

An Investigation of the Role of an On-Site Library in the Provision of Adjunct Bibliotherapeutic Treatment for Emotionally Disturbed Youth

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Abstract: Using a mixed methods approach, this three-phase research study will investigate the role of a professionally staffed, on-site library in the treatment of emotionally disturbed children and adolescents who are residents of an intermediate care in-patient treatment facility in Upstate New York, U.S.A. At the present time, there are no professionally staffed libraries in any such facility in New York State so this three-phase exploratory study aims to fill some gaps in the extant research on the use of bibliotherapy, and the use of library resources and services by mental health care staff, teachers, and patients in such facilities

Keywords: bibliotherapy, emotionally disturbed children, mental health treatment

1. Introduction

The research will investigate the role of a professionally staffed, on-site library in the treatment of emotionally disturbed children and adolescents who are residents of an intermediate care in-patient treatment facility in Upstate New York, U.S.A. The study will also investigate the use of bibliotherapy as an adjunct treatment and the role of the library (and librarian) in the provision of this treatment. At the present time, there are no professionally staffed libraries in any such facility in New York State so this three-phase exploratory study aims to fill some gaps in the extant research on the use of bibliotherapy, and the use of library resources and services by mental health care staff, teachers, and patients in such facilities.

Using a mixed-methods approach, the study seeks to answer the following six research questions:

1. What is the awareness and/or perception of bibliotherapy (BT) among the mental healthcare providers and teachers at the Western New York

Children's Psychiatric Center (WNYCPC) and is it used in this specific treatment environment?

2. What are the perceptions among the mental healthcare providers and teachers of the children's psychiatric facility of the on-site library and how is it used in the treatment and education of patients?
3. How are the materials and services offered by the on-site professionally staffed library used by its user population (patients and staff)?
4. What are the perceptions among the mental healthcare providers and teachers of the on-site professionally staffed library's role in the treatment and education of patients?
5. What are the perceptions among the mental healthcare providers and teachers of the *potential* for using BT as an adjunct treatment option after exposure to a professionally staffed and programmed library environment?
6. Is there evidence to suggest a relationship between the willingness to provide BT as an adjunct therapy and the ready access to appropriate resources needed to provide such treatment?

2. Theoretical Framework: Bibliotherapy

Bibliotherapy, also called book therapy, has been an informal part of mental health treatment since the institutionalization of mental health care in the early-mid 1800s. In their respective reviews, Fanner and Urquhart (2008) and Brewster (2009) note the long history of libraries and book therapy being used in the provision of care for the mentally ill, describing the pioneering bibliotherapeutic work of librarians, especially in the United States. When asylums and hospitals for the mentally ill expanded in the mid-19th and 20th centuries, most contained libraries, which were a regular part of the treatment and recovery process. Interest in patient libraries was at its height during the interwar periods with Bryan's (1939) identification of the six objectives of bibliotherapy (as discussed by Brewster, 2008, p.115):

1. Show the reader they are not the first to have the problem.
2. Permit the reader to see that more than one solution to their problem is possible.
3. Help the reader to see the basic motivation of people involved in a particular situation.
4. Help the reader to see the values involved in experience in human terms.
5. Provide facts needed for the solution of the problem.
6. Encourage the reader to face their situation realistically.

Brewster (2009) defines 2 kinds of bibliotherapy in the context of mental health treatment: "Self-help bibliotherapy uses non-fiction materials recommended by therapists and medical practitioners to provide patients with informational and practical help as they deal with mental health problems while creative

bibliotherapy uses fiction and poetry in both individual and group settings to ‘promote better mental health’” (p.400).

While numerous librarian-authored papers were written during the interwar period, none were empirical studies providing evidence for the formal inclusion of BT in treatment or the systematic development of training programs in BT. Instead, they were descriptive and anecdotal in nature. Thus, as education in medicine became more formalized and evidence-based, those therapies not grounded in empirical evidence were ignored. In his 1945 review, Schneck noted that even though BT had generally been accepted as being beneficial to psychiatric patients, clinicians, namely psychiatrists, neither studied nor published research on BT. It is not clear whether this was due to the difficulty in developing empirical studies to research BT or because for the most part, BT was initiated by librarians, rather than medical specialists. Regardless, the lack of empirical evidence persisted.

Post-war expansion of formal medical education and the lack of empirical studies on the efficacy of BT continued to hamper its recognition or development as a formalized therapeutic service. Despite a renewed interest in the application of BT to health provision as well as education during the period spanning the late 1960s through the 1980s (see, for example, Riordan & Wilson, 1989; Rubin, 1978), empirical evidence supporting the attributes of BT was still lacking. There were calls for BT to be legitimized by a more scientific approach to its study (Wenger, 1980) which might, in turn, lead to the development of formalized training (Armstrong, 1983). However, such aspirations have yet to be realized despite a general, though anecdotal, recognition of BT as an effective adjunct to more generally accepted therapies in the treatment of some kinds of disorders (Chiovarelli, 2010; Riordan, 1991; Starker, 1986).

Fanner and Urquhart (2008) observe that “[t]he role of the library in the care of the mentally ill continues to be well-recognized, and librarians often take part in programmes of rehabilitation and bibliotherapy. Finance continues to be the key barrier to investment; there are no requirements for hospitals to have libraries, therefore services may be targeted when costs need to be reduced” (p.246). Certainly, it is not unreasonable to presume that a conspicuous lack of empirical evidence supporting the impact of BT on treatment is a contributing factor.

The current focus on evidence-based medicine and evidence-based approaches to research has afforded an opportunity for BT to be researched in a more systematic manner. A number of systematic reviews and meta-analyses examining the efficacy of BT as an adjunct treatment to traditional mental health therapies have been undertaken. Most notable are those by Marrs (1995), Fanner and Urquhart (2008 & 2009), and Chamberlain, Heaps & Robert (2008).

Marrs’ meta-analysis of bibliotherapy studies (1995) is described by Fanner and Urquhart as “the most comprehensive meta-analysis of BT studies to date”

(p.239). The seventy study samples analyzed suggest that “BT may be moderately effective for the generally circumscribed problems and populations the empirical studies have addressed to date.” However, “[t]here is an almost complete lack of quantitative empirical evidence on whether affective bibliotherapy approaches (like poetry therapy) are effective” (p. 864). Marrs limited his examination to studies of adults with a resulting data set of subjects who averaged in their mid-30s, were well educated and primarily women (68%). No studies of children or adolescents were included in this meta-analysis. Pardeck (1984, 1990a, 1990b, 1991) conducted studies on the efficacy of using bibliotherapy with abused and emotionally disturbed children but since then there has been a dearth of bibliotherapeutic research with young people.

Furthermore, there is no extant research that examines the relationship between the likelihood for the provision of such treatment and the accessibility of information resources and library facilities. Coates (2008) examines librarians’ perceptions of the role of public libraries in the “information on prescription” (IOP) and “books on prescription” (BOP) programs in the United Kingdom (UK), but research into perceptions of the library’s role by health care providers is as yet undeveloped.

In their systematic review, Chamberlain, Heaps & Robert (2008) describe schemes of BOP programs in the United Kingdom and the cooperative programs between health care providers and public libraries. They surveyed different cities and programs to determine method and scope of delivery and found that “[t]here is a wealth of evidence that supports bibliotherapy for a variety of treatments in many clinical settings. Bibliotherapy is a cost-effective treatment that encourages patient participation and encourages partnership working for the statutory bodies” (p.34). Unfortunately, this review did not extend to institutional settings and focused solely on outpatient treatment of adults. Also, since no such formalized system of delivering bibliotherapy to mental health patients exists in the United States, the efficacy of such treatment outside of the UK is as yet, unknown.

Fanner and Urquhart reviewed the UK’s BOP program (2008) and surveyed participating psychiatric libraries (2009). They reviewed meta-analyses and systematic reviews of the use and efficacy of BT in treating various mental health disorders, i.e., depression, panic disorder, self-harm, etc., and included an examination of evidence-based studies of the means of delivering BT interventions as well as the education and information needs of mental health service users. Their examination of the studies of patients’ educational and information needs revealed “a consistent requirement for educational and leisure facilities...” (p.242), as well as the need for information on illness, medications, and the mental healthcare system.

A number of studies examined patients in different environments including institutional settings. For instance, identified needs for in-patients included

accurate information, preservation of dignity, access to creative therapies, and help to reintegrate into society as key requirements among others (Campling, Davies & Farquharson, 2004). "... [U]sing bibliotherapy and associated interventions in the treatment of mental illness is supported by the evidence. Effectiveness is significantly increased when bibliotherapy is used in conjunction with psychotherapies, suggesting that treatment of in-patients could be beneficial, although further studies are required." (Fanner and Urquhart, 2009, p.243).

Forrest (1998) notes that bibliotherapy for children and adolescents "appears" to help children to develop and cope with problems. Furthermore, Schlenther (1993) observes that librarians have traditionally produced "guidance for such services" (see discussion in Fanner and Urquhart, 2008, p.247) While BOP and IOP schemes presently being used in the UK with adults are producing noticeable results, "[t]he current role of libraries sited within mental health services in assisting service users with therapy seems less clear" (p. 247).

3. Methodology

This project will use a mixed methods approach. In Phases I and III, data collection and analysis will be primarily quantitative with some qualitative methods used in follow-up semi-structured interviews. Data collection and analysis in Phase II will be primarily qualitative.

Phase I

In this phase, attitudes towards, and use of the on-site library by patients, mental health care staff, and teachers will be measured both before and after a professional librarian/media specialist is placed in the library. The data collection instruments to be used in this phase will be a pre- and post-questionnaire that will elicit data on attitudes toward and actual use of the on-site library as well as the participants' knowledge and use of bibliotherapy as an adjunct treatment option or teaching method. The questionnaires will be based on Townsend's *Attitudes Toward Bibliotherapy Scale* (2009). Each of the participants will be encouraged to volunteer to participate in follow-up semi-structured interviews, which will provide more detailed responses than can be elicited from a questionnaire. The interview questions will be informed by the analysis of the questionnaire responses.

Phase II

In this phase, the participants will be patients, paid and volunteer staff, and teachers. The data collection instruments will consist of participant observation where a professional Library Media Specialist will be employed in the on-site library to provide traditional library services as well as structured, collaborative (with facility staff) and ad hoc programming. The data on the use of the library's resources and services by patients and staff will be collected by the

Library Media Specialist and two research assistants and recorded in journals and field notes.

Phase III

Participants will consist of paid and volunteer staff, and teachers. The data collection instruments will be a questionnaire that will elicit data on attitudes toward and actual use of the on-site library in addition to data on the participants' knowledge and use of bibliotherapy as an adjunct treatment option. As with Phase I, participants will be encouraged to voluntarily participate in follow-up interviews. Interview questions will be based on the post-questionnaire analysis and will also explore areas of interest.

Data Analysis

The data will be analyzed to compile evidence to support or refute the need for additional and/or expanded research on the role of a professionally staffed on-site library in both the treatment and education of youth in an institutionalized behavioural health setting. In Phases I and II, data collected by use of the questionnaire will be compiled and analyzed using accepted statistical methods for the social and behavioural sciences, specifically SPSS. Data collected through the semi-structured interviews will be coded with use of the NVivo software package and analyzed using the Constant Comparison Method (Glaser & Strauss, 1967). Data collected in Phase II through participant observation (recorded in journals and field notes) will be coded with use of the NVivo software package and analyzed using the Constant Comparison Method (Glaser & Strauss, 1967).

4. Significance of the Study

This study will not only provide evidence of the impact of a professionally-staffed library to the patients and staff of an institution for emotionally disturbed children, it will also provide evidence to support additional research into the efficacy of bibliotherapy as an adjunct treatment in psychological and psychiatric care. This will add to the research findings from studies conducted in the United Kingdom that suggest that a formalized system of "information prescriptions" (IP) and "books on prescription" (BOP) benefits patients in terms of reducing recovery time and improving treatment at a cost savings (Chamberlain, Heaps & Robert, 2008). To date, however, the populations subject to such studies are limited to adults with mild to moderate disorders treated in outpatient settings. Since little research has been conducted with children, the present study would begin to bridge this gap. Furthermore, this research moves beyond formalized provision of self-help bibliotherapy to determine if a young patient's access (both directly and through their health care providers and teachers) to a professionally staffed on-site library may play a role in his or her treatment.

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