



The Bibliotherapy Program: Requirements for Training

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THE CONTENTS OF BOOKS can and do have a long-lasting influence, for they not only engage current attention but also provide a source of recorded fact, words and roots of the past and present, which assist both generally and therapeutically in dealing with the stresses and strains of everyday living.

Modern therapy stresses the treatment of the total personality, the whole man, and is directed toward reorientation of the individual's relation to himself as well as toward his disturbances in relation to others. Its main emphasis is upon understanding. It seeks to lead the person out of neurotic development and to make available to him resources which lead toward healthy growth. Its ideal is liberation and utilization of those energies and forces which may lead to a patient's effective communication and self-realization.

Like other types of therapy, bibliotherapy has its aim, values, and goals. As new knowledge concerning the individual is acquired and new theories are evolved, it will advance. Like any other type of therapy, other than that which is purely clinical, it involves the person and his growth, or in this case, it is aimed at growth of the personality. It then attempts to foster growth in values and in ability to communicate in a positive manner within one's self, to others near one, and more generally in the social structure as a whole. Bibliotherapy shares with all aspects of rehabilitation and education an affirmation of the growth of spirit which results in a desirable change from a sociological as well as an individual viewpoint, through the insight gained from the values and emotional experiences of reading. It is directed toward causing the individual to become aware of his own worth and dignity and to have some realization of the intangibles

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that give meaning and savor to his life, as well as the spiritual values which will make him feel secure.¹

The scope of bibliotherapy includes the aims of the field of adult education and also the skills, knowledge, understanding, appreciations, and insight which affect the reader culturally, vocationally, intellectually, and spiritually. In a clinical setting it is the process of using reading material in a way that will help the reader want to get well, help him to get well, and help him to sustain his health upon his return to the community.

The approach of bibliotherapy need not be limited to any one age group. It requires only that the individual will have reached the age of ability to read or to understand, for the literature used in bibliotherapy exists at all ages—pre-school, elementary school, pre-teen, adolescent, and adult. It encompasses the reading materials prepared for all age levels, including the very artistic, well designed picture books for the pre-reader which can assist in inculcating an acute sense of form and design at an impressionable age, a sense which may become the foundation of future appreciation and performance.

Literature has been used as bibliotherapy by some who have been working with problem children and juvenile delinquents.² Psychologists recognize the importance of such material in the verbalization and language expression which is so vital in the development of the personality. Reading materials have been used by psychologists and psychiatrists, over a long period of time and upon many occasions, more often than not with the librarian rendering advice and guidance concerning the choice of titles to be used.^{3, 4}

With the increase in emphasis upon gerontology which accompanies the growing number of senior citizens in our society, skillful use and guidance in reading can be a current and potential source of satisfaction in the lives of the aged. It is well known to geriatricians that much of what is diagnosed as senility is due to lack of mental stimulation.⁵ At this level bibliotherapy can be adjuvant therapy which combines reading techniques, educational procedures, and retraining skills and which develops new forms of recreation and hobbies, new interests, and new reactions for continuous, fruitful motivation in living.⁶ In addition, much can be done to foster the creation and use of reading aids for the older or handicapped reader.

The value of reading materials in work with the blind is nationally recognized in the program of the Library of Congress, which under special appropriation provides gratis all kinds of reading materials and aids for use by the blind.

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The bibliotherapist, then, views a large horizon, which includes both the general field and the specific case. On the one hand, he uses reading materials and reader interest and abilities to assist individuals of all ages with varying needs and drives to adjust to a rapidly changing culture and technology. On the other hand, he uses them to assist in alleviating mental discomfort brought about by physical or mental symptoms, to aid in removal of the cause of the discomfort, to help in healing and strengthening the ego, and to give direction toward integrative values which will enable the person to withstand further stresses and strains of either a physical, mental, or emotional nature.

To become a bibliotherapist, an individual needs the personal qualities, the emotional stability, the physical well-being, the character, and the personality necessary for him to work successfully with people. This work includes supervision and instruction of other personnel and co-workers, as well as a thorough understanding of the community. The demands of his work require a willingness to recognize the misfortunes of others and to react with sufficient facility to be of help. In addition, such a specialist has to understand the goal desired in each instance, be willing to accept responsibility for action taken, and be able to assume authority whenever necessary. Furthermore, it is necessary for the therapist to recognize and control personal prejudices, to be receptive to new learning, and to direct and channel personal feelings in a manner that would not impair his helpfulness to others. As a bibliotherapist such a person needs to assume responsibility for the selection of reading materials; his selections would be based upon the understanding of cause and effect as they relate to the physical, emotional, and cultural factors related to the reader.

An understanding of and a feeling for what goes on when one person talks and another listens are of primary importance to anyone undertaking this aspect of librarianship. A thorough knowledge of disturbances in communication, whether distortions in perception (listening) or in transmission (speaking), and an ability to communicate with and feel a real interest in the other individual are of great value.

The bibliotherapist must recognize that the reader may be a suffering being, and he must try to reach within the patient for what is basically growing and resourceful. In addition, the therapist must have his own personal problems reasonably worked through, at least to the point that they will not interfere with his constructive relationship with others. Along with the foregoing, he must believe in man's inherent ability to change and to grow toward self-realization; he

must have a feeling for the process of changing, a knowledge of the reader's possible fear of it, and sufficient skill to handle effectively the defenses against it. Again, he must be sympathetic and use this attribute to express warmth, understanding, sincerity, and respect for the reader's own wishes and rights.

Further, as a therapist, the librarian needs a code of ethics which would include recognition of the contributions of other professions, regard for the confidential nature of the responsibilities assumed, loyalty to the principles of sound personal practices, belief in basic democratic concepts, understanding of the dynamics of human behavior and of individual growth and change, respect for and understanding of the total personality—physical, emotional, intellectual, cultural, and social—and, finally, recognition of the importance of early and current environmental factors as they are pertinent to the reader's needs.

At present no formal courses devoted solely to the subject of bibliotherapy are described in the catalogs of any of the professional library schools. In schools of education and psychology, graduate and undergraduate courses in reading are limited primarily to skills, techniques, interpretation of the language, and the meaning of the writer. A majority of courses in the library schools are content courses which are directed toward information search and retrieval, literary content, reading level, and descriptive and subject bibliography. In many instances there is little emphasis on the effect of reading upon the individual. Although the library school curriculum is still oriented toward traditional librarianship and devoted to training as large a proportion of the student body as possible in accordance with existing standards, these curricula are generally changing with the needs and pressures of the social structure of the community and are accepting the interdisciplinary approach to many aspects of the curriculum.

In this consideration, one of the fundamental trends of our technological society becomes increasingly apparent: even as plans are organized and administered in the present, what were intended to be plans for the future need almost simultaneously to be put into operation as the future arrives sooner than anticipated. Bibliotherapy may well be considered part of the wave of the future. It represents thinking not yet acceptable to many librarians. Although when queried most librarians express great interest in the subject, an important majority seem to feel that librarians would do well to tend to their traditional gardens and not venture off into related fields. This re-

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action is similar to that expressed when documentation and use of machine indexing were first introduced; much of the opposing or dubious opinion has changed somewhat with the demonstration of the success of some aspects of mechanization. In this area an interdisciplinary approach is already being accepted.

Bibliotherapy, too, represents the need for an interdisciplinary approach. Much knowledge of the psychological foundations of personality and behavior now exists. The effect of the mental attitude upon sickness and health, the influence of unconscious behavior upon conscious behavior, and the discovery that there are certain drives that motivate behavior are among the generally accepted tenets of modern psychology. *Frustration, rationalization, and insight*, for example, are now words in the everyday vocabulary of laymen and specialists alike. Concepts which were not so long ago laboriously evolved and carefully discussed are now accepted as part of ordinary conversation.

The need for sustaining mental health in an effort to prevent an increase in the number of persons being treated for mental illness is currently recognized by the community, the state, and the nation. Because the inexorable march of statistics reveals an increase in the number of patients entering mental institutions and in the instability of many outside, research people have undertaken studies of the factors which relate to insecurity, over-dependence, loneliness, and dissatisfaction with living. As the statistical figures mount, the need for additional psychiatrists and psychologists is intensified.

A reconsideration of the values, insights, and personality is needed; for many the key to such reconsideration may well be buried in the mass of recorded wisdom, knowledge, and learning already available. Although librarians are generally aware of the existence and organization of this material in all its forms, their knowledge could be extended toward a deeper usefulness.

Training for bibliotherapy should be on the basis of the graduate program. The basic courses now given in the graduate library schools—cataloging, classification, reference, and bibliography of all kinds—along with the experience of working with a library public, would still be required. The bibliotherapist is primarily a librarian who goes further in the field of reader guidance and becomes a professional specialist.

It is necessary that the individual possess a basic, broad academic background plus the widest possible acquaintance with all types and

kinds of literature suited to all reading levels. As deep a reading knowledge as possible is also necessary. In the library school curriculum the traditional intensive courses of the kind which require the annotation of titles read, particularly of current reading material, provide this kind of depth and scope. Courses in children's literature and literature for young adults are also necessary since the bibliotherapist must be aware of the needs of all reading levels for which he might be expected to offer advice and guidance.

In addition, it is necessary that the bibliotherapist have an understanding of the principles of clinical psychology and learn some of the basic skills of the psychologist, for the bibliotherapist must know both the reader's clinical status and his abilities and interests. It is imperative that the bibliotherapist be able to evaluate the emotional significance of the patient's responses, to relate reading assignments to the patient's mental and emotional needs, and to make valid interpretations of his reactions to reading.

Particularly in the clinical situation, the bibliotherapist must work very closely with the physician. Indeed, he must recognize that here the overall responsibility rests primarily with the physician. Therefore, it is necessary that communication be established with the doctor, which would mean the need for a wide knowledge and understanding of medical, psychological, and psychiatric terminology so that the bibliotherapist could confer effectively with medical colleagues.

The bibliotherapist administers the reading program, evaluates capacities, assigns specific reading, makes progress reports, initiates requests for psychological evaluation when indicated, and constantly reviews and evaluates the program. Therefore, the curriculum should also include elementary psychiatry, psychology of the physically handicapped, the psychology of reading, techniques of rehabilitation, techniques of diagnosis and counseling, medical and social problems of illness, basic anatomy and physiology, rehabilitation of the aging, principles of motivation and remotivation, and the rehabilitation of different kinds of patients as well as the psychology of different kinds of ethnic groups. Courses in the techniques of clinical psychological testing should be included for background knowledge of this field, along with training in the interpretation of test results.

Training is also needed in statistics, report writing, and group dynamics. The bibliotherapist would follow-up as well as secure information regarding the nature of the individual's problem, the

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contributing factors in etiology, the physical and psychological duration of the illness, the tendency to relapses, the chemotherapy being used, and the like.

Experts in rehabilitation agree that up to this time the therapeutic process itself cannot be demonstrated to the student directly and cannot be reproduced experimentally, that many facets of the intricate human relationships which make up psychotherapy cannot be adequately presented to the trainee in a classroom setting.⁷ For this reason, field service training would have to be an important part of the bibliotherapy training program. Such a program would have to be organized in a manner similar to the practical work of social service, the supervised training in hospitals and clinics of clinical psychologists, and other on-the-job training.

This part of the bibliotherapy training program would be designed to provide experience and to assist in the integration of principles learned in the more formal manner already discussed. Such a practical approach would be imperative for the realistic acquisition of medical, psychological, and psychiatric viewpoints. Much of what has been discussed as necessary for the practice of bibliotherapy could be learned and reinforced as a result of this part of the program. This kind of participation would provide an opportunity to realize at first hand what the task is, what knowledge is required, how the program can be developed, and how to put into effect the necessary information received in the formal courses.

Such a program could be organized in cooperation with medical and mental hygiene clinics and hospitals. The administrative and medical staff of these institutions would have to be persuaded of the value of the program and the ability both of the training body and the student to carry out the objectives outlined. In the beginnings of such an experimental project, the institutions most likely to be receptive would be the hospitals and clinics in the area around the school or university, especially those adjacent to the campus, where the student would simultaneously be taking interdisciplinary courses in the various professional schools. It should be stressed here that, even though the bibliotherapist may not propose to work in a hospital situation at all times, these arrangements will provide the most concentrated and valuable training.

After the prospective bibliotherapist has spent time in the clinical setting, he would find of great value the same kind of field work in readers' advisory service in the children's, young adult, or adult de-

partment of a large public library. Perhaps two or three days or parts of days during each week for one semester should be devoted to this kind of training. The cooperation of interested and sympathetic physicians would be needed for any kind of success in such a program since expert knowledge and supervision are essential for this kind of a learning situation.

In addition to providing an opportunity to acquire needed experience and knowledge, the trainee situation as described can also be useful as a place to weed out at an early stage those who do not measure up, through lack of judgment, character problems, or insensitivity.

Careful thought should be given to the selection of participants in such a program, particularly in a new field such as this. Because the program of bibliotherapy would be in a crucial stage of development, the need for academic achievement would be most desirable. Much time and thought must be given by those conducting and supervising the program to exploring with participating psychologists and physicians the structure and possible needs of future courses, the personality of students judged to be most successful, and the integration into the course material of various aspects of other disciplines.

Concomitant with such specialization is a need for recognition and status. The library schools and the university campus need to supply not only the milieu for the necessary courses and supervision but also the acknowledgment of the specialty as such. Some kind of an accrediting agency would be needed. In the case of bibliotherapy, this could also be the agency that initiates the program and works closely with the library schools and the trainee in the clinical situation. This agency would need to have the authority of the profession behind it in order to recognize and sustain specialization in bibliotherapy. Such an agency in other professions is a national association; in this case it would be a national library association. In other professions such an association assumes accreditation authority. In this case, if such a responsibility were to be assumed, there would have to be a sufficient number of members of the national association who were alert and ready to proceed along the lines discussed above.

Much more study needs to be done in the field of the psychological effects of reading and the motivation of the human personality. However, much work has already been accomplished. Based upon this, bibliotherapy could very well be an important part of and an assistant to psychotherapy, specializing in reading counseling and guidance.

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