Mary is a 15-year-old recently placed in Sherman Cottage at a private residential treatment center because her family could no longer control her behavior at home. Her history is one of truancy, runaways, sexual promiscuity and active abuse of alcohol with peers and older teens in the community. Her social worker presented a well-documented history of Mary having been physically and verbally abused by her father since age 13 when he lost his job and began drinking heavily. Still unemployed, he continues to collect unemployment benefits and Mary’s mother works part-time outside the home. Prior to this Mary was a well-adjusted, sociable 13-year-old, well liked by peers and teachers. Mary is a bright adolescent but had a history of school failure starting at about the same time her father lost his job. She is performing at grade level in all achievement tests in spite of her poor school attendance. She is an only child and is now described by other significant adults as a loner. Though the mother had arranged for outpatient family therapy, the father often sabotaged these efforts and Mary was nowhere to be found when the appointments drew near. At this point, Mary has little attachment to her family and actively verbalizes hatred toward her father and is quite angry at her “weak” mother. Not surprisingly, her behavior in the cottage is also that of a loner, preferring to isolate herself from other residents and adults whenever possible.

Wendy is the youth care worker assigned as Mary’s case manager. Wendy’s primary goal is to acclimate her into cottage life and report on her progress when cottage and comprehensive treatment staffings arise. After a settling-in period, Wendy had begun the task of building rapport and trust with Mary by using a very nonthreatening therapeutic technique, bibliotherapy, as a means to help Mary adjust to cottage life while at the same time opening the door for her to gain insight into her life situation. Wendy wisely chose a fictional book, *A Day at a Time: Dealing with an Alcoholic*, by Jane Claypool Miner. This poignant account chronicles the life of a mother and her eleven-year-old daughter’s struggle to come to grips with her alcoholic father. The book is painfully realistic, looking at the role of Alanon for her mother and subsequently Alateen for the young heroine, Ellen. The book realistically points out the insidious nature of alcoholism and its impact on family dynamics. Two important messages emerge from this fictional account, that is, that an alcoholic must be motivated to change his or her drinking behavior and that guilt is both ineffective and inappropriate for family members to feel. The
book ends on a hopeful note as Ellen joins Alateen as her choice of empowerment during this time while her father struggles with his alcoholism.

Wendy and Mary have been reading this book together for approximately two weeks, using structured one-to-one evening leisure time in the cottage to process the content. Doing this has brought them closer together, building trust and rapport. Importantly, Wendy was able to determine that Mary was able to glean insight into her own family situation, fully recognizing that she is not alone in the world with this problem. The bibliotherapy process of identifying with a fictional character has set the stage for Mary to begin work on understanding her father’s alcoholism as well as decisions about her own drinking patterns and the choices that lie before her. What has been described up to this point is a very pragmatic, skill-oriented activity therapy that holds great promise for child and youth care workers. The recent curriculum recommendations put forth by the “1995 Task Force of the North American Consortium of Child and Youth Care Education Programs” (NACCYCEP), supports the understanding and use of spontaneous and planned activities as part of a developmental care practice curriculum (Maier, Greenwald, Kelly, Klassen, Krueger, Pratt, Rose, & VanderVen, 1995, p.274). The emerging discipline of bibliotherapy (Outzs, 1991) holds great promise as a highly effective, cost efficient method that can be applied in cottage settings and does not require advanced graduate training for the child and youth care worker conducting the sessions. The purpose of this article is to provide child and youth care workers with an understanding of what bibliotherapy is, its goals, and the types of problems that it addresses. Procedural steps for using these skills as an activity therapy in an authentic setting are described in detail.

Lastly, a recommendation is set forth that bibliotherapy be conceptualized as a ‘nondisciplinary’ model to assist children and youth with currently identified problems, as well as a means to prevent future problems.

• Bibliotherapy Defined: Treatment and Prevention Approaches

Pardeck and Pardeck (1990) provide a working definition of bibliotherapy as “a family of techniques for structuring interaction between a facilitator and a participant based on mutual sharing of literature” (p. 228). In its simplest sense, it is the controlled use of selected reading materials used in a highly intimate way between adult and child that is designed to promote a journey of self-discovery and self-actualization. In short, the model encourages and is built upon the principle of developing insight in children and adolescents or, in psychological terms, an internal locus of control. It is thought of as an extremely optimistic, or educationally based approach to ameliorating or remediating emotional and behavioral problems often associated with the transescent or adolescent period of development. This specific activity is in line with recent
advances in the promotion of a developmental care practice curriculum that specifically addresses carework as a therapeutic intervention, that is, the use of activity media to facilitate developmental growth (Special Report, 1995, p. 274).

The bibliotherapy model is built upon the premise that children will develop insight and an increased repertoire of problem-solving skills useful in their lives. The unfolding of this process is done through the selection of materials in a highly structured and monitored format. In child developmental terms, it is well understood that healthy emotional social development has a strong self-concept as its underpinning. Inherent in the development of self through the middle school and adolescent years is the development of social roletaking, or more commonly referred to as empathy. Empathy refers to the ability to understand a situation from the perspective of the other individual, thus increasing a degree of sensitivity and compassion for others. Through the guided process of exploring materials in understanding another’s perspective, the process of identification with a character takes place. Gleaning insights and new knowledge from reading fiction and nonfiction allows the child and adolescent to have a new interpretation of his or her problem(s) and thus increases one’s empathic skills. Nonfiction books include reference and self-help titles designed to address specific topics. Fictional books should be chosen whose protagonists have problems similar to those identified in the child’s treatment plan and is the focus of the bibliotherapy application. The case described earlier of Mary identifying with Ellen’s struggles with an alcoholic father is an example of this.

The process by which this identification takes place is essentially grounded in psychodynamic theory which is strongly linked to psychotherapeutic outcomes. By identifying with the character or story plot, children realize they are not alone in their life situation or problem. This produces the catharsis effect which allows for a reduction of tension. Secondly, the child or adolescent will then develop insight as a result of the identification thus increasing his or her repertoire of problem-solving skills, while at the same time enhancing motivational elements to address his or her problems on a day-to-day basis. Lastly, the desired effect is transfer of training, which means that the child will use the newly acquired problem-solving skills as a result of her insight (Brown, 1975, pp. 27-60).

The field of child and youth care is replete with similar therapeutic approaches using various methodologies to help children develop insight into their behavior and develop new coping skills. Kagan (1982) uses a version of storytelling as a therapeutic intervention to help children make the transition from their biological family to a substitute family. In this approach, the therapist elicits from the child a story reflective of her current conflicts and ends it with a moral. The therapist in turn builds on the theme and characters and adds positive coping outcomes as well as an advanced moral. Thus, the mutuality of storytelling not only encourages
children to consider new means to view their life situation but will “lead to more adaptive behaviors” (p. 280).

In a similar vein, Burns (1990) suggests that child and youth care workers and other professionals use metaphors as stories as an adjuvant therapy for troubled children and their families. As Burns states, “A story can be used to introduce a new thought or concept, investigate an old idea, empathize with a person’s situation, suggest alternate behaviors, create a certain feeling or explain a technique. There are endless possibilities” (p. 82). Another creative application of the use of stories with emotionally disturbed children and youth is in the form of integrated literature and drama. Juul (1989) describes the practice of a teacher selecting an appropriate story germane to childhood crises. Next, she reads and discusses the story in class and then has the students act out the story in a role play or skit to further promote an understanding of feelings and viewpoints (p.205).

The role of the modern child and youth care worker is both complex and challenging. Maier (1991) supports the role of the child care worker in planning and participating in a wide range of diversified activities that are necessary for emotional health: “Age and situational appropriate experiences, a rich “diet” of planned as well as spontaneous activities, have to be continuously in the making” (p. 404). Thus, it is suggested that bibliotherapy be conceptualized as a planned emotionally healthy activity to increase a child’s insight, empathy and problem-solving skills, while concurrently addressing a current problem or crisis in the child’s life.

In addition to a treatment focus, bibliotherapy can also be used as a prevention technique. An educational prevention approach is intended to equip youngsters with new skills, knowledge and insight to prepare them for likely challenges they haven’t yet encountered. An example of this might be preparing preadolescents to deal with issues associated with teen pregnancy or substance abuse pressures from older teens. Other examples might include helping children cope with the ever-present issues in American society such as divorce and separation (Pardeck and Pardeck, 1987; Winfield, 1983), adjusting to stepfamily relationships (Coleman and Ganong, 1990) as well as coping with foster care and adoption (Pardeck and Pardeck, 1987). Bibliotherapeutic applications with special populations and specific problems have also proven to be very helpful. Several authors have provided compelling rationale for the use of bibliotherapy with emotionally disturbed and/or autistic students (D’Alassandro, 1990; Wallick, 1980), socially isolated students (Nickolai-Mays, 1987), victims of sexual abuse (Grindler, Stratton, McKenna and Smith, 1995) and learning disabled students (Gerber and Harris, 1983). Recently Pardeck (1990) suggested a model by which bibliotherapy can be used as both a prevention and treatment technique in helping adolescents cope with chemical dependency. Also, Manning and Manning (1984) have outlined procedures for using bibliotherapy with children who have
chemically addicted parents. In summary, bibliotherapy is best conceptualized as an activity intervention that can be adapted to the scope and practice of child and youth care work. The focus of the bibliotherapeutic application can have either a treatment or prevention foci that child and youth care workers can employ during structured leisure time in the cottage. The next section describes some recommended steps for conducting bibliotherapy sessions.

- **Step One: Assessment**

To begin using bibliotherapy with emotionally disturbed children and adolescents, it is important to remember that the child and youth care worker interacts collaboratively with other treatment team members. A review of the child’s treatment plan will typically indicate problem areas that can be addressed through the use of select materials as part of the bibliotherapeutic process. For example, Mary’s issues of coping with an alcoholic father, a dysfunctional family and her own abuse of alcohol was identified through the treatment team planning process.

Once the child and youth care worker is reasonably certain of the identified problem(s), then he/she must determine appropriate materials to choose to begin the guided reading. Though there is no recognized uniform way to group materials under developmental or disability needs for children and adolescents, several sources might prove useful in this respect. *The Bookfinder: When Kids Need Books* is a most useful compilation of children’s literature that specifically addresses problems that children typically experience during childhood and adolescence (Dreyer, 1995). More recently, a publisher’s catalog lists over sixty major topics also suitable for bibliotherapeutic applications including such topics as adoption, family illness, self-awareness, learning disabilities, social behavior and teens’ problems (Paperbacks for Educators, 1997). Another extensive list suitable for bibliotherapeutic applications dealing with such controversial topics as AIDS, absentee fathers, racial issues and sibling rivalry has been compiled by Ouzts (1991). Also, electronic data bases may prove very useful as well and these are available through local library or college media services. The use of the Internet and select Web sites would also be excellent outlets to explore. Additionally, child and youth care workers are encouraged to discuss their needs with specially trained librarians familiar with child and adolescent literature to assist them in finding developmentally suitable material to use with their residents.

- **Step Two: Conducting the Session**

Step two involves conducting a bibliotherapy session and the steps to determine the number of sessions needed. Initially, a problem area will be pinpointed based on a review of the clinical treatment team goals. The child and youth care worker then reviews and selects developmentally
appropriate materials for his child. It is important in this process to not only match the appropriate material to the child’s problem, but also to his/her developmental reading level. Reading levels that are either too complex or too easy will do much to hinder the effective application of the bibliotherapeutic process. The child and youth care worker must read the book in its entirety and make a judgment as to the appropriateness of the material for his particular child. Next, a decision must be made as to whether or not the child and youth care worker should run an individual or group session. Several children identified as having similar problems would benefit from a group-guided literature experience. Though group applications of bibliotherapy are clearly more cost efficient, it is recommended that for residential treatment centers an individualized approach be utilized due to idiosyncratic problems and varied reading levels. Once decisions have been made as to whether a group or individual approach is appropriate, the child and youth care worker will need to ascertain the number of sessions necessary to accomplish the reading and processing of the selected material. Though there are no hard and fast rules as to the number of sessions and length of sessions, it is generally recommended to use a time period that is appropriate to the developmental needs of the child. The setting should be one that is familiar and comfortable to both child and adult and as free from outside distractions as possible.

Prior to the actual reading assignment, it is a good idea to activate the child’s background knowledge with use of examples and probing questions. The intention here is to provide an interest "hook" to motivate the child while at the same time providing a road map for where the story is heading. Assignments are given in which the child is asked to either read the material silently in anticipation of the session, or the child and youth care worker may simply read the material out loud with the student during the session. For very young children or nonreaders, the book may need to be read to the child. Reading aloud to the child, silent reading, choral reading or any combination of these may be used in each session. Next, the child and youth care worker asks clarifying and insight-oriented questions based on the readings. For example, can the child identify with the character in the particular story, the day-to-day struggles, and resolution of those struggles? It is the job of the child and youth care worker to ensure that the child can actually understand and identify with the characters. The child care worker should ask thought-provoking questions, for example, “How did Ellen resolve her conflict with her father and mother?” or “What other steps should Ellen take at this point in her life?” in the hope that the child can then identify a strategy in her particular life circumstance. Again, in this guided therapeutic process it is the adult serving as the role model/mentor to a child by helping the child gain insight and thus improving his/her problem-solving skills.

Also, child and youth care workers can use a variety of additional techniques to facilitate or augment the children’s understanding of the
various characters and resolutions of difficulties within the story. Hendrickson (1988) for example, recommends the use of dramatic expression involving such media as art and puppetry with elementary-age students to assist them in developing insight. Group projects such as a group collage or an actual enactment of the characters through a play may be an appropriate vehicle by which to assist middle-school-age children and adolescents in identifying with the characters. Various writing projects involving the use of journals might also be appropriate, as would a videotape interpretation of the book projected through the student's own particular set of lenses.

• **Step Three: Evaluation**

The last and final step after the child and youth care worker has conducted the actual sessions is to evaluate the bibliotherapeutic process. One method is to have the student engage in self-reflection. Self-reflection using portfolio approaches has proven to be very effective in academic settings to promote an internal locus of control and to assist the student in taking ownership of her learning, essentially the outcomes of her actions (Wesson and King, 1996). Useful in this process is to have the student fill out a structured self-reflection form. For example, the child should answer questions that are open ended: “Things that I learned from reading this book ...” or “Characters I related best to in this story were ...” Additionally, such questions as asking the student if he or she would like to read additional topics, additional selections on that particular problem area or by that particular author can also be addressed. Moreover, child and youth care workers can use a daily monitoring form to be completed after each individual session in which such questions as to whether or not the child participated or understood the meaning of the text or was able to relate to either the characters or the themes of the text could be examined (King, 1995). In summary, the child care worker should utilize some form to record not only the student’s responses to the bibliotherapy sessions, but also his or her own interpretation of the child’s performance and understanding during these various sessions. Optimally, this information should be relayed back to the treatment team specialists at regular review times as well as individual counselors or therapists.

• **Concluding Comments**

This paper examined a very cost-efficient model by which to empower child and youth care workers with an effective methodology to assist children and adolescents in developing insights into their problems. While bibliotherapy does not fall under the traditional hallmark psychotherapeutic applications, it can be thought of as a humanistic and educational activity by which to help children and adolescents develop
an understanding of their life events. Inherent in this is the need of a concerned adult who will provide the time and patience to give a child guidance by following the steps outlined in this paper. Such insights gleaned by the child and youth care worker can prove very helpful in not only understanding but monitoring the psychological and emotional development of the child during the treatment process. Thus, it is hoped that the judicious use of bibliotherapy should do much in creating the humanistic bond of caring between the child and youth care worker and the children for whom they are responsible.

References


