental depression. "For the amusement and instruction of patients in a hospital, a small library should, by all means, compose a part of its furniture" (Rush 192). This instruction was delivered as part of a lecture by Benjamin Rush, the father of American Psychiatry, in November 1802. So, it is clear that the idea of curing depression and some other mental disorders through the techniques of reading drama, poetry, or novels is not something new. The Greeks and the Romans were the first groups of people who recognised the usefulness of 'text' and its application as a potential therapeutic tool. An inscription, 'The Healing Place of the Soul' was found, around 300

BC, in a library at Thebes in Alexandria, Egypt (Jones²⁴ and Riordan and Wilson 506). In ancient times, many types of 'reading/art therapies' were customarily used by doctors in Psychiatric Institutions. Charles Dickens, in his book American Notes, described his visit to an insane asylum. There, he described patients performing/ participating in reading activities along with other recreational pursuits, and he jotted down his observations (106-109). In 1843, John Minson Galt II, the superintendent of Eastern Lunatic Asylum in Virginia, stated that he prescribed 'reading' as an important therapy for certain patients.

In the 1886 period, Sigmund Freud, the father of Psychoanalysis established that Literature and psychoanalysis are inextricably intertwined. Works of literature are explained with the help of psychoanalysis. Similarly, literature is usually used for the clarity of certain psychoanalytic concepts. In

literary criticism, the techniques of psychoanalysis are utilised for the interpretation of literature. Dreams/nightmares are often interpreted by Freud based on the study of a person's psychological aspects, like the intensity and nature of repressed feelings. So, he advises that a literary text should also be considered just like a dream, and its interpretation must be done after a thorough scrutiny of the psychological background of the author. A work of literature, which is the external expression of the author's unconscious mind, deals with happiness and culpability, disclosure and disguise. The reader should treat the text from a psychological point of view to uncover the author's hidden motivations, repressed desires and emotions.

Freud used literature to prove his theories. In his book, *The Interpretation of Dreams*, written in 1899, he deeply analyses dreams and connects their relationship to individual experience and identity formation. He analysed Sophocles' *Oedipus Rex* and Shakespeare's *Hamlet* for their Oedipal elements. Similarly, in his *Creative Writers and Day-Dreaming*, the relation between psychoanalysis and literature is established. Imagination, creativity, play, dreams, and artworks were compared to understand art or fictional creativity. Freud's theory on the structure of literary works was first introduced in this book and made a psychoanalytic enquiry into the nature of literature. According to Freud's theory, fiction is parallel to a daydream. Similarly, fiction, like a daydream, consists of imagination through which frustrated desires are accomplished. Hence, a patient reader's mental problems arising from frustrated desire are subsided, and positive energy is enhanced through reality.

Based on this psychoanalytical theory, many therapies have been developed, like behaviour therapy, cognitive therapy, holistic therapy, bibliotherapy, etc., to improve the physical as well as mental health conditions of people. Some therapy methods, like cognitive behavioural therapy and exposure and response prevention therapy, based on psychoanalytical theory, were developed to alleviate the trauma of various mental disorders like anxiety disorders, depression, phobias, eating disorders, obsessive-compulsive disorders, etc. The reading and writing therapy method of bibliotherapy was also successfully used to treat some mental disorders.

Lack of serotonin is one of the causes of some mental disorders. Serotonin is a monoamine neurotransmitter. It carries messages between nerve cells in the brain and throughout the body. The human body works due to these chemical messages. It is considered that the lack of enough serotonin is the basis of depression, anxiety disorder, mania, obsessive-compulsive disorder, panic disorder, schizophrenia, and other health conditions. But the

level of serotonin can be enhanced by reading fiction or other related genres.

People with depression occupy their minds with negative thoughts, and hence their brains remain 'inactive'. The best natural way to overcome depression is through the process of reading. People should read books with positive content because the reading process generates positive energy and keeps the brain 'active'. Their mental flexibilities increase as they learn to regulate their thought patterns through reading activities. So, we cannot neglect the long-term benefits of reading and writing because they are powerful enough to cause changes in brain functions and structure. Neurobiological research has been conducted by an American scientist, Prof. Gregory Bern and his team conducted a study to see how the active brain networks respond when a person reads a story/novel. The research participants were given stories to read, and their brains were scanned before reading and after five days of reading. The study showed that their brain's resting state changed drastically after the reading process. That is, those stories and the reading activities have brought changes in people psychologically as well as neurologically (Berns et al. 592).

When the patient reader identifies his action and behaviour with that of characters in the novel or any art form, the feeling of sympathy or hostility is evoked. The reader will critically analyse the character's imagination, behaviour, and anxieties and compare them with the reader's imagination, behaviour and anxieties. This concurrent association and detachment, characteristic of vicarious experience, serve as a medium to extend the range of his consciousness and to set his energy free. Usually, human feelings like love, sex, revenge, various dreams, anxieties, fear, etc., are the themes of fiction or novels. But when observed from the perspective of psychological reality in which the patient reader lives, the theme of the fiction or novel is not changed, but the intensity or abnormality of its theme is visible. This intensity or abnormality may serve as a reflection of the reader's thoughts, motives and behaviour, or it may reveal to him facets of his own experience that have been cut off from his consciousness. The nature of this interaction between the reader and reading matter, and the ultimate significance of his experience in terms of the reorganisation of his psychic structure are the product of a confluence of such factors as his needs, values, goals and characteristic defence system (Shrodes 64). Patient readers will gain insights about their disease and experience projection, introjection and catharsis by reading psychological fiction. Self-recognition may give him a sense of belonging; it may augment his self-regard and allay his sense of guilt. A situation in a story may be so compelling that it becomes interchanged in his mind with an

episode in his own life and becomes endowed with the attractive character of the latter. The vicarious feelings experienced by a reader as a result of the realisation through the feeling or action of a character may lead to adaptive behaviour that is more rational than the reader's existing behaviour. Readers will also realise that the coping mechanisms provided by psychoanalysts, such as repression, rationalisation, or projection is the way to reality. In some cases, the patient might be unable to talk directly to a psychoanalyst about his sufferings and trauma. But when psychoanalysts talk and discuss fictional characters' sufferings and trauma, the patient may reveal the suppressed sufferings directly or indirectly to them. When the reader receives an opportunity to interact symbolically with fictional characters, they will get insight and realise their wrong behaviour or actions, and this will help them to react to real people and real situations. When the therapist acts out the patient's fantasies, his image and activities are projected before the therapist as on a screen. Similarly, the artist's productions hold 'the mirror up to nature'.

A client reader achieves the goals and benefits of bibliotherapy through four major steps.

- 1) Recognition: the reader experiences a sense of familiarity through recognition.
- 2) Examination: the reader commences to gaze at issues described in the selected piece of work or book and tends to react towards it, through the process of examination, emotionally.
- 3) Juxtaposition: the reader expands his or her general understanding and insights through an interaction with the therapist. This is the phase of juxtaposition.
- 4) Self-application: the reader starts to apply the integrated insights gained from the process of reading in his or her real-life scenario. This is the self-application phase.

Not only reading but writing also has therapeutic power to reduce mental illness. This theory was practically applied and was beneficial to many people. Taylor Larsen, a novelist from New York, was an acute OCD patient. She suffered from repeated hand washing. She succeeded in controlling her urge to wash again and again by reading some specified novels like *Desperate Characters* by Paula Fox, *The Professor's House* by Willa Cather, and *Olive Kitteridge* by Elizabeth Strout. These novels narrate the incidents of extreme panic attacks, sleep disorders, depression, violent sex, large-scale urban crimes, horrendous vandalism and stories of unwanted thoughts which are the same as intrusive thoughts of OCD. These novels helped her comprehend the austere features of this personality disorder and explore the characters' inner world. She observes the pain and confusion the characters suffer and realises that she is not alone in this world. Then,

one day, she started to write about her own OCD as a novel with OCD backgrounds. In her case, both reading and writing seem successful because these activities distract her mind from OCD rituals and intrusive thoughts (Larsen). Taylor Larsen realises that 'dark writing' is enormously helpful to people if it is presented positively. All those novels take her into someone else's private hell and make her realise that she is no longer a helpless lassie. All the characters in these novels survive the traumas of OCD and other mental traumas. Hence, Taylor Larsen hopes that she will also pull through the difficulties of OCD. This is how novels become effective therapeutic tools that help to overcome mental distress.

Morgan Rondinelli, an OCD patient, has succeeded in controlling her OCD compulsions by reading four novels with therapeutic effects. They are:

- (i) OCD Love Story by Corey Ann Haydu
- (ii) Every Last Word by Tamara Ireland Stone
- (iii) Turtles All the Way Down by John Green
- (iv) Finding Perfect by Elly Swartz

By just reading these novels, no therapeutic effects are possible. These novels provide true narrations of obsession and compulsions. It also provides some therapy methods that can easily be applied. The patient will be able to apply the therapeutic effects which narrated in the novel. For this purpose, some homework and enlightenment are needed. During the research period, I formed an OCD cluster to prove the effectiveness of novel-based therapy. I got only eight people because of the fear of stigma. Out of eight, four people suffer from contamination OCD. My first trial was for contamination OCD. Firstly, a chart was prepared to understand the history and severity/ level of mental impairment found in OCD patients. The Type of obsessions and nature of compulsions were recorded. After that, attempts were made to provide psycho-education, which included the history of OCD, what OCD is OCD? Statistics on OCD (1 in 100 adults, 1 in 200 kids), common symptoms of OCD, available treatments and the Goal of ERP Therapy. Five days of sessions were conducted to familiarise with ERP therapy and to practice how to tackle fear-triggering situations in ERP. The bibliotherapy method was initially applied. OCD patients had to spend two weeks reading OCD novels like *Casual Vacancy*, *Turtle all the Way Down*, *OCDaniel*, *Every Last Word* and *OCD Love Story*. While *Casual Vacancy* deals with almost all the nature of OCD through the character of Collin Wall, *The Turtle All the Way Down* and *OCD Love Story* deal with contamination OCD. *OCDaniel* narrates various compulsions. *OCD Love Story* and *Every Last Word* provide ERP therapy and the way of its application. *Every Last Word* focused on writing therapy to

alleviate the trauma of OCD. To understand OCD patients' compulsion patterns and triggering circumstances, more discussions were conducted.

This entire process helped readers identify with the character. Readers were encouraged to follow the survival tactics of the hero because the storytelling aspects of a novel transported a person into the body of the protagonist during the reading activity (Berns et al. 598). They practised several times the ERP methods narrated in *OCD Love Story*, and they gradually became capable of controlling their compulsions.

A man of 60 years, the father of one of the OCD cluster members, suffered from tactile hallucination. He frequently felt that some insect or bug was crawling under his skin, especially on his right cheek. The doctor told him it was a symptom of schizophrenia and referred him to a psychiatrist. He was afraid to meet a psychiatrist, fearing stigma. When I heard about it, I shared Sarra Harrington's testimonials, who suffered from the same issue, like uncontrollable fixation on bugs. She was afraid of bed bugs, carpet beetles, termites, lice, etc., because she thought they would penetrate under her skin. Every night, she examined carpet fibres using a lighted magnifying glass and checked every nook and cranny of her bedroom. She couldn't sleep well. The chronic sleep deprivation even affected her appearance. She got relief from this issue by reading some horror and thriller novels.

"Reading horror allowed me to take all that adrenaline and pour it into something outside of myself, something that I could see resolved at the end of the story. It gave me the gift of catharsis. The characters in horror stories suffered from circumstances far worse than my own" (Harrington 2018).

The novel she read was *Snow* by Dale Bailey, *A Head Full of Ghosts* and *Disappearance at Devil's Rock* by American writer Paul G. Tremblay, and *The Girl with All the Gifts* by M.R. Carey. We don't get the same novel, so we suggested James Hadley Chase's thriller novels. When he reads the novel, he will not feel crawling, but after some time, the crawling effect will be felt. But he continued reading and engaged in other entertainments. After three months, he was free from crawling feelings and until this time, no such feeling. No medicine, no therapy, only reading.

Not only reading but writing also has therapeutic power. Wesley King, New York Times Bestselling Author of eleven novels, including *OCDaniel*, was an OCD patient. It was challenging to write and read because of his OCD. Wesley King narrated in his autobiographical novel *OCDaniel* how he controlled

his OCD through the process of writing. It started like this:

"It's just about the only time I don't get Zaps (OCD). I don't know if it's because my brain is too busy or because I get to create my world where there aren't crazy people. Sometimes it's the only break I get in a day (from compulsion), and I think maybe it stops me from completely losing my mind" (16).

At the time of writing the novel *OCDaniel*, he was unable to write a sentence because of his OCD. But he continued to write, suffering the trauma of OCD. The protagonist Daniel in *OCDaniel* is an OCD patient like the novelist. To survive the trauma of OCD, Daniel tries to write a tremendous novel with thrilling incidents of distorting the whole world. Daniel created a hero for saving the world. The hero's exhilarating action of fighting with Monsters and car chases is imaginary. In the novel, Daniel realised that when he wrote, he had not suffered any trauma of OCD. Similarly, Wesley King knew that when he finished *OCDaniel*, he became capable of controlling his compulsions. When Wesley King concentrates on the creation of a puzzling story with complicated characters and events, the chances of triggering are less. So, he spends less time with his obsessional thoughts. In his novel, he wrote that 'millions of intrusive thoughts ran through the protagonist's mind, but he managed'. Similarly, 'millions of intrusive thoughts ran through Wesley's mind, but he managed'. As his character, Daniel, fights with his OCD, writer Wesley King attempts to control his compulsive urges. (*OCDaniel* 16, 134-36, 217-18).

With the same experience as Wesley King, John Green, the famous US novelist, became capable of controlling his OCD triggers and compulsions. He said in an interview for the *Guardian*: "Having OCD is something that is an ongoing part of my life and I assume will probably be a part of my life for the rest of it." Writing the trauma of OCD into his fiction was a therapeutic way for both himself and for readers who have OCD (Green). Even if it is hard to deviate from intrusive thoughts, continuous writing, for a while, will help to minimise the strength of compulsions.

Even though bibliotherapy is not a complete solution for all types of mental diseases, it is effective for many mental illnesses. This approach will help a mental disorder person to remain optimistic throughout life. Positive thought patterns evolved from fiction and other visual art forms will open up more survival techniques. When nearly one billion people worldwide suffer from some form of mental disorder (WHO), these types of curing systems are beneficial.

1. Works Cited

2. Berns, Gregory, et al. "Short and Long-Term effects of a novel on Connectivity in the brain." *Brain connects*, vol. 3, no. 6, 1 Dec. 2013, pp. 590-600. <https://doi.org/10.1089/brain.2013.0166>.
3. Dickens, Charles. *American Notes for general circulation* (vol. 1). Chapman and Hall, London, 1842.
4. Galt John, Minson. *The treatment of insanity*. Harper & Brothers, New York, 1846. p. 566.
5. Green, John. Interview. "John Green: Having OCD is an Ongoing Part of my Life." Interview by Alison Flood. *The Guardian*, <https://www.theguardian.com/books/2017/oct/14/john-green-turtles-all-the-way-down-ocd-interview>.
6. Green, John. *Turtle All the Way Down*. Penguin, 2018
7. Harrington, Sara. "Reading Horror Novels Helped Me Deal with OCD." *Electric lit/ Electric Literature*, 28 Feb. 2018. <https://electricliterature.com/reading-horror-novels-helped-me-deal-with-ocd/>
8. Haydu, Corey Ann. *OCD Love Story*. Simon & Schuster, 2013.
9. Jones, J. L. "A closer look at bibliotherapy." *Young Adult Library Services*, vol. 5, no. 1, 2006, pp. 24-27.
10. King, Wesley. *OCDaniel*. Simon & Schuster/Paula Wiseman Books, 2016
11. Larsen, Taylor. "How Reading and Writing Helped me Cope with OCD." *Bustle*, 21 Sep. 2016, rwww.bustle.com/articles/185382-how-reading-and-writing-helped-me-cope-with-my-obsessive-compulsive-disorde
12. Riordan, Richard J, and Linda S. Wilson. "Bibliotherapy: Does it work?" *Journal of Counselling and Development*, vol. 67, no. 9, May 1989, pp. 506-08.
13. Rondlinelli, Morgan. "The 4 best novels I've read about OCD." *The Mighty*, 9 Oct. 2018, themighty.com/2018/10/ocd-fiction-books-awareness/
14. Rowling, J.K. *Casual Vacancy*. Little, Brown and Company, 2012.
15. Rush, Benjamin. *Sixteen introductory lectures: To courses of lectures upon the institutes and practice of medicine*. Delivered in U of Pennsylvania, Bradford and Innskeep. Philadelphia, 1811,
16. Shrodes, Caroline. *Bibliotherapy: A theoretical and clinical-experimental study*. 1949. California U, PhD thesis.
17. Stone, Tamara Ireland. *Every Last Word*. Little, Brown Books, 2017.
18. "What is Health Humanities?". *SCOPE: The Health Humanities Learning Lab*. 2016.
19. Retrieved 15 September 2016.
20. WHO. "Nearly one billion people have a mental disorder: WHO." *UN News, United Nations*, <https://news.un.org/en/story/2022/06/1120682#:~:text=Nearly%20one%20billion%%20world wide%20suffer%20from%20some,that%20it%20includes%20around%20one%20in%20>