Bibliotherapy: Projects and Studies with
The Mentally Ill Patient

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For many years hospital administrators have recognized that the library and its program have a definite place in the hospital and that it is essential for the hospital to conduct a well-organized library having books and other media accessible for patients with trained librarians in charge. It is generally accepted that the utilization of books and other reading materials serves as an adjunct to therapy. The importance of the hospital library and the awareness of its conspicuous place in the overall hospital program are evidenced by the many articles that have been written on the subject. Over the years, the articles appear not only in library literature, but also in psychiatric, hospital, rehabilitation, and other related medical journals.

This paper will survey the literature in this area with emphasis upon the use of bibliotherapy with the mentally ill. It shall purport finally to indicate current practices, studies, trends, and needs as evidenced in the literature.

In 1959 a study by Artemisia Junier analyzed the literature which had been written on bibliotherapy from 1900 through 1958. The study included a comprehensive bibliography of 601 items published on the subject as directed toward hospital library service to patients. It analyzed these articles by dates published, types of publication in which the articles appeared, authors, and subjects of articles, and it included a subject index. Since some of the material covered at that time seems pertinent to an overview of the literature, portions of the study will be summarized here.

An attempt was made to classify the articles under broad subject headings. Because many of the articles included information about

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[136]
more than one subject, it was difficult to place some of them strictly into one category. The predominant subject area was the basis for the selection. It was found that 21 articles discussed hospital library administration; 55, book selection; 120, service to different types of patients; 35, librarians and their approaches and attitudes toward patients; 27, research in bibliotherapy. Twelve were concerned with the objectives and standards of hospital libraries; 19 were bibliographies; 64 articles were general descriptions of libraries and their activities; 93 elaborated upon the therapeutic values of reading; 50 were concerned with the need for and value of hospital libraries; three presented reading as a counseling technique; and 100 were general in content. These 100 articles covered several aspects of hospital library service, and because no one aspect was particularly dominant and because they did not fit specifically into any of the above categories, they were classified as general.

Over the 58-year period from 1900-1958 there were 35 articles that discussed the librarian in a hospital library. These articles stressed the need for trained librarians, as well as the need for the librarian to have adequate knowledge of books and to understand personalities so that he might apply this knowledge and adequately serve the patients. As described by these articles the hospital librarian must also have a pleasing personality and certain other traits such as sympathy, patience, and warmth in order to be able properly to approach the patients. Many of the articles pointed out the need for hospital librarians to have specialized training in applied psychology, as well as a knowledge of conducting and interpreting surveys and of establishing standards. Because librarians are influential in the mental life of the patient, they should be equipped with the understanding of the significance of human behavior.

Most of the 55 articles on the selection of books agreed that well chosen books and guided reading are helpful in restoring mental health. They also agreed in most instances that the librarian, with the help of the physician, must fit these selections to the patients and that their educational, social, and environmental backgrounds as well as the nature of the illness and their reading preferences must be considered. Some of the articles discussed the types of books that are read by different types of patients. Mystery stories, poetry, travel books, biographies, westerns, scientific books, and religious and humorous books are a few of the specific types of materials mentioned.

There was indication in some of these articles that certain types
of patients preferred a certain type of reading material; however, not all patients of one type agreed in their preferences with other patients of approximately the same type. It was generally indicated, however, that each book must be selected on an individual basis in accordance with the patient's background and reading preference.

Fifty articles dealt with the functional value of hospital libraries. These articles corroborated the importance of organized libraries in hospitals, the relation of the library to the hospital, the accomplishments of hospital library service, the values of hospital library service operated through the extension departments of the public library, the necessity of convincing medical and hospital authorities that no well conducted hospital can afford to be without library service, and the importance of hospital libraries to the hospital as a whole.

The 93 articles that were classified under reading as therapy agreed for the most part on the theory that reading can be used as therapy and treatment or at least that it has therapeutic value and is an adjuvant to treatment. There were no articles, however, agreeing upon definite techniques that would make bibliotherapy a science, and thus enable one to prescribe certain books for certain patients with certain known results. The hospital library was considered a therapeutic agent in which books were needed to train the patient's attention, to interest and instruct him and to alter his attitudes.

Sixty-four articles were devoted to descriptions of specific hospital libraries. In the descriptions of the services and activities in the specific libraries some of the topics covered were the number of years the library had been in operation, the number of persons on the library staff, the type and number of patients served, the number of books, descriptions of ward visits, circulation figures, descriptions of the location and the physical arrangements of such libraries, rules and regulations, and special projects of the libraries.

Income and expenditures, administrative organization, physical arrangement of quarters, equipment, publicity, and public relations were treated in 21 articles. In this category of articles there were discussions of weeding the materials collections and of the amount of time staff members needed to spend in actual service to patients in hospital wards.

There was only one article that specifically considered bibliotherapy as a counseling technique. This article, written in 1947 by a professor of psychology, gives impetus to the need for those working with maladjusted people to use various methods and techniques to
Bibliotherapy: Projects and Studies with the Mentally Ill Patient

understand people and their problems. This paper is not strictly devoted to hospital bibliotherapy; however, it is a valuable example of the use of books for therapy and of the tremendous power of the printed word.

Two other articles support the contention that bibliotherapy as a technique of guidance can be used to give insight and aid in the solution of personal problems. The author of these two articles was a consulting psychologist at the School of Library Service of Columbia University.

In 1949 the first doctoral dissertation on the subject of bibliotherapy was written, reporting on a clinical-experimental study exploring the theory and practice of bibliotherapy. A master's thesis was written in the same year. An article about Columbia University's School of Library Service's embarking upon a long-range bibliotherapy study was also written in this period.

In 1951 a dissertation, "Imaginative Literature as a Projective Technique," was added to the literature of bibliotherapy. There were 17 theses in the 1950-1958 period. The American Library Association Bibliotherapy Committee was responsible for four articles which described its progress in this area. Two other articles giving the contributions of research in bibliotherapy and the language-arts program were written by an educator.

There were 19 bibliographies found on bibliotherapy. Most of these were selective lists; however, six of them contained short annotations. Only two of the bibliographies were comprehensive at the time they were published.

Joint efforts of committees of the American Library Association, Special Libraries Association, and the Medical Library Association were responsible for three of the 12 articles in the area of objectives and standards. The articles considered the number of staff, books, and beds in the hospital and related the standards for a hospital library to these factors.

Many of the earliest articles discussed the value of and need for library service to patients in hospitals, along with descriptions of particular libraries and implications of the therapeutic value of reading. This practice has not decreased in more recent years. In the literature of the field there is added emphasis upon analysis, techniques, and devices that attempt to give verifiable knowledge to the truth of these earlier theories. However, no method has been devised that has proved bibliotherapy to be a science.
Schneck's work in this area is well known. In a report of two cases, he observed that bibliotherapy had definitely been advantageous in treating these particular patients. He mentioned the educational and recreational merits of bibliotherapy and its aid in eliciting conflict material, and he felt that treatment time was abbreviated as a result of its use. In addition, the prescription of reading matter enabled treatment to continue during the patients' absence from the therapist. In reviewing the literature in 1945, Schneck found a marked deficiency in the number of organized plans or programs of bibliotherapy, and in judging from the literature alone, he felt that much of what had been done seemed to be in many instances unorganized and haphazard. This author arrived at a similar conclusion after reviewing articles for this paper.

The Veterans Administration was very early interested in bibliotherapy. Any number of Veterans Administration hospital librarians, physicians, and others have reported in this area. Elizabeth Pomeroy found, as a result of a study which she made, that it was generally agreed that well chosen reading helps all patients who engage in it to be more contented. Based upon information contained in 1,538 case reports from hospital librarians, a study revealed that travel topics ranked highest in patients' interest while useful arts and biography were also popular. Ruth E. Rodier reported on her efforts with one patient in stimulating him to read and of the beneficial effect which this activity had upon him. Nina Johnson reported on the therapeutic value which various library programs had for mentally ill patients at the Veterans Administration Hospital in Augusta, Georgia. She concluded that "usually after some four months of effort, the groups of patients show definite progress in response and interest." Mrs. Peterson-Delaney has described many library activities with patients in her work at Tuskegee. Mental patients in the bibliotherapy programs are observed for study and their progress evaluated by psychologists and psychiatrists. From a survey which she conducted of reports from hospital librarians to the V.A. Central Office Louise Sweet concluded that the reading inclinations of patients are generally wholesome and uncomplicated. For the most part, says Alice Crosby, the literary tastes of neuropsychiatric patients are similar to those of other patients with similar backgrounds. Many statements have been made which indicate that librarians and others working with the mentally ill have found books and library activities to be helpful to the patient. These generalizations have not been substantiated by scientific research techniques.
Bibliotherapy: Projects and Studies with the Mentally Ill Patient

Funds were made available by the Veterans Administration for a project by Powell and others in which patients were followed simultaneously in reading and psychotherapy, in an experiment conducted with patients of the psychiatric clinic of Johns Hopkins. Three collaborators—one from education, one from psychiatric social work, and one from psychiatry and group therapy—followed nine patients concurrently in group therapy and group reading. The investigators found that both types of groups had value for different of the patients and that neither group by itself will produce complete therapeutic balance for all patients in the group. This type of study is an example of the team approach in patient treatment.

The attitudes of patients with regard to certain types of reading were studied by Robert Morrow and Margaret Kinney. In the report the authors outline their methodology to make it possible for others who attempt the same study to ascertain whether or not results are similar. This practice is a step toward the use of standard research techniques in conducting studies.

Lorna Swofford has reported a continuing research project with four groups of chronic schizophrenic patients at the Veterans Administration Hospital in Topeka, Kansas. Because a report has not been published, no details of the project are available at this time. There is some indication, as Baatz has pointed out, that librarians are beginning to examine bibliotherapy from a scientific viewpoint and to evaluate its position in total therapy. He and Gartland agree that from studies in the Veterans Administration hospitals, bibliotherapy appears to offer a method by which the patient may be helped to overcome difficulties in interpersonal relationships.

Bickel and a group attending a 1957 workshop in New York have given concrete suggestions for making the library experience a therapeutic one for patients in a psychiatric hospital. Their suggestions include reading aloud to groups of patients in closed wards, discussion groups in wards, the employment of patients in the library, and the inclusion of trips, movies, slides, and lectures as special non-book therapeutic parts of the program. This article is a good summary of the many and varied activities that can be part of a hospital library program.

In the light of the literature, a number of points are indicated. First, there is need to arrive at a consensus on the meaning of the term bibliotherapy. It is possible that much of the difficulty in acquiring an accurate concept of the scope of the problem lies here. The Bibliotherapy Committee of the American Library Association
is working to arrive at an acceptable definition through a recent questionnaire to librarians and others interested in the subject.

In reading and attempting to group the many articles found in the literature, one can see the diversified topics under discussion and the variety of activities that fall into the category of bibliotherapy within the hospital library where work is being done with the mentally ill. There is a need to determine what hospital library activities should be included in the practice of bibliotherapy. The question remains of whether, in our final determination, this subject will include everything that is done in hospital libraries or only those practices that attempt to measure the benefit which reading has upon the patient.

There is need to decide upon a measurement by which to determine who is educationally equipped to provide bibliotherapy—whether it should be provided by librarians, psychiatrists, or psychologists, or by their joint effort. We must also settle upon the question of who is qualified to teach those interested in learning the techniques of bibliotherapy and, of course, what these techniques are.

Margaret Kinney stresses the need for librarians to have specialized training in applied psychology, in addition to a knowledge of conducting and interpreting surveys and establishing standards, if they are to practice real bibliotherapy. Graham asserts that the requisites of a librarian working in a hospital for the mentally ill are three-fold: he should have proper insight into abnormal reactions, patience, and a never-flagging interest. In working with the mentally ill, individually or in groups, one must have some basic knowledge of the behavior of the mentally ill even though, as Schneck has pointed out, “rarely is one person sufficiently well versed in general literature and experienced in psychiatric work to permit him to bear full responsibility in a program of bibliotherapy. A team of workers is more effective.” Librarians could not be expected to be good librarians, to know books, and to be versed in all other necessary areas. Perhaps what is needed is a coordinator whose duty would be to correlate the work of the librarian with that of the psychiatrist, the psychologists, and others in setting up studies and interpreting the results. This person would be the bibliotherapist.

From the literature another area of deficiency is to be noted in that there was no mention of training courses in this aspect of hospital librarianship. The particular type of training which is needed must be determined, and then library schools may help by providing
Bibliotherapy: Projects and Studies with the Mentally Ill Patient

for these needs in formal courses in their curricula. Even in a recent article on education for hospital librarianship, no courses akin to bibliotherapy were listed.

Miss Swofford has reported on a training course called "Group Bibliotherapy With Long Term Patients" that is now in progress at the Veterans Administration Hospital, Topeka, Kansas. She is the leader, and Dr. Ethel Bonn is psychiatrist and bibliotherapy consultant. The membership of the class includes five administrative or supervisory nurses and two ward nurses. It would be interesting to know more of the subject content and the aims of this training course, as well as how and why the members of the class were selected.

A number of articles indicate a need for research, but the problem seems to be one of how this research should be conducted. In 1959 the interdisciplinary committee of the American Library Association set up the following procedure for a bibliotherapy research project. Through a mutual exchange of information and method this committee (with appropriate subcommittees) would aim to (1) summarize available literature; (2) define researchable areas in the effect of reading upon patients in hospitals and institutions; (3) suggest usable research techniques for study and analysis; (4) determine priority in problems to be attacked; and (5) recommend necessary initial surveys and studies to secure base-line data.

Proposals for carrying out the above procedures by way of a grant in the amount of $18,331 have been submitted to the National Institute of Mental Health, but have not been approved.

We have to understand the problems connected with research in this area. As Miss Tews has pointed out, the most obvious limitation of reading as a tool in treatment is its intangibility. The patient must have mastered the mechanics of reading and be able to understand what he reads and be intelligent enough to transfer from his reading to his difficulty. Other factors limit this transfer when it is to be attempted with the mentally ill. Because librarians in hospitals are responsible for the library service to all the patients in the hospital, the time which they can spend on special research projects is limited.

We need to know in detail what happens to the reader when he is involved with ideas in books, not just what categories of patients read what varieties of books. Oathout also suggests that the categories that are utilized, both of patients and of reading matter, are much too broad and often meaningless. Very close and almost imme-
diate observation of the patient involved is imperative if the therapist is to be able to attach that patient's reactions to some idea which he has read in a book.

There are some ways and means from which assistance or participation in research might come. Goldhor \(^{31}\) has suggested six areas for research in librarianship, some of which could apply directly to research in bibliotherapy with the mentally ill patient. Candidates for the master's or the doctoral degree in library schools could select subjects of this nature and make valuable contributions in helping to supply ground-work information. For technical assistance, we might turn to the associations of other professions, philanthropic foundations, and universities.

Hospital librarians are likely to be the best and most promising source for future bibliotherapists if a research program of any great magnitude is ever to develop, simply because there are more of them than of any other group and because they are in the best position to collect the needed data and observations. For any research project there must be guidance and control. The American Library Association, through the Bibliotherapy Committee, is the logical agency to initiate and guide a planned program of research on a national scale.

In spite of the many articles that have been written the literature seems not to have presented any new ideas in the last several years on work with the mentally ill. It is interesting to note that in a recent list by Kraus \(^{32}\) of 18 recommended titles there were only four which had been written in 1960. Two of these were concerned with reading with children, and one was a psychiatric dictionary. There were only two articles on the list which had been published in 1958, and one in 1957. Seven out of the eighteen articles were written before 1957. These figures seem to indicate that no new trends or ideas are in print, and that in introducing newcomers to the field we must rely upon articles written more than five years ago.

Can there be a science of bibliotherapy? Miss Bryan \(^{33}\) asked this question in 1939, and 23 years later we have few answers. There seems to be a trend toward studies of a more scientific nature, but there are fewer articles being published. From the literature one would observe that very little definitive work has been done. Either hospital librarians are not conducting research studies, or they are not reporting these studies in the literature. One feels that perhaps everyone is waiting for something, possibly a goal, some new ideas, or maybe for some direction.

[144]
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[146]