Perceptions of Bibliotherapy: A Survey of Undergraduate Students
Randie D. Camp, M.S.
2015

Perceptions of bibliotherapy: a survey of undergraduate students

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Perceptions of bibliotherapy: A survey of undergraduate students

by

Randie D. Camp

A thesis submitted to the graduate faculty
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Program of Study Committee:
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Iowa State University
Ames, Iowa
2015

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First and foremost, this work is dedicated to my amazing son, Noah, who has filled my soul with an incredible amount of strength, inspiration, and love. His love for reading and writing puts a smile on my face and our story times bring meaning to my work with bibliotherapy.

Secondly, I dedicate this work to every reader who has found themselves or comfort in between the pages of a book.
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I would like to thank my co-major professors, Dr. Anne Foegen and Dr. Linda Lind, and my committee member, Dr. Amy Popillion for their instrumental guidance and invaluable support throughout the course of my graduate studies, research, and writing.

In addition, I would also like to thank my colleagues, department faculty, and staff for making my years at Iowa State University an enriching experience. I offer my appreciation to my survey participants, without whom, this thesis would not have been possible. A special thanks to Dr. Amy Popillion and Dr. Patricia Carlson for allowing me to conduct my survey in their courses.

Finally, thanks to my family and friends for their unwavering patience, astounding encouragement, and incredible support as I diligently dedicated my time and attention to my graduate studies and research.
ABSTRACT

Children and adolescents are faced with a growing number of life’s challenges. Oftentimes, it becomes the responsibility of teachers to assist students in coping with these frequently non-academic issues. Bibliotherapy is one instructional tool teachers can use to help children and adolescents cope with their diverse needs and life’s challenges. In the context of K-12 settings, bibliotherapy is a systematic process utilizing books to transform traditional reading into an instructional strategy to assist educators in meeting the needs of all students. For bibliotherapy to be effective, educators need knowledge of the recommended procedures and understanding of how to guide students through the bibliotherapeutic process. Additionally, educators need to feel confident in the interventions they are implementing with students.

The purpose of this survey design research study was to gain insight into the perceptions of 248 undergraduate students from a large mid-western university in regards to bibliotherapy implementation in K-12 classrooms. This thesis reviews current literature on bibliotherapy and teacher perceptions, presents perceptions of bibliotherapy held by 161 preservice teachers (PSTs) and 87 non-preservice teachers (non-PSTs), and offers insight into some of the factors and concerns influencing the perceptions of the undergraduate sample. Data were collected using a survey which contained demographic items, rating scales, and open-ended items to gather both quantitative and narrative data. Independent samples t-tests and descriptive statistics were performed to analyze quantitative data. Content analysis procedures guided the inductive coding and interpretative reporting of narrative data collected.
The results of the study indicate little significant difference between PSTs and non-PSTs in regards to current level of understanding and perceived acceptability of bibliotherapy implementation in K-12 classrooms. There was a statistically significant difference between groups in regards to perceived level of comfort of personal bibliotherapy implementation. Participants’ perceived level of comfort was found to be more heavily influenced by teacher-centered factors as opposed to student-centered factors. While five main concern themes emerged from participant responses, the most surprising concern of bibliotherapy expressed by the undergraduate students was the fear participants held in regards to receiving negative responses from parents, colleagues, and administrators.
CHAPTER 1

INTRODUCTION

“And it is through fantasy that children achieve catharsis. It is the best means they have for taming wild things.”
-Maurice Sendak

Background Information

The current state of today’s schools is changing as the population of our nation becomes more diverse in terms of new family formations; rapid growth of ethnic, racial, and cultural diversity; increases in mental health issues, economic troubles; and a range of other trending demographic shifts that contribute to society’s make-up (Gavigan & Kurtts, 2011; Hyun, 2006; Johnson, Wan, Templeton, Graham, & Sattler, 2001; Miller-Lachmann, 1992; Sanacore, 2012). In addition to the demographic changes in today’s student population, children and adolescents are also experiencing developmental changes unique to past generations as a result of technological advances, growing media influences, and greater access to information (Roberts, Henriksen, & Foehr, 2009). Over the course of their academic years, children and adolescents may experience a range of issues that have the potential to put youths’ well-being at-risk, such as divorce, moving, racism, death, homelessness, disruptive behaviors, illness, disabilities, deployment of a military parent, violence and abuse, emotional or mental health disturbances, substance abuse, bullying, and poverty (Flanagan, Vanden-Hoek, Shelton, Kelly, Morrison, & Young, 2013; Forgan, 2002; Iaquinta & Hipsky, 2006; Johnson et al., 2001; McCarty & Chalmers, 1997; Ouzts, 1991; Pardeck & Pardeck, 1984; Rasinski & Gillespie, 1992; Rubin, 1978).
These problems are not limited to just the homes and neighborhoods of children and adolescents—they spill over into their school day and influence many aspects of their development and academic performance (Johnson et al., 2001; Rasinski & Gillespie, 1992). These changes may leave children and adolescents without a consistent adult to help them in coping with personal issues and stresses—especially in cases of minority youth (Sanacore, 2012). The increased risk for minority youth is not to be overlooked as nearly a fourth of the US population was composed of a minority (non-White) race in the 2010 Census (Temple, Martinez, & Yokota, 2015). Youth experiencing multiple challenges at once are at increased risk for negative outcomes such as delayed development, poor academic performance, dropping out of school, emotional and behavioral disorders, delinquency, substance abuse, and other undesirable consequences (Kauffman & Landrum, 2009; Miller, 2013; Prater, Johnstun, Dyches, & Johnstun, 2006; Schreur, 2006).

Equipping teachers with instructional strategies to address these sensitive and challenging topics can be difficult because there is a misconception that schools are solely institutions for teaching academics. Educators often do not receive instruction on how to address non-academic needs of children and adolescents in the classroom setting. However, child and adolescent development and growth is not limited to academic knowledge. Children and adolescents have needs that exceed instruction on reading, math, science, social studies, and the arts. Each child and adolescent is unique and comes to school with his or her own set of personal characteristics, ability levels, experiences, diverse backgrounds, personal problems, and other issues that are just as critical to their development and growth as their academic attainment. But who is helping children and
adolescents cope with these non-academic issues? Who can children and adolescents count on to be a stable, consistent, constant influence in their lives?

For many children and adolescents, the answer is parents. But for a growing number of youth, that answer is teachers. Some professionals in the field have suggested that teachers are responsible for identifying signs of stress in students and helping them cope with stressful feelings and situations (Grace & Shores, 2010). These children and adolescents bring their non-academic issues to school with them on a regular basis and teachers may be their only source for comfort, guidance, and information on how to cope with their challenges.

**Statement of the Problem**

Are teachers prepared to help children and adolescents with life’s challenges and contribute to the non-academic development and personal growth of students? Is the field of education equipping new and beginning teachers with strategies and resources to assist them in supporting diverse students with non-academic issues and challenges? Are teacher training programs producing preservice teachers (PSTs) capable and confident in their ability to guide children and adolescents through coping with and better understanding themselves, situations, and challenges in a manner that promotes healthy coping and acquisition of skills needed to successfully handle these non-academic stresses and problems troubling youth?

The answer is not an overwhelming yes. Many teachers do not possess the knowledge of, or confidence in, intervention methods to assist their students with non-academic issues in a manner that is sensitive to the emotional and social developmental needs of children and adolescents (Grace & Shores, 2010; Pardeck & Pardeck, 1984).
Others have noted ineffective or non-existent training for teachers (Forgan & Gonzalez-DeHass, 2004; Forness & Kavale, 1996). This is a significant concern, especially considering that there are 3.8 million elementary and secondary teachers in the United States (Goldring, Gray, & Bitterman, 2013).

Bibliotherapy is one approach for teachers to guide children and adolescents in coping with life’s problems and challenges through developing a better understanding of their selves, experiences, and feelings through the structured utilization of literature. Teachers have and continue to use bibliotherapy, either unknowingly or in a simplistic manner without following established guidelines and procedures (Pardeck & Pardeck, 1984; Pellitteri, 2000). However, current usage of literature in the classroom is typically described as story time, read alouds, guided reading, and other methods of using books with the intent of teaching or entertaining students. Using literature for bibliotherapy in the classroom goes beyond informal applications of literature because it is a systematic intervention with guidelines and procedures to specifically target a student need and intentionally meet that need by guiding the student through a series of stages that promote personal growth and skill development. Some scholars have noted that using literature to help youth cope with personal problems not only helps them to acquire the skills needed to problem solve and face adversity but also supports their reading skills (Afolayan, 2002; Iaquinta & Hipsky, 2006; Johnson et al., 2001; Rasinski & Gillespie, 1992; Sridhar & Vaughn, 2000).

Elmore (2009) acknowledged students spend approximately 14,000 hours at school from kindergarten through high school graduation. Given the vast amount of time spent in the school setting and the growing non-academic needs of children and
adolescents, bibliotherapy represents a valuable tool for educators to meet the needs of students experiencing stress and issues. This thesis study was designed to gain insight and understand more about how PSTs and other undergraduates perceive aspects of bibliotherapy implementation and their comfort, influences, and concerns with utilizing it in K-12 classroom settings.

**Purpose of the Study**

The purpose of this thesis is to gain insight into PST and other undergraduate students’ perceptions of bibliotherapy as an instructional tool for children and adolescents in classroom settings. The goals of this research are to identify perceived acceptability, comfort level of, influential factors, and concerns held that impact bibliotherapy implementation in the K-12 setting with children and adolescents.
Research Questions

In order to obtain an in-depth understanding of the impact of perceptions and other factors related to implementing bibliotherapy as an instructional strategy in the classroom, I established the following guiding questions:

1. What are the experiences and current understanding of bibliotherapy of PSTs and other undergraduate students?
2. What purposes do PSTs and other undergraduate students perceive as acceptable for classroom teachers to use bibliotherapy in the classroom?
3. How comfortable are PSTs and other undergraduate students at implementing bibliotherapy in the classroom?
4. What factors influence level of comfort in implementing bibliotherapy as an intervention in the classroom?
5. What concerns do PSTs and other undergraduates hold in regards to bibliotherapy implementation?
Definition of Terms

The following section provides operational definitions of important terms used in this study.

**Bibliotherapy** is the utilization of children’s books and young-adult literature as an instructional strategy implemented by a classroom teacher to help children and adolescents better understand unknown concepts, cope with difficult situations, and address sensitive topics.

**Children** can arguably be described as minors ranging in age from birth to eighteen years (which encompasses the adolescent years). In this study, the term is used to be inclusive of children and adolescent youth.

**Children’s literature** refers to all literature (i.e., fiction, nonfiction, self-help books, poems, song lyrics, novels, chapter books, and other printed materials) intended for children birth through age eighteen.

**Clinical bibliotherapy** refers to using bibliotherapy in a clinical setting to treat patients.

**Developmental bibliotherapy** refers to using bibliotherapy as a tool to help children with developmental topics, often in community settings such as, schools, libraries, or personal living spaces.

**Non-preservice teachers** (Non-PSTs) are college students seeking degrees outside of education.

**Preservice teachers** (PSTs) are college students pursuing a degree in education with the intent to teach students at the elementary and/or secondary levels (K-12).
While teachers are not licensed therapists or mental health professionals, they are faced with the challenge of teaching a classroom full of diverse students, many of whom are coming to school burdened with complicated challenges and backgrounds (Sullivan, 1987). Teachers cannot focus solely on academics when students are preoccupied with stressors, they must assist children and adolescents in coping with life’s challenges so that they are not delayed in their development and socialization (Olsen, 1975). Bibliotherapy is one approach that can equip teachers with a method for offering students emotional and social support through the use of literature and discussion. In this chapter, I review the current literature on constructs related to bibliotherapy implementation and how teachers’ perceptions of bibliotherapy influences can impact their practices with students.

**Understanding Bibliotherapy**

**Definitions**

Bibliotherapy is not easily defined and has been described as a problematic term (Hynes & Hynes-Berry, 2012). It is problematic because researchers, scholars, and practitioners have defined bibliotherapy in divergent ways and have differing views on its usage (Johnson et al., 2001; Prater et al., 2006; Lindeman & Kling, 1968; Lu, 2008; Ogrenir, 2013; Rubin, 1978; Shepherd & Iles, 1976; Sullivan & Strang, 2002). Moreover, bibliotherapy has been referred to by a plethora of other names, including but not limited to: bibliocounseling, biblioeducation, bibliopsychology, library therapeutics and literatherapy (Pardeck, 1993; Pehrsson & McMillen, 2005; Rubin, 1978). As early as
1978, Glasgow and Rosen conducted a review of bibliotherapy materials and found inconsistencies in terminology; they suggested that facilitators of bibliotherapy should agree on definitions relating to bibliotherapy and its usage. However, it is difficult to develop consensus on a definition of bibliotherapy because the technique has been used across a range of disciplines, such as medicine, education, psychology, human services, and other social sciences (Hynes & Hynes-Berry, 2012; Jack & Ronan, 2008; Rubin, 1978). Professionals in each of these fields approach bibliotherapy differently and therefore define and use bibliotherapy differently. Russell (2012) asserted that bibliotherapy is “often misunderstood” (p. 20). Some of the misunderstanding described by Russell (2012) stems from the lack of communication across and between fields. Furthermore, definitions of bibliotherapy vary with respect to types of literature. Some limit its usage to nonfiction and self-help literature, while others widen the scope of bibliotherapy materials to include fiction literature such as picture storybooks, chapter books, and graphic novels (Gavigan, 2012).

Traditional definitions of bibliotherapy focus on reading as therapy or using books with a therapeutic intent (Bibliotherapy, n.d.-a, Bibliotherapy, n.d.-b; Cohen, 1993, 1994; Hynes & Hynes-Berry, 1986, 2012; Johnson et al., 200; Sridhar & Vaughn, 2000). However, there is some diversity in how bibliotherapy is defined by scholars, researchers, and professionals of varied fields. Russell (2012) defined bibliotherapy as a method for handling emotional or psychological matters through literature that aids individuals in coping, but also acknowledges “life lessons can be found in a book that is simply telling a good story” (p. 27). Hoagland (1972) discussed bibliotherapy as being an “attempt of an individual to promote his mental and emotional health by using reading materials to
fulfill needs, relieve pressures or help his development as a person” (p. 390). Lenkowsky (1987) described bibliotherapy as using reading to produce positive personality change, growth, and development. Bibliotherapy has also been defined as using literature to offer insight and encourage emotional healing (Cohen, 1987; Forgan, 2002; Heath, Sheen, Leavy, Young, & Money, 2005; Philpot, 1997; Smith, 1989; Tunnell, Jacobs, Young, & Bryan, 2012). Other authors have more simply defined bibliotherapy as helping people to solve problems with books (Aiex, 1993; Cornett & Cornett, 1980; Lehr, 1981; Masters, Mori, & Mori, 1999; Prater et al., 2006). Furner and Kenney (2011) describe bibliotherapy as a “sensitive and non-intrusive” method to support students in solving problems and coping with individual challenges (p. 5). Corman (1975) described bibliotherapy as allowing “readers to share another's hopes and fears and realizing that these feelings are their own” (p. 935). Amer’s (1999) definition of bibliotherapy was more extensive and integrates the use of children’s books to broach the emotions and experiences of children and to take that further by helping children relate to book characters with similar emotions and experiences.

Many scholars’ definitions of bibliotherapy have focused on the interaction between the reader and the process of identifying with literature and/or a book character experiencing a similar personal challenge (Abdullah, 2002; Bohning, 1981; Iaquinta & Hipsky, 2006; Lindeman & Kling, 1968; Moses & Zaccaria, 1969; Pardeck, 1993, 1994; Pehrsson, Allen, Folger, McMillen, & Lowe, 2007; Russell & Shrodes, 1950). Fassler (1978) described bibliotherapy as joining an understanding of child development and knowledge of children’s literature to bring children and books together in a personal, stimulating manner to aid children in mastering challenging situations. Some researchers
have expanded on this interaction between reader and literature to include the direction of a trained helper, informed decision-maker, or facilitator as part of their definition of bibliotherapy (Hynes & Hynes-Berry, 2012; Johnson et al., 2001; Ogrenir, 2013; Rubin, 1981). Coleman and Ganong (1990) defined bibliotherapy as readings assigned to a person (child); this description assumes the usage of facilitator. Ediger (2004) refers to bibliotherapy as literature covering challenging topics and presented to children as a “guidance resource” (p. 377-378). More generally, bibliotherapy can be defined as using literature to help a person with an issue or offer understanding of an unknown topic.

Across all of these definitions of bibliotherapy that span many fields and uses, two things are always present. The first is literature. Literature can be fiction, nonfiction, self-help books, poems, song lyrics, novels, chapter books, and other printed materials. The second is aiding an aspect of personal growth. This can be helping someone cope, informing on an unknown topic, modeling behaviors, teaching a skill, assisting in the problem solving process, and much more.

For the purpose of this thesis, bibliotherapy will be defined as the utilization of children’s books and young-adult literature as an instructional strategy implemented by a classroom teacher to help children and adolescents better understand unknown concepts, cope with difficult situations, and address sensitive topics.

History

The history of using literature for healing and coping dates back to the Ancient Greeks and has been widely accepted by librarians, psychotherapists, and other medical professionals since the early 1960s (Aiex, 1993; Brown, 1975; Cornett & Cornett, 1980; Dysart-Gale, 2008; Heath et al., 2005; Johnson et al., 2001; Jones, 2006; Pardeck &
Pardeck, 1984; Pardeck, 1994; Shepherd & Iles, 1976; Rubin, 1978; Zaccaria & Moses; 1969). However, other scholars have acknowledged the influential power of verbal and written stories on people since the beginning of time (Cornett & Cornett, 1980; Jack & Ronan, 2008). Consider Thebes, where healing place for the soul is engraved above a Grecian library entry (Briggs & Pehrsson, 2008; Cornett & Cornett, 1980; Detrixhe, 2010; Jones, 2006; McDaniel, 1956; Pardeck, 1993; Shepherd & Iles, 1976; Zaccaria & Moses; 1969). Similarly, it was recorded in 300 B.C. that a library in Alexandria (ancient Egypt) held the inscription, remedy for the mind (Cornett & Cornett, 1980; Detrixhe, 2010; Heath et al., 2005; Jack & Ronan, 2008; Jones, 2006). These are just two examples of many relics found across the world showing how people of many cultures for thousands of years have utilized books as an instrument to aid in the soothing, healing, enlightening, and developmental growth of people.

For centuries, literature has served as a silent therapist for a large number of people all over the world (Pardeck & Pardeck, 1984; Pardeck, 1993). Rush and Galt were physicians of the 1800s, known to recommend books to patients (Brown, 1975; Shepherd & Iles, 1976). Early textbooks for children (e.g. New England Primer, McGuffey Readers) were didactic in nature and were intended to teach children academics while instilling positive morals (Moses & Zaccaria, 1969; Pardeck & Pardeck, 1984; Pardeck, 1993). In 1916, Samuel Crothers coined the term bibliotherapy (Briggs & Pehrsson, 2008; Brown, 1975; Cornett & Cornett, 1980; Detrixhe, 2010; Heath et al., 2005; Jack & Ronan, 2008; Jones, 2006). Crothers utilized bibliotherapy to assist adults with emotional troubles and other conditions (Jones, 2006; Sullivan & Strang, 2002). Bibliotherapy pioneer and chief librarian of the United States Veterans Administration Hospital in
Tuskegee, Alabama, Sadie Peterson Delaney, used bibliotherapy in the early 1920s to help treat emotional and physical demands of war veterans (Brown, 1975; Jones, 2006).

In the 1920s and 1930s librarians began making lists of books that helped patrons and counselors identify books for people in need (Abdullah, 2002; Brown, 1975; Hynes & Hynes-Berry, 1986, 2012; Lu, 2008; Pardeck, 1994). William Menninger established the Menninger Clinic in Topeka, Kansas, where bibliotherapy was implemented in the form of reading groups for patients (Brown, 1975; Dysart-Gale, 2008; Jack & Ronan, 2008; Jones, 2006; Pehrsson & McMillen, 2005). At that time, bibliotherapy was a stand-alone treatment practiced by professionals and nonprofessionals in psychology, psychiatry, medicine, and the library fields (Briggs & Pehrsson, 2008; Jack & Ronan, 2008; Pehrsson & McMillen, 2005; Sullivan & Strang, 2002). In the United Kingdom (UK), self-help books have been endorsed for use in health programs and libraries to serve people in need of literature (Coffman, Andrasik, & Ollendick, 2013). Prescriptions for books and bibliotherapists were (and continue to be) common in the UK (Frude, 2005). By the 1940s and 1950s, bibliotherapy was well-recognized as a psychological treatment method and research studies were conducted that focused on the validity of the approach (Jones, 2006; Pardeck 1993; Russell & Shrodes, 1950; Shrodes, 1955). According to Dysart-Gale (2008), by the 1950s, teachers, social workers, librarians, nurses, and parents with adequate instruction and training could implement bibliotherapy.

In the 1970s, bibliotherapy was implemented with children; the elderly; trauma victims; persons experiencing disability, diabetes, mental disorders, divorce; and others (Dysart-Gale, 2008; Fassler, 1978; Jones, 2006; Lenkowsky, 1987; Ouzts, 1991; Pardeck, 1993; Shepherd & Iles, 1976; Sullivan, 2002; Tillman, 1984). Bibliotherapy pioneer,
Rhea Joyce Rubin, published her classic guidebooks of the 1970s, *Bibliotherapy Sourcebook* and *Using Bibliotherapy: A Guide to Theory and Practice* (Jones, 2006; Pardeck & Pardeck, 1984; Pardeck, 1994). In the 1980s and 1990s, bibliotherapy was more widely used, researched, and publications of self-help books flourished (Lu, 2008). More recently, bibliotherapy use in the field of education has increased (Abdullah, 2002; Afolayan, 1992; Beardsley, 1981; Cartledge & Kiarie, 2001; Cornett & Cornett, 1980; Gavigan & Kurtts, 2011; Hynes & Hynes-Berry, 2012; Lu, 2008; Morawski, 1997; Ouzts, 1991; Pardeck, 1993; Sherdian, Blake, & deLissovoy, 1984; Smith, 1989; Sullivan & Strang, 2002; Tillman, 1984). Contemporary scholars of bibliotherapy continue to note the approach is not required to be facilitated by a trained therapist but can be utilized effectively by parents and teachers to communicate with, and aid in, the personal development of children and youth (Edwards & Simpson, 1986; Hynes & Hynes-Berry, 2012; Jones, 2006; Pardeck, 1993).

Interest in bibliotherapy continues, although the term bibliotherapy itself is not always used. For example, in Aubry’s (2011) recent book, *Reading as Therapy*, it is noted that many American readers are choosing books that propose approaches to addressing, comprehending, and dealing with personal issues. American readers want to meet characters like themselves and their loved ones, and do so for comfort and to validate their feelings. While Aubry’s (2011) book focuses on middle-class American adults, his findings demonstrate that literature is valued in our society and many use it to understand and cope with personal issues.
Types of Bibliotherapy

The usage, scope, and application of bibliotherapy have varied since its origination (Abdullah, 2002; Jack & Ronan, 2008; Townsend, 1965). While variation is expected as a method grows and adapts to changes in culture, time, and people, it becomes challenging to define something that has evolved and transformed. Due to bibliotherapy’s transformations over time, it is important to clarify that there are two prominent types of bibliotherapy: clinical bibliotherapy and developmental bibliotherapy (Cook, Earles-Vollrath, & Ganz, 2006, Rubin, 1978). Clinical bibliotherapy, like the name suggests, is a clinical treatment in which a counselor, therapist, psychologist, or other trained practitioner utilizes literature to treat individuals experiencing serious and severe problems warranting medical/professional care (Hebert & Furner, 1997; Hynes & Hynes-Berry, 2012). Developmental bibliotherapy is distinguishably distinct from clinical bibliotherapy because it is not a therapeutic treatment. In her book, *Bibliotherapy for Classroom Use*, Philpot (1997) assertively states, “Despite the use of that intimidating word *therapy*, bibliotherapy is not intended to be used in a clinical sense in the classroom” (p. 7). In school settings, developmental bibliotherapy is the type of bibliotherapy being implemented with children and adolescents.

According to Hynes and Hynes-Berry (2012), developmental bibliotherapy arose from an acknowledgement that there was a need to discuss emotions, build self-understanding, and aid self-esteem growth outside of clinical settings. People (especially, children and adolescents) need opportunities to obtain self-awareness and growth beyond the walls of therapy and counseling—developmental bibliotherapy fills this need. Forgan (2002) expressed a similar assertion in his work, noting that developmental bibliotherapy
is not conducted with the intent to treat, but with the goal of helping children cope with
developmental needs. Developmental bibliotherapy is simply using literature in a
developmentally sound way to help guide children and adolescents in interacting with
literature in a manner that connects the reader’s personality with the book’s characters or
story (Bohning, 1981; Rubin, 1978). Developmental bibliotherapy can also be an
intervention (instructional strategy) in which teachers, librarians, parents, and others
working with children and adolescents facilitate guided reading to help youth cope with
an issue or learn a skill through the utilization of developmentally appropriate literature
(Cook et al., 2006; Gavigan & Kurtts, 2011). Developmental bibliotherapy is a
resourceful approach to tackling difficult issues or aiding resolutions for specific
challenging situations. Rubin (1978) notes that an important aspect of developmental
bibliotherapy is that it is voluntary—children and adolescents should feel comfortable
with the intervention and should not be coerced or forced to participate. Bibliotherapy,
when viewed through this developmental lens, is a method for school personnel to
instruct students on non-academic issues while offering students an opportunity to
understand and process their own feelings and actions through a character found in a
book or poem who is developmentally similar to themselves.

In this chapter and in this research study, my focus is restricted exclusively to
developmental bibliotherapy. When I refer to bibliotherapy throughout this document, it
is in reference to developmental bibliotherapy and its implementation by educational
professionals as an intervention for children and adolescents in school settings.
Applications of Bibliotherapy

Hynes and Hynes-Berry (2012) asserted nearly any topic could be addressed through bibliotherapy as long as a healthy and growth-focused discussion is integrated into the process. Other scholars have shared many goals, values, and purposes of bibliotherapy: to provide readers with information, insight, alternative solutions, discussion, mutuality, and an opportunity to communicate new values (Pardeck, 1993; Prater et al., 2006; Rubin, 1978; Russell & Shrodes, 1950). These tasks were originally discussed in the context of clinical bibliotherapy but apply to developmental bibliotherapy as well. In 1993, Aiex recognized nine reasons for educators to implement bibliotherapy with elementary and secondary age students: (1) to show students that they are not the only ones experiencing a problem, (2) to teach students there is more than one way to approach a problem, (3) to encourage open discussions of problems with students, (4) to assist students in actively creating solutions to problems, (5) to provide opportunities for students to establish their self-identity, (6) to help students release emotional and mental tension, (7) to build students’ self-esteem and self-efficacy, (8) to offer students an avenue for exploring new interests, experiences, and people, and (9) to promote self-understanding and greater understanding of others. These nine reasons have been expanded upon and many scholars have acknowledged numerous applications for bibliotherapy in elementary and secondary classroom settings. These applications range from every day topics to more sensitive or intensive topics (Forgan, 2002; Jalongo, 1983; Rozalski, Stewart, & Miller, 2010) —all of which contribute to the development of students. I discuss illustrations of this range of bibliotherapeutic applications in the following paragraphs.
Children and adolescents encounter problems in their daily lives; a critical application of bibliotherapy involves offering children opportunities to *vicariously* interact with characters through literature to cope with life’s problems (Gavigan & Kurtts, 2011; Johnson et al., 2001; Sanacore, 2012). For example, children and adolescents may be faced with seemingly minor problems, such as, losing a toy, not having the same brand clothing as peers, being late to class, a disagreement with a friend, having to share, teasing, and other situations that can derail their moods or cause temporary stress (Forgan, 2002; Philpot, 1997). Bibliotherapy can assist youth in overcoming these everyday challenges and difficult situations by modeling and teaching them effective problem solving skills (Forgan, 2002; Rozalski et al., 2010). Additionally, Jalongo (1983) presented bibliotherapy as a method to effectively help children with peer relationships, failures, disappointments, and other shortcomings that youth experience on a daily basis.

Philpot (1997) noted bibliotherapy is not solely for students with “problems,” but a way to pair students with a book that is developmentally right for them in a way that encourages quality interactions to foster the acquisition of critical, moral, and problem solving skills. Schools have used character education as a means to teach morals historically in America, and bibliotherapy has been suggested as a method for effectively and meaningfully teaching character education to children and adolescents (Forgan, 2002; Parker, 2005; Rozalski et al., 2010).

Bullying is another example of an issue that occurs daily in the lives of children and adolescents that can be addressed in educational settings with literature and bibliotherapy (Flanagan et al., 2013; Forgan, 2002). Approximately 28 percent of
adolescents reported being bullied at school in 2011 (U. S. Department of Education, 2014). Bibliotherapy can be applied in classrooms with students of all ages to address the issue of bullying and to help students cope with the turmoil and frustration that often follows bullying episodes. This occurs when students connect with characters experiencing similar feelings and understanding how those characters cope with the struggle of bullying (Flanagan et al., 2013). For example, Furner and Kenney (2011) supported using bibliotherapy to help children who have been bullied due to their preference for and high abilities in mathematics. The utilization of picture books with bullied children helped them to experience mutuality and develop self-confidence (Furner & Kenney, 2011).

Bibliotherapy can also be applied as a resource to assist children and adolescents experiencing stress within their family (Roberts & Crawford, 2008). Stress in the family can arise from transitions such as divorce, remarriage, the birth of a new sibling, moving to a new home or city, and the taking in of an ill or aging relative to other family events such as domestic violence, substance abuse, financial struggles, poverty, lack of healthcare, and more. Pardeck (1994) recommended bibliotherapy as a means to help youth cope with many family topics, such as foster care, adoption, child abuse, separation, divorce, and blended families. Youth who witness or experience domestic violence in the home have been linked to a range of adjustment issues and other negative outcomes (Thompson & Trice-Black, 2012). Employing bibliotherapy with such youth can help meet their emotional and cognitive needs and help them to acquire nonviolent conflict resolution skills in an effort to buffer the negative outcomes caused by trauma and violence in the home (Thompson & Trice-Black, 2012).
Another application of bibliotherapy is to use it more extensively to improve self-understanding and self-esteem amongst children and adolescents, especially those struggling with behaviors and/or emotions (Cohen, 1987; Hynes & Hynes-Berry, 1986, 2012; Iaquinta & Hipsky, 2006; Sridhar & Vaughn, 2000). When individuals experiencing mental health ailments become more comfortable with themselves through bibliotherapy and discussion, they are more equipped to seek self-understanding and to deal with problems within and outside the context of a bibliotherapy session (Hynes & Hynes-Berry, 2012). Sullivan and Strang (2002) emphasize the use of bibliotherapy for children experiencing emotional and developmental challenges as it has the potential to increase the emotional intelligence and social adjustment for children. Likewise, Cook et al. (2006) reported using books as a guided instructional tool can provide a channel fostering the emotional and social development of youth. Processing the emotional and social growth of a character over the course of a story permits adolescents to reflect on and build their own emotional and social growth—facilitating the formation of their identities. Many authors have also described bibliotherapy as applicable to aiding children and adolescents improve aspects of their emotional, social, and behavioral development (Amer, 1999; Coffman et al., 2013; Gavigan & Kurtts, 2011; Hynes & Hynes-Berry, 1986, 2012; Hebert & Kent, 2000; Jalongo, 1983; Johnson et al., 2001; Jones, 1990; Nicholson & Pearson, 2003; Pardeck & Pardeck, 1984: Pardeck, 1994; Rozalski et al., 2010; Shechtman, 2000; Sullivan & Strang, 2002).

Bibliotherapy has been applied to social skills instruction for several decades. The implementation of bibliotherapy as an intervention in classroom settings allows for a systematic method of teaching social skills to children and adolescents (Brame, 2000;
Cartledge & Kiarie, 2001; Forgan & Gonzalez-DeHass, 2004; Masters et al., 1999; McCarty & Chalmers, 1997; Prater et al., 2006; Womack, Marchant, & Borders, 2010). Books are a comfortable and essential aspect of childhood and adolescence. Cartledge and Kiarie (2001) noted the inherent attraction of youth to books and the comfort, models, and messages books share with children and adolescents is the strong foundation for the application of bibliotherapy in classroom settings. Capitalizing on this comfort with bibliotherapy promotes social development while also further fostering a love of reading amongst children and adolescents (Gladding & Gladding, 1991). Characters in books read by children and adolescents model social behaviors and with the guidance of a facilitator, the bibliotherapy process can foster social learning of youth by meeting their specific social needs (Coffman et al., 2013; Forgan, 2002; McCarty & Chalmers, 1997; Womack et al., 2010).

Raising awareness, acceptance, and acquisition of knowledge for diverse people, culture, situations, abilities, experiences, and perspectives is another application of bibliotherapy (Andrews, 1998; Cook et al., 2006; Forgan & Gonzalez-DeHass, 2004; Gavigan & Kurtts, 2011; Iaquinta & Hipsky, 2006; Lu, 2001; Prater et al., 2006). Bibliotherapy has the potential to positively influence the classroom environment when used as an introduction for students without special needs or knowledge of diverse cultures to understand the variety of cultures, experiences, disabilities, and perspectives that might be present in their classroom, school, or community. Gavigan and Kurtts (2010) emphasized bibliotherapy’s ability to encourage nondisabled students to understand, accept, and develop empathy for their peers with diverse needs and/or disabilities. By introducing youth to the characteristics of emotional and behavioral
disorders with literature, peers may be more likely to accept and include others with disabilities in their everyday activities and social interactions (Cook et al., 2006).

Many scholars have endorsed bibliotherapy as an effective approach for working with students with a range of special needs, including attention-deficit disorder (Fouse & Morrison, 1997), learning disabilities (Andrews, 1998; Forgan, 2002; Sridhar & Vaughn, 2000), obsessive-compulsive disorder (Tolin, 2001), physical impairments (Jones, 1990), behavior disorders, including aggression (Forgan, 2002; Shectman, 1997, 1999, 2000, 2006) and a variety of other conditions warranting special instruction or supports in the classroom setting (Brame, 2000; Coffman et al., 2013; Forgan, 2002; Forgan & Gonzalez-DeHass, 2004; Gavigan & Kurtts, 2011; Iaquinta & Hipsky, 2006; Johnson et al., 2001; Lenkowsky, 1987; Pardeck & Pardeck, 1984; Pardeck, 1993; Prater et al., 2006; Sridhar & Vaughn, 2000). Guiding students with special needs to better understand themselves and generalize learning from the literature to their lives in a bibliotherapy intervention allows youth to take ownership of their behaviors and identity. The interaction with book characters is a fundamental principle of bibliotherapy which helps students to share feelings, adopt new healthier behaviors, and explore new ways of responding to their environments (Iaquinta & Hipsky, 2006; Schreur, 2006). Donna Miller (2013) discussed the power of bibliotherapy as an application that pairs youth with book characters, giving them a sense of power and the tools required to successfully navigate through their development. Miller (2013) also warned that not providing adolescents with relevant texts in which they can see themselves can lead to disengagement of youth.
Bibliotherapy has applications for children and adolescents faced with issues associated with being a member of a minority group or groups (Johnson et al., 2001). For example, lesbian, bisexual, gay, and transgendered (LBGT) youth are one such minority group at increased risk for suicide and distress; scholars have found bibliotherapy helpful and applicable for assisting LBGT adolescents in overcoming social stigma, the pain of silence, and becoming more comfortable with discussing their identity in school settings (Fisher, 2005; Vare & Norton, 2004). Gender is another issue that can be addressed with bibliotherapy as teachers discuss the portrayal and depictions of male and female characters in literature (Cartledge & Kiarie, 2001). Children and adolescents can benefit from conversations about stereotypes and identifying main characters that empower all genders. Similarly, Grantham and Ford (2003) recommended bibliotherapy as a method for supporting African-American and other culturally diverse students to develop their own identities through the presentation of culturally and racial diverse main characters in books. Eliminating the isolation of students from minority groups from peers may help children and adolescents develop their social skills and work on building their self-image or personal identity—both critical components in maintaining developmental stability. Temple et al. (2015) noted that the representation of minority children has noticeably improved in the past three decades to include children of diverse races, family forms, and socioeconomic backgrounds.

Through reading the literature that reflects their own cultural experiences, through learning of their history, and through seeing themselves in the literature for children, then perhaps minority youngsters too can begin to see a future for themselves in a society that every day continues to demand more intellectual out-
put than they are currently pre-pared for (Walter Dean Myers, as cited in Miller-Lachmann, 1992, p. 123).

Another application for bibliotherapy in the classroom is helping students learn how to recover from traumatic experiences and develop the skills necessary to stabilize mental health. Wolpow and Askov (1998) asserted that teachers can help students develop coping skills and foster healthier interactions through sharing their untold stories and utilizing literature in a way that offers students an opportunity to regain power and control through establishing coping skills that provide hope for a better future. Rycik (2006) suggested using books as a bridge to discussion to help children understand and develop empathy during troubling times. Hebert and Furner (1997) shared bibliotherapy as a means to assist students in coping with their anxieties and fears of mathematics. Scholars have also noted bibliotherapy is applicable in situations of denial, traumatic events, and instances of anxiety (Lu, 2001; Prater et al., 2006). Additionally, scholars have noted bibliotherapy’s ability to assist in helping youth cope with fears and sensitive topics, such as crime, dying, nightmares, suicide, crises, natural disasters, and terrorist attacks (Alat, 2002; Fisher, 2005; Grace & Shores, 2010; Lewis, Amatya, Coffman, & Ollendick, 2014; Lu, 2001; Nicholson & Pearson, 2003). Students who fear abandonment may be comforted to learn that other youth of different ethnicities and geographic locations often experience the same fear. Applying bibliotherapy in this way connects children and adolescents to characters in literature and prompts self-awareness of behaviors and emotions through the character (Forgan, 2002; Iaquinta & Hipsky, 2006).

Experiencing the death and loss of a family member, friend, pet, classmate, or person in the community can be an incredibly emotional, distressing, traumatic, and
troublesome time for children and adolescents. Bibliotherapy has extensively been offered as an application to aid children and adolescents in coping with death and assist them in navigating through the grieving process (Briggs & Pehrsson, 2008; Heath & Cole, 2011; Heath, Leavy, Hansen, Ryan, Lawrence, & Sonntag, 2008). Heath and Cole (2011) noted that the application of bibliotherapy with grieving students can model desired behaviors, lower feelings of isolation, and serve as a communication tool about death. Bibliotherapy can help children and adolescents better understand how and why death happens in the context of a story that is safe and nonthreatening (Heath et al., 2008; Rozalski et al., 2010). Grace and Shores (2010) noted the importance of following the youth’s lead when reading about and discussing death and dying to aid the child in sharing his or her experience in a manner that allows retelling and healing that is comfortable.

Bibliotherapy has endless possibilities for application in school settings as an intervention for children and adolescents. Children’s literature can be integrated into all aspects of development, making bibliotherapy applicable for teachers to use to assist in meeting the needs of all students facing seemingly minor, everyday troubles to helping them cope with more sensitive and significant problems.

The Process of Bibliotherapy

Scholars in the field have described the implementation process of bibliotherapy in different ways (Heath et al., 2005; Jack & Ronan, 2008; Prater et al., 2006). Some authors have shared a three (Lehr, 1981), four (Forgan, 2002; Hynes & Hynes-Berry, 2012; Pardeck, 1993; Sridhar & Vauhgn, 2000), or five (Aiex, 1993; Johnson et al., 2001; Pardeck & Pardeck, 1984) step process for implementing bibliotherapy, while others
describe the bibliotherapeutic process with as many as six (Cartledge & Kiarie, 2001) or ten steps (Prater et al., 2006). However, the bibliotherapy process generally includes the following procedures: identification, selection, presentation, and follow-up (Pardeck, 1993, 1994).

Identification entails identifying the problem a student or group of students is facing or the topic that needs to be addressed through bibliotherapy (Cartledge & Kiarie, 2001). Sridhar and Vaughn (2000) emphasized how the teacher or bibliotherapy facilitator prepares before implementing bibliotherapy with students—this preparation is part of the identification process. For example, they encourage teachers to provide students with prior knowledge and background information on the topic before beginning the bibliotherapy lesson. Scholars have reiterated the significance of the identification step by asserting teachers should deliberately use bibliotherapy to follow a plan of action (Johnson et al., 2001; Lehr, 1981; Prater et al., 2006). A plan of action seeks to accomplish an objective, gives the intervention purpose and direction, and encourages assessment. The identification step differentiates bibliotherapy from typical read aloud or story time. Identifying a specific objective that the bibliotherapy intervention is intended to address goes beyond reading for pleasure and entertainment and instead uses literature as a strategic tool to aid the development of children and adolescents in a manner that meets their specific needs. Olsen (1975) assertively claimed that bibliotherapy should be “planned, conducted, and controlled” (p. 424) emphasizing the vital need for teachers to systematically address the first step in the bibliotherapy process.

Selection involves identifying potential books that contain characters or situations that cover the same problem or topic, reviewing the books to determine if they are
appropriate for student(s), and finally selecting the book that will be used in the bibliotherapy lesson. For many in the field, the selection of literature is one the most important aspects of bibliotherapy (Prater et al., 2006; Rubin, 1978). It is the responsibility of practitioners to select literature that offers children and adolescents opportunities to process the behaviors, actions, or situations of a character that reflect their own. This use of a third party provides a symbolic representation of life events that allow youth—formerly incapable of properly expressing their thoughts and feelings—to gain knowledge of innovative ways to cope with troubles (Cook et al., 2006). When choosing literature for bibliotherapy lessons, it is essential for teachers and other facilitators to consider many factors that will contribute to the success of the intervention. Teachers are encouraged to select books for bibliotherapy that are appropriate based on developmental age (Prater et al., 2006; Womack et al., 2010), reading ability (Pardeck, 1994; Prater et al., 2006), maturity level (Pardeck, 1994), depiction of the topic or problem being addressed (Heath et al., 2008; Pardeck, 1994; Prater et al., 2006; Womack et al., 2010), portrayal of realistic, honest characters (Heath et al., 2008; Pardeck, 1994; Prater et al., 2006; Womack et al., 2010), and quality of the literature presented in the book (Prater et al., 2006). The selected book should have wording, plot, illustrations, and material that can be comprehended by and are facilitative for the reader (Heath et al., 2008; Rubin, 1978; Whipple, 1969; Womack et al., 2010). Bibliotherapy is more meaningful when children and adolescents can identify with the characters in the literature, so attempting to find books that mirror the student’s individual characteristics, personality traits, interests, and/or native language is also suggested (Heath et al., 2008; Olsen, 1975; Pardeck, 1994; Whipple, 1969). It is critical to consider the objective of the
bibliotherapy lesson when selecting a book. For instance, when using bibliotherapy to teach a social skill, it is ideal for the book to provide two or more events that offer the student multiple opportunities to identify and relate to the social situation or target skill (Womack et al., 2010).

Literary genres are another factor to consider when selecting books for bibliotherapy implementation. Some authors adamantly stated that bibliotherapy should be implemented with books that are solely academic, instructional, non-fiction, self-help, or didactic in nature while many others endorse fiction, fantasy, picture books, poetry, imaginative, graphic novels, song lyrics, magazines, and other modes of media as appropriate for bibliotherapy when carefully chosen by the facilitator (Gavigan, 2012; Moses & Zaccaria, 1969; Pardeck & Pardeck, 1984; Pardeck, 1993; Rubin, 1978). Temple et al. (2015) noted the power of the contemporary realistic fiction genre in offering children and adolescents with a plethora of characters, settings, situations, and subject matter to relate to and connect with. When implementing bibliotherapy with students with special needs, the format of the literature is a top priority. Pardeck (1994) mentioned that books come with audio, braille, and large font formats to meet the diverse needs of those with disabilities. E-books, interactive books on mobile devices, and other accommodating technologies are available to assist facilitators in conducting bibliotherapy with a wide range of students.

Presentation requires the facilitator to develop bibliotherapy lessons using the most developmentally appropriate book or books and then presenting the literature with the student, students, or class emphasizing discussion and reflection. During bibliotherapy lessons, the problem, skill, or topic being addressed is discussed and
highlighted throughout the entire presentation of the literature (Cartledge & Kiarie, 2001). Johnson et al. (2001) recommended that teachers should plan to spend up to 25% more time reading with students during bibliotherapy than they would spend during a typical read aloud time. The extra time will provide ample opportunity for students to process the plot, reflect on their feelings, connect with characters, and participate in meaningful discussions. Additionally, it is essential to incorporate and emphasize effective problem solving during the reading of the literature with students (Sridhar & Vaughn, 2000).

Follow-up involves utilizing extension activities that further promote the understanding and processing of emotions, problems, situations, behaviors, and/or the topic of focus in the bibliotherapy lesson. Sridhar and Vaughn (2000) recommended including two components in the follow-up portion on the bibliotherapy lesson—processing and retelling. These two components help guide children and adolescents to better understand the sequence of problem solving, assists them in finding alternative solutions than those proposed in the story, and allows them to demonstrate knowledge gained from the literature by encouraging them to discuss how they would have behaved or felt if they were the main character in the story. Having students practice the skill or address the situation through role-playing, story writing, graphic organizers, games, and other engaging activities is one way to help students in processing the bibliotherapy lesson while also helping them to reinforce desired behaviors or skills and emotional healing (Cartledge & Kiarie, 2001; Grace & Shores, 2010; Johnson et al., 2001; Prater et al., 2006). Follow-up discussion and activities must be meaningful in order for bibliotherapy to be profitable (Forgan, 2002, Furner, 2004).
Schreur (2006) emphasized the importance of providing a caring environment for at-risk adolescents so youth may feel safe and encouraged to identify with literary characters. When using bibliotherapy as a more intensive intervention for adolescents with emotional and/or behavior disorder to develop self-understanding, this caring environment will likely involve a small group or individual lesson.

**Student Experience of Bibliotherapy**

While facilitators of bibliotherapy must be aware of the procedural steps needed to implement bibliotherapy with students in school settings, it is also imperative that facilitators of bibliotherapy are knowledgeable about how students experience bibliotherapy. Several researchers have distinguished three stages readers experience as they progress through the process of bibliotherapy (1) identification, (2) catharsis, and (3) insight (Afolayan, 1992; Hoagland, 1972; Iaquinta & Hipsky, 2006; Lenkowsky, 1987; Pehrsson, 2006; Shrodes, 1955; Sridhar & Vaughn, 2000).

In stage one, children and adolescents identify with a character and events in the literature. Furner and Kenney (2011) described this as when a reader feels or expresses that the character in the book is “very much like me” (p. 4) or identifies that he or she relates to, or is similar to, the character or situation in the story. It is critical that students are able to connect with characters in the book so that the modeled skills and solutions clearly apply to their lives and experiences (Rozalski et al., 2010). Olsen (1975) asserted that students could identify with and relate to both fictional and real characters in literature.

Russell and Shrodes (1950) considered the catharsis stage to be when readers release their emotions and are able to more openly tackle their personal problem or
situation. Other scholars described catharsis as a means of tension relief (Rozalski et al., 2010).

Insight is achieved through analysis of the main character and the situation in the literature as well as recognition of their similar behaviors, actions, and situations (Sridhar & Vaughn, 2000). Insight can also be described as a stage of reaching self-awareness and applying a piece of the literature (plot, character, connection) to their own lives (Hoagland, 1972). Children and adolescents may use this newly acquired insight to change their behaviors and more maturely respond when faced with a challenge (Furner, 2004).

The process of working through these three stages with students is essential for an effective bibliotherapy intervention. Masters et al. (1999) developed a sequence of five discussion points for teachers to integrate into a bibliotherapy lesson to help students progress through the identification, catharsis, and insight stages successfully: (1) retelling the story’s plot and describing the characters with a focus on emotions, behaviors, and thoughts, (2) talking about how the character handled the problem, (3) comparing and contrasting problems in the student’s life and how they handle them, (4) weighing the repercussions of the student’s solution(s) to the problem, and (5) when needed, recommending or brainstorming alternative solutions for the student (p. 275).

**Empirical Studies of the Effectiveness of Bibliotherapy**

While much of the professional literature surrounding bibliotherapy is descriptive, some empirical studies of bibliotherapy have demonstrated positive effects for children and adolescents. Many of these studies have focused on a range of emotional and behavioral needs and allowed participants to: decrease obsessive-compulsive disordered
behaviors (Tolin, 2001), ease coping for psycho-social needs (Roberts, 1984), develop coping skills (Ableser, 2008), meet social and emotional needs (Bender & Maureen, 1994), improve physical impairments (Allen, 1980; Hopkins-Best & Wiinamaki, 1985), foster tension relief for emotional disturbances (Olsen, 1975; Russell & Russell, 1979), and aid positive outcomes for students with learning disabilities (Bender & Maureen, 1994; Gerber & Harris, 1983; Lindsay & Frith, 1981).

Rapee, Abbott, and Lyneham (2006) offered insight into the effectiveness of clinical bibliotherapy when offered to parents of children with anxiety problems. Rapee et al. (2006) examined the value of offering a modified treatment for children on a wait-list to see a therapist for anxiety by offering parents bibliotherapy materials to use while waiting for their first appointment. The study’s findings suggest that while bibliotherapy seems significant for those who implement it properly, “it may not be of significant value across a general population to which it is applied” (Rapee et al., 2006, p. 442). The findings of this clinical study apply to educators and other practitioners using developmental bibliotherapy with students, in a general sense, because they will also need to be knowledgeable of the youth’s specific needs for the bibliotherapy process to be effective in meeting the intended goal.

In addition to this example, a number of other research studies have been conducted evaluating and validating the effectiveness of bibliotherapy in the medical, psychological, and other clinically driven fields. More recently, there have been empirical studies of bibliotherapy focused on its effectiveness in addressing issues related to emotional, social, and mental well-being (Betzalel & Shechtman, 2010; Drake, Johnson, Stoneck, Martinez, & Massey, 2012; Kierfeld, Ise, Hanisch, Gortz-Dorten, & Dopfner,
2013; Lewis et al., 2014; Shechtman, 2006; Songprakun & McCann, 2012). While clinical bibliotherapy continues to be empirically studied, research specific to developmental bibliotherapy and its effectiveness has not yet been conducted using empirical methods to measure the intervention’s influence on children and adolescents in K-12 classroom settings.

**Anticipated Benefits of using Bibliotherapy with Children and Adolescents**

Despite a lack of empirical support in educational settings, the professional literature includes descriptions of many anticipated benefits of bibliotherapy in the context of a classroom setting. Implementing bibliotherapy compliments a teacher’s academic curriculum and therefore is feasible, flexible, and convenient in terms of time and preparation (Coffman et al., 2013; Forgan & Gonzalez-DeHass, 2004; Womack et al., 2010). In terms of costs for schools, bibliotherapy is an affordable option because schools are already equipped with quality children’s and young adult literature in classrooms and in the school library (Coffman et al., 2013; Rasinski & Gillespie, 1992; Womack et al., 2010). Mains and Scogin (2003) asserted that because some families do not have access to mental health services, bibliotherapy in the classroom can help disadvantaged students to receive emotional and social skill development and supports they otherwise might not receive.

Offering real-world examples, situations, and characters for students to relate to is a unique benefit of bibliotherapy (Johnson et al., 2001; Masters et al., 1999; Womack et al., 2010). The emphasis on discussion and follow-up activities promote student engagement and enhance interactions in the classroom (Johnson et al., 2001; Womack et al., 2010). Teachers have reported bibliotherapy has had a positive impact on student
perceptions and behavior towards students with special needs, creating a more accepting and supportive environment for all students (Dyches, Prater, & Leiniger, 2009; Lehr, 1981; Prater, 2003; Shechtman & Or, 1996). Emotions and feelings can be complicated and overwhelming for both students and educators, but when classrooms are supportive, encouraging, and safe for students of all abilities and backgrounds, positive outcomes can arise because students have a greater likelihood of participating, sharing, and engaging (Johnson et al., 2001; Sanacore, 2012).

**Role of Teachers as Facilitators of Bibliotherapy**

Scholars in the field have noted a number of key qualities that facilitators of bibliotherapy should possess in order to assist them in being emotionally comforting and supportive of children and adolescents as they interact and engage in the method of coping. For example, Hynes and Hynes-Berry (2012) noted empathy, respect, and genuineness, maturity, integrity, adaptability, and responsibility as important characteristics of the teacher using bibliotherapy with children and adolescents. Additionally, teachers must be patient and careful not to bait or anticipate a youth’s feelings; they must guide the student in expressing their own feelings and reflecting on experiences and behaviors (Hynes & Hynes-Berry, 2012). Effective facilitators of bibliotherapy communicate with accuracy, yet withhold judgment (Hynes & Hynes-Berry, 2012).

Some authors have stressed that bibliotherapy is best introduced after the child or adolescent has established a good relationship with the facilitator (Moore, 1944; Womack et al., 2010). Moses and Zaccaria (1969) stressed the importance of teachers and students having a working relationship in which mutual trust has been established. This will be
evident when the youth is willing to talk over problems and a friendly attitude is exhibited. Russell (2012) recommended teachers use bibliotherapy as a proactive intervention to better prepare students for inevitable troubles and problems and not as a reactive antidote when a problem occurs.

**Concerns about using Bibliotherapy with Children and Adolescents**

Some scholars have voiced concerns and expressed some cautions about using bibliotherapy with children and adolescents. Olsen (1975) stated teachers may effectively implement bibliotherapy with students experiencing minor problems and not with students having extreme problems. Olsen’s (1975) statement is an example of a frequent concern expressed in the literature about bibliotherapy; authors have a hard time agreeing on the appropriate recipients of bibliotherapy. Russell (2012) described this concern well: “the problem with bibliotherapy is not whether it works—people have been assuaged and emboldened by books for centuries—but how it should be used” (p. 27). Others caution facilitators implementing bibliotherapy with youth to consider the severity of the youth’s condition when planning lessons and choosing bibliotherapy materials (Coffman et al., 2013; Hynes & Hynes-Berry, 2012; Lehr, 1981). For example, some scholars have expressed hesitancy about teachers using bibliotherapy with students diagnosed with more profound mental health illnesses, but are comfortable when it comes to using the intervention for youth with minor mental health needs (Philpot, 1997). Hebert and Kent (2000) hold the position that bibliotherapy should be restricted to youths of typical health and development.

Alternatively, other researchers have accepted bibliotherapy as an intervention for children and adolescents and are more concerned about what topics are appropriate for
this population. For example, Forgan (2002) cautioned teachers to evaluate their objectives for using bibliotherapy and select topics that are developmental in nature (such as talking about feelings, friendships, classroom behaviors) and avoid clinical topics (i.e., child abuse). Forgan (2002) encouraged teachers to acquire assistance from the school guidance counselor and district administrators to ensure selected topics are consistently developmental-focused and appropriate for the K-12 classroom setting. Abdullah (2002) cautioned the effectiveness of bibliotherapy might be limited by the availability of literature on certain topics. For instance, there is quite a bit of literature available to discuss emotions such as fear, sadness, and anger but little literature is available to discuss reactive attachment disorder or other more rare conditions and situations students might experience. Some children and adolescents may not be interested enough in reading to fully participate in the bibliotherapy process (Abdullah, 2002), so finding books that can engage reluctant readers can be a challenge.

Other scholars have voiced concern about the potential for children and adolescents to have a negative experience or response to bibliotherapy. For example, Abdullah (2002) observed that individuals may cast their own intention onto characters and “consequently strengthen their own perceptions and explanations or they could possibly be self-protective, therefore reducing the actions of characters and not relating with them, or it is possible they will place blame on the characters” (p. 4). Similarly, Lehr (1981) noted that students might not be ready to view themselves in a character and could simply rationalize the issue away.

A pertinent concern expressed in the literature questions the limitations of teachers and facilitators of bibliotherapy. Facilitators of bibliotherapy working with
children and adolescents need to be aware that children and adolescents cannot be forced through the stages of identification, catharsis, and insight (Abdullah, 2002; Lehr, 1981). If a child or adolescent is struggling with or unable to connect with a character or situation it is possible that the literature chosen is not appropriate or perhaps, the child needs some concrete objects to make the story more authentic for them. Teachers using the intervention may have inadequate knowledge of child and adolescent development and insufficient knowledge about selecting developmentally appropriate literature (Abdullah, 2002).

Other scholars have voiced concerns in regards to the implementation process of bibliotherapy with students in K-12 settings. For example, some researchers remind professionals that as with most interventions, bibliotherapy should not be the sole means of reaching the student but instead act as an adjunct or supplement to other instruction and supports (Johnson et al., 2001; Moses & Zaccaria, 1969; Olsen, 1975; Prater et al., 2006; Smith, 1989). Additionally, Johnson et al. (2001) cautioned teachers that bibliotherapy should not be a daily occurrence in the classroom with children and adolescents but used “carefully and sparingly” when it is needed (p. 12).

Understanding Perceptions or Teacher Perceptions

Teachers play a pivotal role in the development of children and adolescents. Teacher perceptions are important to study because teachers’ beliefs, attitudes, and thoughts about children and adolescent development, instructional practices, and their role as the teacher in the classroom directly impacts the classroom environment and the development of their students (Hyun, 2006). Fajet, Bello, Leftwich, Mesler, and Shaver (2005) report that PSTs “hold firm beliefs about the teaching profession long before they enter the
classroom and that they persist throughout their teacher preparation and into their early years of teaching” (p. 718). These firm beliefs reflect how teachers perceive bibliotherapy as an instructional tool for students in K-12 settings and this perception has implications for the intervention and its role in the field of education.

**Influence of Teacher Perceptions**

Scholars have noted the significance of teacher perceptions in the past few decades. For example, Pajares (1992) found that the perceptions of PSTs play a central role in how they acquire pedagogical knowledge because it influences how they interpret information. This finding highlights the influential mechanism of teacher perceptions and how those perceptions greatly influence the practices of teachers, especially new and beginning teachers. Kagan (1992) noted the importance of raising awareness of teacher perceptions amongst PSTs so that they are knowledgeable about how their perceptions impact their expectations of teaching and outcomes; interactions with colleagues, students, and parents; and their professional growth, in general.

One example of how influential teacher perceptions can be is illuminated in the work of Lutovac and Kaasila (2011). Lutovac and Kaasila (2011) discovered an alarming phenomenon in which many PSTs held a negative perception of mathematics due to problems they had in their own schooling. Furthermore, the study revealed that negative perceptions of teachers led to a tendency to use more traditional teaching methods in an effort to protect students from also having negative experiences with mathematics; however, mathematics anxiety was being transferred from the teachers to the students (Lutovac & Kaasila, 2011). Although this example is focused on mathematics, it demonstrates how teacher perceptions have the power to drive teachers’ pedagogy and
their ideals about the teaching process, as well as what they deem appropriate strategies for children and adolescents.

Shook’s (2012) study emphasized the perceptions of new teachers and noted concerns that novice teachers had about their ability and preparation to deal with the diverse behavioral needs of their students, stating they “do not feel prepared to manage classroom behavior problems” (p.129). Many scholars have noted that managing student behavior in classrooms can be challenging for new teachers when students with exceptional learning needs, students with unmet emotional needs, or students from impoverished homes are included in the general education classroom (Lu, 2008; Shook, 2012). Teachers’ perceptions that they are unequipped and unprepared to adequately handle the needs of their students can take an emotional toll on teachers and have negative repercussions in the classroom. Shook (2012) studied how these feelings of inadequacy in PSTs affected their instructional choices with children and adolescents. The emotions, feelings, and perceptions of the teacher influence teacher practices, which in turn influence students. Case in point, Shook (2012) discovered that teachers who felt unprepared to handle challenging behaviors, but were provided instruction on interventions, reacted to students by relying on rules and limiting activities instead of utilizing proactive and engaging strategies. When novice, inexperienced, and PSTs hold a negative perception about their ability to manage a classroom, they are less open to new teaching methods and interventions, which can negatively impact students in need of different strategies unknown to their new teacher.

Additionally, studying teacher perceptions of instructional strategies is important because teachers need to feel comfortable, confident, and competent in their instructional
strategies in order to adopt the approach and successfully integrate it into their teacher toolbox. If an intervention is perceived in a negative manner, teachers will be less likely to use it. Exploring the perceptions teachers have in regards to bibliotherapy and its implementation with children and adolescents can benefit both teachers and students by improving perceptions of the strategy.

Knowing how educators perceive instructional strategies is a critical component for educational research because it allows us to gain a better understanding for why specific instructional methods are or are not being utilized in classroom settings. Scholars in the education field need to know how a method is being perceived by teachers so that they can address misconceptions, inform educators, and offer training to support teachers so that children and adolescents are receiving pedagogy that is developmentally appropriate and focused on their diverse needs and not just the methods that are felt to be safe or popular by educators.

**Teacher Perceptions of Bibliotherapy**

Lutovac and Kaasila’s (2011) research focusing on teacher identity and identity development of a PSTs demonstrated how the prior experiences, perceptions, and feelings of PSTs resonated in their teaching and can be transferred to students during lessons. They provided an example of a pre-service teacher, Ulla, who held negative and anxious feelings towards mathematics, but through bibliotherapy and narratives was able to alleviate her negative perception of mathematics and realize that she could enjoy teaching mathematics by sharing and reflecting on her earlier experiences.

The literature currently lacks adequate information on how educators perceive bibliotherapy as an instructional strategy in classroom settings, especially when it comes
to utilizing bibliotherapy as a tool to assist teachers in addressing non-academic issues that children and adolescents are facing. This gap in the literature is problematic and is a barrier to the successful implementation of bibliotherapy in schools. This study is the first of its kind and aimed to systematically study the perceptions that PSTs and other undergraduate students held in regards to bibliotherapy and its implementation as an instructional tool for children and adolescents in K-12 school settings.

Chapter Summary

This review of literature on bibliotherapy has demonstrated there is mostly descriptive literature and not sufficient empirical research supporting bibliotherapy as an instructional tool to be utilized with children and adolescents in K-12 classroom settings. The empirical literature that was available was based in clinical bibliotherapy, which is not the type of bibliotherapy used by teachers in school settings. There is a need for researchers to go beyond descriptive articles that define bibliotherapy, state tips for implementation, and offer resources and book lists to teachers and empirically study the intervention’s efficacy in the K-12 setting. The present literature (or lack thereof) illustrates the sensitive nature of the bibliotherapeutic process and potentially problematic teacher perceptions as a result of its clinically-rooted terminology (Lu, 2008). However, using books as a means to teach children and adolescents is a widely practiced instructional strategy in today’s classrooms (Russell, 2012). While teachers have generally accepted the value of literature and use books as a resource in the classroom, this usage is not structured and carried out as a systematic, student-centered, developmentally-framed intervention conducted to support students in achieving a meaningful connection with the characters and to assist them in acquiring the skills to
cope with their challenges and situations. Bibliotherapy is one such intervention. However, the intervention should be approached carefully as scholars from the field have acknowledged the fact that many professionals promote the use of bibliotherapy in schools despite the need for additional research to verify the effectiveness of bibliotherapy (Prater et al., 2006; Detrixhe, 2010). Lenkowsky (1987) reviewed the literature on bibliotherapy and determined that “evaluating the efficacy of bibliotherapy [was] difficult” in part because there was an “expansion and overlap in interpretation, definition, utilization, understanding” of bibliotherapy across the fields of medicine, counseling, libraries, and education (p.124). Professionals in these fields are making bibliotherapy fit their needs and not necessarily following a uniform bibliotherapeutic process. Lenkowsky (1987) also commented on the need for “controlled research” on bibliotherapy to validate it.

While there is a clear lack of empirical research in regards to the implementation of developmental bibliotherapy with children and adolescents in K-12 settings, Liz Brewster (2009), a librarian and respected researcher of bibliotherapy in the United Kingdom, asserted that regardless of an additional need for research, bibliotherapy “should not be underappreciated” (p.16). The present study contributes to the literature on bibliotherapy by collecting quantitative and narrative data on the perceptions of undergraduate students, including PSTs, to gain a deeper understanding of how bibliotherapy is perceived and what influences and concerns are impacting the intervention’s implementation in K-12 settings.
CHAPTER 3
METHODS

The purpose of this chapter is to describe the methods used to measure and explore the perceptions held by preservice teachers (PSTs) and other non-education undergraduate students (non-PSTs) in regards to implementing bibliotherapy in the classroom setting. To realize this purpose, this chapter provides a description of the study’s research methodology, context, data collection procedures, data management, and analyses. The Institutional Review Board (IRB) from Iowa State University’s Human Subjects Research Office approved of this thesis study and granted the researcher “exempt” status prior to conducting the survey with participants. The IRB approval form can be viewed in its entirety in Appendix A.

Study Design

Measuring the perceptions of PSTs and other undergraduate students concerning bibliotherapy implementation was a complex undertaking. I sought to measure perceptions of bibliotherapy from PSTs in both a numerical and descriptive manner via a survey design to obtain greater understanding into the factors surrounding bibliotherapy implementation and educator perceptions of the approach. The perceptions of non-PSTs were also studied to offer context to the perspectives of PSTs.

A survey research design was employed to assess the perceptions of bibliotherapy quantitatively. According to Creswell (2008), survey design research examines the attitudes, opinions, behaviors, or characteristics of a population by collecting numerical data and statistically analyzing the results. Fink (2013) acknowledges the variability of survey types and methods. This study utilized a cross-sectional survey design (Fink, 2013). The survey measure was given once to participants and provided a single snapshot
of the attitudes and perceptions of an undergraduate student population. A cross-sectional survey design was selected because this approach gathers data on an important subject at one point in time, so that others can plan for change (Fink, 2013). I chose a survey research design to describe the perceived attitudes and behaviors of the undergraduate students in the study’s population. In my review of the literature, presented in Chapter Two, I highlighted the lack of empirical data in regards to bibliotherapy as an educational tool and other aspects of the approach’s construction, implementation, and effectiveness. The empirical research that does exist on bibliotherapy is limited to clinical bibliotherapy in therapeutic and medical settings. I sought to address this deficiency by collecting quantitative data that focused on developmental bibliotherapy and its usage in school settings.

Before constructing the survey items, I decided that my survey would offer opportunities for participants to share their voice and perspective in addition to ranking items. This was achieved by creating open-ended items that collected narrative and textual data that supplemented the quantitative information obtained in the measure. It would be insufficient to know how acceptable or comfortable respondents perceived and rated certain aspects of bibliotherapy implementation without understanding the factors influencing their perceptions. For this reason, the four open-ended items in my survey are central to the measure and the participants’ textual responses gathered were transformed into quantitative numerical codes using content analysis.

**Setting and Participants**

The participants in this study were undergraduate students enrolled in at least one of two courses required for teacher preparation programs at a large four-year university in
the Midwestern United States. The courses selected were *Literature for Children* and *Education of the Exceptional Learner in a Diverse Society*. Both courses are designed for freshman and sophomore-level undergraduate students. Students of all majors are welcome to enroll in these courses. However, the majority of the participating students were PSTs—undergraduate students majoring in education with the intent to teach students at the early childhood, elementary, or secondary level. I chose courses that met in person (face-to-face) for this study. Table 1 shows the demographic characteristics of the participants. Given the midwestern location of the university the majority of my sample were Caucasian/White females. Due to the content of the courses chosen for the sample, the majority of the study’s respondents were also PSTs.

Table 1

*Demographics of Participants*

<table>
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<th>PST (N = 161)</th>
<th>Non-PST (N = 87)</th>
<th>Total (N = 248)</th>
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<tbody>
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<td><strong>%</strong></td>
<td><strong>n</strong></td>
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<td></td>
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<tr>
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<tr>
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<td>0.00</td>
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<tr>
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<td>1.24</td>
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<td>Early Childhood</td>
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<td>Elementary Education</td>
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<tr>
<td>Other Education Major</td>
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(continued)
Table 1 Continued

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<th>Non-PST (N = 87)</th>
<th>Total (N = 248)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Non-PST Majors</td>
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<td>6</td>
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<tr>
<td>Other Non-PST Major</td>
<td>9</td>
<td>10.34</td>
<td>9</td>
</tr>
</tbody>
</table>

*Note.* aIncludes Special Education

**Measure**

I developed the survey used for this study; the measure can be seen in its entirety in Appendix B. The survey consisted of demographics and background information sections and three parts. These five sections were ordered in a sequential manner to ensure the directions were clear and user-friendly for the respondents. Fink (2013) stated that a well-designed and user-friendly survey always contributes to its validity and reliability. It was my intent to create a survey that met those guidelines and to ensure the measure’s integrity by obtaining feedback from a small focus group and a few faculty members. To improve the validity of the survey measure, I drafted items based on my knowledge of bibliotherapy and survey designs acquired from reviewing the literature and instruction obtained in my research methods courses. The survey consisted of predominately closed response questions that asked participants to rate items using a pre-determined summative scale. A majority of closed items were chosen for the study because experts in the field (Creswell, 2008; Fink, 2013; Fowler, 2014) supported them as being the most efficient, reliable, and uniform in terms of the data they produce. Four open-ended items were included in the measure to gain insight into the perceptions of the
respondents. Fink (2013) emphasized the value of open-ended questions as they present participants with an opportunity to share their opinions and attitudes in their own words.

After the first survey measure was drafted, two graduate students were asked to complete the survey and comment on its design and to identify any biases in the wording of the items. According to Fowler (2014), discussing the design and format of survey measures with a focus group is valuable for ensuring the survey is measuring what it is intended to measure. After making edits based on their feedback, I presented the survey measure to three faculty members and a few additional changes were made to the layout, wording, and definitions provided within the measure before it was finalized. To improve the reliability of the survey, all participants were given the same form of the measure using similar administration procedures. Fowler (2014) noted that consistency in measurement is a key component of a reliable survey measure. Additionally, the wording of the survey’s items is another key component of a reliable measure and I sought to create items that were clear and direct to increase the ease of participants’ understanding so reliable responses could be collected.

The Demographics Section gathered data on the participants’ college affiliation, declared major, gender, and ethnicity/race. The purpose of the Demographics Section was to obtain information about the characteristics of the sample.

The Background Information section collected data on enrollment status in the target courses (Literature for Children and Education of the Exceptional Learner in a Diverse Society), and whether or not instruction on bibliotherapy was received prior to this study. The Background Information section also included an open-ended item asking participants about the meaning of bibliotherapy, and they would define bibliotherapy
based on their knowledge or prior experiences with bibliotherapy. The purpose of the Background Information section was to address the first research question: What are the experiences and current understandings of bibliotherapy of PSTs and other undergraduate students?

Part One of the survey measure used a four-point rating scale (1 = very unacceptable, 2 = unacceptable, 3 = acceptable, 4 = very acceptable) to determine how acceptable the participants perceived bibliotherapy to be when utilized by a teacher in a classroom setting for 17 different purposes, such as “to assist the class in understanding a peer with dyslexia,” and “to practice problem solving skills.” The purpose of Part One of the survey measure was to address the second research question: What purposes do PSTs and other undergraduate students perceive as acceptable for classroom teachers to use bibliotherapy in the classroom?

Between Part One and Part Two of the survey, respondents were provided with a definition of both children’s literature and bibliotherapy to offer them sufficient context to complete the rest of the survey. Fowler (2014) stated that error can arise in survey measures when respondents lack knowledge of the topic being assessed. I included these definitions to minimize the influence of error on participants’ responses.

Part Two of the survey utilized a four-point rating scale (1 = very uncomfortable, 2 = uncomfortable, 3 = comfortable, 4 = very comfortable) to measure participants’ perceived comfort using bibliotherapy as a classroom teacher and their comfort with the same 16 situations/topics if they themselves were to implement bibliotherapy with students in a classroom setting. The 16 situations/topics included items such as, “shyness,” and “a student moving to a new school.” The purpose of Part Two of the
survey was to quantitatively address the third research question: How comfortable are PSTs and other undergraduate students with implementing bibliotherapy in the classroom?

Part Three of the survey asked the respondents to answer the following three open-ended questions: (a) As you finished the items above, what factors influenced your thinking?; (b) Do you perceive any benefits to using bibliotherapy as an instructional tool in the classroom with children and adolescents?; (c) Do you have any concerns about your personal use of bibliotherapy as an instructional tool in the classroom with children and adolescents? The purpose of Part Three of the survey was to address the fourth and fifth research questions: (4) What factors influence level of comfort in implementing bibliotherapy as an instructional tool in the classroom? (5) What concerns do PSTs hold in regards to bibliotherapy implementation?

**Procedures**

I provided a brief presentation to the participants before distributing the surveys. I introduced myself and briefly shared that participation in the study was optional but would help me to better understand the teaching strategy I was studying. I concluded the presentation by explaining that more information about my study could be found in the cover letter attached to the survey and requesting that participants answer the items on the survey as honestly as they could. Participants received a cover letter, which was stapled to the top of the survey, explaining the research study (see Appendix C). As participants were completing the survey, I remained at the front of the lecture halls. As participants finished the surveys, they handed their completed documents to me or to the course instructor. At the end of approximately 20 minutes, I walked around to collect the
completed surveys from students that remained seated. All respondents were thanked for their participation.

In the *Literature for Children* course, a total of 158 surveys were completed during the first 20 minutes of the class period. Thirteen students opted not to participate. Approximately one week later, a total of 90 surveys were completed during the last 20 minutes of the *Education of the Exceptional Learner in a Diverse Society* course. Roughly 40 students opted not to participate in the study from this course; this larger number of non-respondents may have been the result of the instructor announcing that students could leave if they already participated in the study.

**Data Analysis**

I assigned an identification number and recorded it in the top corner of each survey. Each numerical survey response was then entered into *SPSS version 22* for descriptive analysis, while textual survey responses were first entered into *Microsoft Excel 2013* for content analysis before being entered into *SPSS*.

Creswell (2008) stated when researchers seek to compare groups, analyzing data gathered from survey research designs should extend beyond descriptive analysis and include inferential statistics. With this in mind, my approach to analyzing the data was to use the statistical data to frame the themes that arose from the open-ended textual responses. This approach allowed the perceptions of the participants to be presented as a complete picture. The numerical data represented a snapshot and the textual data added context and meaning, giving the snapshot a frame for reference and deeper understanding.
Quantitative Analysis

Descriptive statistics were employed to analyze the quantitative data collected from the Demographics Section, Background Information, and Parts One and Two of the survey. I used descriptive statistics to compute the mean, standard deviation, frequency, as well as identifying any missing data.

The sample was divided into two groups: PSTs and non-PSTs. Respondents who identified their college affiliation/major as “Elementary Education,” “Early Childhood Education,” and “Special Education,” formed the PST group. Additionally, there were five participants who were categorized as PST based on their enrollment in an education related department (i.e., “Family Consumer Science Education”, “Secondary Education”, or minoring/double majoring in another education-focused program). Please note that at this particular university, “Special Education” is an endorsement option for the Elementary Education major. Survey participants who identified themselves as being affiliated with or majoring in one or more of the following areas were grouped as non-PST: “Agriculture,” “Business,” “Engineering,” “Human Sciences,” “Child, Adult, & Family Studies,” “Liberal Arts,” and “Other.” Participants who identified with a major that fell in both groups were coded as PSTs, as their programming includes teacher preparation courses.

Independent samples t-tests were performed to compare the means of the two groups—PSTs and non-PSTs. Fink (2013) asserts that a t-test is a good option when one wants to know the probability that mean differences between two groups are statistically significant and not due to chance. The data gathered from this study is continuous, which also supports my decision to conduct independent samples t-tests.
Content Analysis

Content analysis is a widely used method for analyzing narrative data, in this case from open-ended survey items, for specific words, phrases, and concepts for the purpose of quantifying the content into overall themes (Fink, 2013; Hsieh & Shannon, 2005; Mayring, 2000). Mayring (2000) asserted content analysis procedures allow researchers to address textual data in a way that preserves the steps taken in quantitative research. These themes can then be used to compare responses between groups. As Hsieh and Shannon (2005) suggested, themes can first be grouped into subcategories before being combined to major categories (themes) and further defined based on the relationship of the categories. This contextual content analysis method is useful for identifying emergent themes from open-ended responses. I implemented the contextual content analysis method for three open-ended items in Part Three from the survey measure to ensure that I was addressing the research questions of this study in the most logical and systematic manner possible.

In response to the first open-ended item (found in the Background Information section of the survey), participants were asked to describe their current understanding of bibliotherapy. I reviewed participants’ responses to identify frequently occurring key words and phrases that illustrated how much or in some cases, how little participants understood about bibliotherapy. From my review of the narrative data, the key words “books,” and “literature” were most commonly used to demonstrate the respondent understood that the bibliotherapy process requires the use of literature. Additionally, the key phrases: “to help or aid,” “to teach or explain,” “to discuss with or to talk about,” and other phrases referring to an action emerged from the data to demonstrate respondents’
understanding that bibliotherapy is a process in which literature is used for a purpose that aids in the development and coping of children and adolescents. If a response noted using books and/or literature and a purpose or action for the books/literature (e. g., produce a definition for bibliotherapy), the respondent was coded as being able to define bibliotherapy. The resulting variable was dichotomous—“yes,” the respondent could define bibliotherapy or “no” they could not define the term or process of bibliotherapy.

The first open-ended item in Part Three, which asked participants what factors influenced their thinking in regards to how they rated the previous survey items, assessed respondents’ perceptions of the factors that influenced their use of bibliotherapy, I first read and reviewed the narrative data to gain an overall understanding of the narrative responses I re-read responses multiple times to familiarize myself with key phrases and reoccurring themes before I dove into coding the textual data. Once that task was accomplished, I highlighted the key words and phrases, such as “my comfort level,” “reading level of students,” “my beliefs,” “size of the class,” and “my values” to help me group the responses visually. I then categorized these highlighted key words and phrases into two over-arching themes based on whether they reflected thoughts that were “teacher-centered” or “student-centered.”

Teacher-centered comments focused on the needs of the facilitator in the bibliotherapy process, often reflecting personal feelings. For example, responses using personal pronouns such as, “I,” “me,” and “my” were often categorized as teacher-centered because the participant was indicating how they personally felt or how a task directly impacted them. Frequently, these personal pronouns were paired with comments referring to how the participant perceived their “personal knowledge” or “experience” of
topics and reasons for using bibliotherapy in the classroom setting with children and adolescents. Student-centered comments indicated the participant was considering the feelings and needs of students when presented with topics that bibliotherapy could address in the school setting and often included words such as “students,” “class,” and “children.” Some respondents included comments that represented into both “teacher-centered” and “student-centered” themes, so a third code, “both” was created to address and include these respondents with combined thinking. The survey measure included a second open-ended item in Part Three that asked participants to share any perceived benefits of using bibliotherapy as an instructional tool in school settings. However, this particular item did not answer the research questions proposed in this study, so it was excluded from my content analysis process.

I also used content analysis for the third open-ended item in Part Three, which asked participants to share any concerns they had in regards to their personal implementation of bibliotherapy in a classroom setting with children and adolescents. First, I read and reviewed the narrative data numerous times and highlighted keywords and phrases, such as “parents,” “uncomfortable,” “upsetting students,” “not enough time,” and “picking wrong book.” I then categorized these key words and phrases into seven themes. I re-read the data again, this time reviewing the responses and coding them according to the seven themes. The first code, “fear of parents,” encompassed responses that expressed fear and/or anxiety over upsetting parents or having a parent call into the school and get them in trouble. “Worries of backlash from peers and/or administration” represented participants who were worried other teachers, principals, or other administration officials would not agree with their use of bibliotherapy and feared
negative evaluations or being judged for using books too much. “Negative outcomes for students,” was another identifiable theme that captured responses demonstrating concerns about making specific students feel targeted, upsetting students, or offending them with the content of bibliotherapy books. The fourth code, “implementation woes or lack of knowledge on bibliotherapy” grouped together responses that voiced anxiety about the participant’s capacity to implement bibliotherapy, such as “choosing the right or wrong book,” “saying the wrong thing,” or “not knowing enough about how bibliotherapy works.” Another theme that was emerged was “doubts in bibliotherapy and its place in the classroom,” which included responses that expressed concerns that bibliotherapy “is not a teacher’s place,” that “a therapist or counselor,” should be using bibliotherapy instead because sensitive topics are “inappropriate” or will make teachers/students “uncomfortable.” “Expressing no concern about the intervention,” was identified as a theme and represented the participants who expressed “none” or “no concerns” in response to this item. Finally, an exclusion code was established to label participants who were excluded from the analysis of this item due to no response or a statement that read “I don’t know” or “I won’t ever be a teacher.”

After performing content analysis on the three survey items described in the above paragraphs, I assigned a number to each theme to quantify the narrative data so statistical analyses could be performed. Additionally, quantifying the narrative data with numerical codes allowed me to visually understand the prevalence of themes and to compare the findings between groups.
Chapter Summary

This study utilized a survey design to explore the perceptions of undergraduate and PSTs in regards to their knowledge, thoughts, and concerns about the implementation of the instructional approach, bibliotherapy with children and adolescents. Quantitative and content analysis frameworks guided my inductive coding and analysis methods. Statistical and interpretative procedures were employed to better understand the influencing factors of participants’ perceptions. One hundred sixty-one PSTs and 87 non-PSTs participated in the study. These undergraduate students were selected because they were enrolled in at least one of two courses identified as teacher preparation courses and therefore had some knowledge of instructional methods used in classroom settings with children and adolescents. Data was collected in person from participants with a hard copy survey that included rating items and responding to open-end questions. This chapter shared the process of my research; results are presented in the following chapter.
CHAPTER 4
RESULTS

The purpose of this study was to gain insight about the perceptions of preservice teachers (PSTs) and other non-education undergraduate students (non-PSTs) in regards to bibliotherapy as an instructional tool in school settings and to explore what factors are influencing those perceptions. A survey instrument was created and utilized to obtain the data. I selected data analysis procedures, presented in Chapter Three, to address the research questions I sought to explore. This chapter presents the results of the data analyses in relation to the research question the results answered.

Research Question 1: Experiences and Current Understanding of Bibliotherapy

Two items in the survey measure addressed the first research question: What are the experiences and current understanding of bibliotherapy of PSTs and other undergraduate students? The first was a dichotomous (yes/no) question asking participants if they had received prior instruction on bibliotherapy. The second was an open-ended question asking participants what bibliotherapy meant to them and how they would define bibliotherapy based on their own knowledge and experiences.

I conducted a cross tabulation analysis comparing PSTs and non-PSTs based on whether or not the participant had received prior instruction on bibliotherapy. The results of this analysis determined 54 PSTs and 25 non-PSTs had received instruction on bibliotherapy prior to this study. One hundred and three PSTs and 59 non-PSTs had not received any instruction on bibliotherapy prior to the study based on their own self-reports. PSTs and non-PSTs did not differ in the proportion of students who had received prior instruction on bibliotherapy ($\chi^2 = .53, p = .47$).
Content analyses were implemented on the responses to the open-ended question to assess PSTs’ and non-PSTs’ understanding of bibliotherapy as an instructional tool for classroom settings. The criteria for coding the participants’ responses into dichotomous categories (whether or not they could define bibliotherapy) were described in greater detail in Chapter Three. A PST survey participant responded to the item with the following written statement that indicates she has some understanding of bibliotherapy: “Using literature to assist in an issue that is mental, physical or cognitive and/or using books to teach hard/sensitive topics.” A non-PST survey participant also demonstrated her understanding of bibliotherapy with this description which includes a definition and offers a supporting detail: “Bibliotherapy is a way of using books to help people, including children, through hard times. The books might relate to the individual and help them cope.” Alternatively, a PST survey participant demonstrated a lack of understanding of bibliotherapy with this response that provides no definition or information on the process: “not sure what it is.” In Table 2, I report the results for PSTs’ and non-PSTs’ current understanding of bibliotherapy.

Table 2

<table>
<thead>
<tr>
<th></th>
<th>PSTs (N = 161)</th>
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<th>Non-PSTs (N= 87)</th>
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<td>%</td>
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<td>31.03</td>
</tr>
<tr>
<td>Could not provide a definition of bibliotherapy</td>
<td>13</td>
<td>08.07</td>
<td>7</td>
<td>08.05</td>
</tr>
<tr>
<td>Missing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
In general, the results indicate both groups (PSTs and non-PSTs) have a similar distribution of those who currently understand bibliotherapy and can define the method and those who have no current understanding of bibliotherapy and were not able to define or provide an experience with the method.

**Research Question 2: Purposes for Bibliotherapy Perceived as Acceptable for Classroom Teachers**

Part One of the survey measure used a four-point rating scale (1 = very unacceptable, 2 = unacceptable, 3 = acceptable, 4 = very acceptable) to determine the participants’ perceptions of the effectiveness of bibliotherapy when used by a teacher in a classroom setting for 17 different purposes. I conducted an independent samples t-test comparing the mean scores of PSTs and non-PSTs for each of the 17 purposes. To account for the increased risk of type one error that occurs with multiple comparisons, I assessed the p-value at a more stringent .01 level instead of the traditional .05 level. In Table 3, I report the frequency, mean, and standard deviations of each of the 17 items for both groups (PSTs and non-PSTs), as well as the t and p values for the comparison of the means. I examined the assumptions for normality and found equal variances could not be assumed across all items. As a result, I used the t-test that does not assume equal variances across groups.

Table 3

<table>
<thead>
<tr>
<th>t-test Results Comparing Perceived Acceptability of Bibliotherapy Purposes in Classroom Settings between PSTs and Non-PSTs</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSTs</td>
</tr>
<tr>
<td>------</td>
</tr>
<tr>
<td>To address bullying</td>
</tr>
</tbody>
</table>
The results indicated there were no significant differences in the perceived acceptability of bibliotherapy purposes in classroom settings between PSTs and non-PSTs for any of the 17 items. The mean was slightly lower for both groups in regards to the following three items: “to assist the class in understanding a peer with dyslexia,” “to discuss a peer’s illness,” and “to help a student cope with a death of a loved one.”
Additionally, the standard deviation for both groups was extremely large for the item, “to discuss a peer’s illness.”

**Research Question 3: Comfort with Implementing Bibliotherapy in the Classroom**

Part Two of the survey measure used a four-point rating scale (1 = very uncomfortable, 2 = uncomfortable, 3 = comfortable, 4 = very comfortable) to determine participants’ perceived comfort level with bibliotherapy when utilized by a teacher in a classroom setting for 16 different purposes. I conducted an independent samples t-test comparing the mean scores of PSTs and non-PSTs for each of the 16 purposes included in the measure. The results displayed in Table 4 indicate how respondents perceived their level of comfort with a classroom teacher (other than themselves) implementing bibliotherapy in a school setting. These data provide a point of reference for Table 5. In Table 5, the results displayed indicate how respondents perceive their own comfort level when it comes to their personal implementation of bibliotherapy in the classroom setting with students. To account for the increased risk of type one error that occurs when multiple comparisons are ran at consecutively, I assessed the p-value at a more stringent .01 level instead of the traditional .05 level. In Tables 4 and 5, I report the frequency, mean, and standard deviations of each of the 16 items for both groups (PSTs and non-PSTs) in the study, as well as present the t and p values. I examined the assumptions for normality and because equal variances could not be assumed across all items, given the unequal sizes of the two groups. Thus, the results in Tables 4 and 5 do not assume equal variance.
Table 4

\textit{t-test Results Comparing Perceived Comfort Level of Regarding a Teacher’s Use of Bibliotherapy Purposes in Classroom Settings between PSTs and Non-PSTs}

<table>
<thead>
<tr>
<th></th>
<th>PSTs</th>
<th>Non-PSTs</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>A student who has a reading problem</td>
<td>161</td>
<td>87</td>
<td>1.46</td>
<td>.15</td>
</tr>
<tr>
<td>Dyslexia</td>
<td>161</td>
<td>87</td>
<td>.84</td>
<td>.40</td>
</tr>
<tr>
<td>A student with a learning disability</td>
<td>161</td>
<td>87</td>
<td>1.01</td>
<td>.32</td>
</tr>
<tr>
<td>Shyness</td>
<td>160</td>
<td>87</td>
<td>.66</td>
<td>.51</td>
</tr>
<tr>
<td>A peer’s chronic illness/cancer</td>
<td>161</td>
<td>87</td>
<td>1.85</td>
<td>.07</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>161</td>
<td>87</td>
<td>1.03</td>
<td>.31</td>
</tr>
<tr>
<td>Coping with a death of a loved one</td>
<td>161</td>
<td>87</td>
<td>.80</td>
<td>.43</td>
</tr>
<tr>
<td>Dealing with abuse</td>
<td>160</td>
<td>87</td>
<td>1.14</td>
<td>.26</td>
</tr>
<tr>
<td>Death of a pet</td>
<td>160</td>
<td>87</td>
<td>.15</td>
<td>.88</td>
</tr>
<tr>
<td>A student moving to a new school</td>
<td>161</td>
<td>87</td>
<td>-.18</td>
<td>.85</td>
</tr>
<tr>
<td>Peer pressure</td>
<td>161</td>
<td>87</td>
<td>1.18</td>
<td>.24</td>
</tr>
<tr>
<td>Feelings</td>
<td>160</td>
<td>87</td>
<td>.19</td>
<td>.85</td>
</tr>
<tr>
<td>A student with disruptive behaviors</td>
<td>159</td>
<td>87</td>
<td>.76</td>
<td>.45</td>
</tr>
<tr>
<td>Information on unfamiliar topic</td>
<td>161</td>
<td>86</td>
<td>.10</td>
<td>.92</td>
</tr>
<tr>
<td>Racism</td>
<td>161</td>
<td>87</td>
<td>1.05</td>
<td>.30</td>
</tr>
<tr>
<td>A social skill</td>
<td>161</td>
<td>87</td>
<td>1.63</td>
<td>.11</td>
</tr>
</tbody>
</table>

When considering a classroom teacher’s implementation of bibliotherapy (Table 4), the results indicated there were no significant differences between PSTs and non-PSTs across all 16 items. The mean was slightly lower (i.e., respondents were less comfortable) for both groups in regards to the following three items: \textit{“a peer’s chronic illness/cancer,” “coping with a death of a loved one,” and “dealing with abuse.” The}
standard deviation for both groups was extremely larger for the same three items.

Furthermore, the standard deviation was moderately larger for non-PSTs concerning the items: “a student with disruptive behaviors” and “racism.”

Table 5

**T-test Results Comparing Perceived Comfort Level of Regarding a Personal Use of Bibliotherapy Purposes in Classroom Settings between PSTs and Non-PSTs**

<p>|                                | PSTs                  | Non-PSTs               | t   | p     |</p>
<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A student who has a reading problem</td>
<td>161</td>
<td>3.34</td>
<td>.71</td>
<td>85</td>
<td>3.12</td>
<td>.73</td>
<td>2.25</td>
</tr>
<tr>
<td>Dyslexia</td>
<td>161</td>
<td>3.18</td>
<td>.74</td>
<td>85</td>
<td>2.99</td>
<td>.79</td>
<td>1.85</td>
</tr>
<tr>
<td><strong>A student with a learning disability</strong></td>
<td>161</td>
<td>3.27</td>
<td>.75</td>
<td>85</td>
<td>2.96</td>
<td>.82</td>
<td>2.88</td>
</tr>
<tr>
<td>Shyness</td>
<td>160</td>
<td>3.49</td>
<td>.60</td>
<td>85</td>
<td>3.35</td>
<td>.63</td>
<td>1.69</td>
</tr>
<tr>
<td>A peer’s chronic illness/cancer</td>
<td>159</td>
<td>2.88</td>
<td>.84</td>
<td>85</td>
<td>2.66</td>
<td>.89</td>
<td>1.89</td>
</tr>
<tr>
<td><strong>Self-esteem</strong></td>
<td><strong>161</strong></td>
<td><strong>3.57</strong></td>
<td><strong>.53</strong></td>
<td><strong>85</strong></td>
<td><strong>3.35</strong></td>
<td><strong>.67</strong></td>
<td><strong>2.61</strong></td>
</tr>
<tr>
<td>Coping with a death of a loved one</td>
<td>161</td>
<td>3.01</td>
<td>.79</td>
<td>85</td>
<td>2.87</td>
<td>.86</td>
<td>1.27</td>
</tr>
<tr>
<td>Dealing with abuse</td>
<td>161</td>
<td>2.67</td>
<td>.87</td>
<td>85</td>
<td>2.64</td>
<td>.90</td>
<td>.30</td>
</tr>
<tr>
<td>Death of a pet</td>
<td>161</td>
<td>3.33</td>
<td>.66</td>
<td>85</td>
<td>3.21</td>
<td>.80</td>
<td>1.16</td>
</tr>
<tr>
<td>A student moving to a new school</td>
<td>161</td>
<td>3.54</td>
<td>.60</td>
<td>85</td>
<td>3.45</td>
<td>.66</td>
<td>1.08</td>
</tr>
<tr>
<td>Peer pressure</td>
<td>161</td>
<td>3.60</td>
<td>.53</td>
<td>85</td>
<td>3.47</td>
<td>.65</td>
<td>1.62</td>
</tr>
<tr>
<td>Feelings</td>
<td>161</td>
<td>3.60</td>
<td>.54</td>
<td>85</td>
<td>3.48</td>
<td>.72</td>
<td>1.28</td>
</tr>
<tr>
<td>A student with disruptive behaviors</td>
<td>161</td>
<td>3.19</td>
<td>.77</td>
<td>85</td>
<td>2.99</td>
<td>.85</td>
<td>1.85</td>
</tr>
<tr>
<td>Information on unfamiliar topic</td>
<td>161</td>
<td>3.45</td>
<td>.70</td>
<td>85</td>
<td>3.35</td>
<td>.78</td>
<td>.93</td>
</tr>
<tr>
<td>Racism</td>
<td>161</td>
<td>3.11</td>
<td>.77</td>
<td>84</td>
<td>2.99</td>
<td>.84</td>
<td>1.12</td>
</tr>
<tr>
<td><strong>A social skill</strong></td>
<td><strong>161</strong></td>
<td><strong>3.64</strong></td>
<td><strong>.51</strong></td>
<td><strong>84</strong></td>
<td><strong>3.42</strong></td>
<td><strong>.66</strong></td>
<td><strong>2.78</strong></td>
</tr>
</tbody>
</table>

*Note.* p < .01 are in boldface.

When asked to consider their own future use of bibliotherapy in school settings (Table 5), the *t*-test results demonstrated some mixed finding in regards to the statistical
differences between PSTs and non-PSTs. Using the more stringent $p$-value, I found statistically significant differences between groups for the following items: “a social skill,” “self-esteem,” and “a student with a learning disability.” On all of these items, PSTs reported feeling more comfortable than did non-PSTs. Given that scores of three or higher indicated comfort, it is notable that the means were below three for PSTs on only two items: “a peer’s chronic illness/cancer” and “dealing with abuse.” PSTs demonstrated more variability (a greater standard deviation) for the following two items: “a peer’s chronic illness/cancer” and “dealing with abuse.” Non-PSTs had means below three on seven items: “dyslexia,” “a student with a learning disability,” “a peer’s chronic illness/cancer,” “coping with a death of a loved one,” “dealing with abuse,” “a student with disruptive behaviors,” and “racism.” Additionally, non-PSTs demonstrated the greatest variability for the items: “a peer’s chronic illness/cancer” and “dealing with abuse.”

Research Question 4: Factors Influencing Comfort with Implementing Bibliotherapy

I employed content analysis to the responses of the open-ended question to determine what factors influenced respondents’ comfort level in utilizing bibliotherapy in classroom settings. The criteria for coding the participants’ responses into categories of influence (teacher-centered, student-centered, both teacher and student-centered, or exclusion) were described in greater detail in Chapter Three. In Table 6, I report each groups’ (PSTs and non-PSTs) perceptions of influences that impact their level of comfort with implementing bibliotherapy.
Table 6

*Content Analysis Results Comparing Perceived Influences between PSTs and Non-PSTs*

<table>
<thead>
<tr>
<th></th>
<th>PSTs (N = 161)</th>
<th>Non-PSTs (N= 87)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Teacher-centered</td>
<td>113</td>
<td>70.19</td>
</tr>
<tr>
<td>Student-centered</td>
<td>29</td>
<td>18.01</td>
</tr>
<tr>
<td>Teacher &amp; Student-centered</td>
<td>17</td>
<td>10.56</td>
</tr>
<tr>
<td>Excluded or Missing</td>
<td>2</td>
<td>0.124</td>
</tr>
</tbody>
</table>

A PST survey participant shared a few factors that influenced his/her perceptions of bibliotherapy in a manner that demonstrated teacher-centered thinking: “What I have experienced in class rooms, working at a daycare, being in [Literature for Children course] and other elementary education classes, my parents and how they raised me.” Similarly, another PST survey participant shared his perceptions of influential factors that also resonate with teacher-centered thinking: “I think about the categories I know more about and also thinking about the parents in this situation and whether it is something that should be addressed by them and not the teacher.” A non-PST survey participant offered her perception of what influenced her consideration of bibliotherapy implementation and revealed student-centered thinking: “the situation of the child or how comfortable or traumatized they were.” A PST survey participant also provided an example of a student-centered influence on bibliotherapy perception: “Considering all the students in the class when choosing books to read, since children will most likely be at different reading levels in their lives.” Some survey participants’ perceptions were
influenced by both teacher and student-centered thinking. For example, one PST gave this response: “I think books are a great tool for every reason. Rather [sic] it means reading the book to the class or giving the book to the child who needs it. At this point, I may feel slightly uncomfortable with using books for some topics but that will become more comfortable with time.” A non-PST also reported influences that encompassed both categories: “What influenced my thinking was the child’s problem with a death or cancer and thinking if I would be comfortable and how would I approach that.”

The results indicate the majority of both PSTs and non-PSTs are influenced by factors that are considered teacher-centered. A larger proportion of PSTs reported teacher-centered influences as compared to non-PSTs. Non-PSTs report a slightly higher proportion of student-centered influences compared to PSTs. A moderate number of non-PSTs reported being influenced by both teacher and student-centered factors while only a small number of PSTs reported both influences.

**Research Question 5: Concerns about Bibliotherapy Implementation**

Content analysis was performed on the responses to the open-ended question to measure the perceived concerns held by both PSTs and non-PSTs in regards to implementing bibliotherapy as a classroom teacher in school settings. The criteria for coding the participants’ responses into categories of concerns (fear of parents, worries of backlash from peers and/or administration, negative impact for students, implementation woes or lack of knowledge on bibliotherapy, doubts about bibliotherapy and its place in the classroom, expressing no concern in the intervention, or exclusion) were described in greater detail in Chapter Three. In Table 7, I report the results for each groups’ perceptions of concerns about implementing bibliotherapy in the classroom setting.
Table 7

**Content Analysis Results Comparing Perceived Concerns between PSTs and Non-PSTs**

<table>
<thead>
<tr>
<th>Concern</th>
<th>PSTs (N = 161)</th>
<th>%</th>
<th>Non-PSTs (N = 87)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fear upsetting parent</td>
<td>50</td>
<td>31.06</td>
<td>18</td>
<td>20.69</td>
</tr>
<tr>
<td>No concerns</td>
<td>48</td>
<td>29.81</td>
<td>35</td>
<td>40.23</td>
</tr>
<tr>
<td>Not for school setting</td>
<td>33</td>
<td>20.50</td>
<td>10</td>
<td>11.49</td>
</tr>
<tr>
<td>Negative impact on student</td>
<td>25</td>
<td>15.53</td>
<td>15</td>
<td>17.24</td>
</tr>
<tr>
<td>Implementation worries</td>
<td>30</td>
<td>18.63</td>
<td>12</td>
<td>13.79</td>
</tr>
<tr>
<td>Excluded or Missing</td>
<td>9</td>
<td>0.59</td>
<td>10</td>
<td>11.49</td>
</tr>
<tr>
<td>Peers/administration backlash</td>
<td>6</td>
<td>0.37</td>
<td>0</td>
<td>0.00</td>
</tr>
</tbody>
</table>

*Note.* Participants could list multiple concerns.

A PST survey participant shared her perception of being concerned about how parents would react to bibliotherapy: "My only concern would be the thoughts and opinions of my students' parents." A PST survey participant’s response modeled the category of worrying how peers and/or administrators would react to bibliotherapy usage: "School board/principal pressure and possible career consequences." A non-PST survey participant demonstrated concern for perceived negative outcomes for students in her response to this item: "Only the children who really need the specific book should be exposed to it because other kids might be traumatized by reading it." A PST survey participant voiced his concern about implementing the method correctly: "I may not choose the right kind of book for a certain situation." A non-PST survey participant provides an example of a response that indicated a concern that bibliotherapy should not
be implemented in the classroom: “Some topics should not be discussed in the classroom. Also, certain topics are meant for parents to teach their child about first...like death or how the body changes.” Some participants perceived having no concerns in regards to bibliotherapy implementation. For example, one non-PST wrote: “No, I am comfortable addressing serious topics” while a PST survey participant shared: “No, I hope to use it in my future classroom.”

The results indicate about a third of PSTs in the sample fear upsetting or offending parents, while only a fifth of non-PSTs expressed this concern. Only a handful of PSTs indicated being concerned about how other educators and/or administrators would perceive their bibliotherapy usage and the backlash that could occur if the method was not accepted. Similar proportions of PSTs and non-PSTs indicated negative outcomes for students as a concern of bibliotherapy usage. A greater proportion of PSTs perceived having a concern about issues surrounding the bibliotherapy implementation process as compared to non-PSTs. Approximately a fifth of PSTs and about an eighth of non-PSTs reported perceiving bibliotherapy as inappropriate for school or better suited for counselors and therapists to implement with children. A much larger percentage of non-PSTs expressed holding no concerns in regards to implementing bibliotherapy in school settings than PSTs.

Chapter Summary

In summary to the research questions addressed, this study indicated there was very little statistically significance distinguishing PSTs from non-PSTs in undergraduate perceptions of bibliotherapy. Participants in both groups (PSTs and non-PSTs) had a similar level of understanding of bibliotherapy. This was indicated by the majority of
each groups (PSTs = 64%, non-PSTs = 60%) being able to define bibliotherapy but lacking a deeper understanding of the methods and implementation process of the strategy. Respondents from both groups generally perceived a wide range of intents as acceptable purposes for classroom teachers to implement bibliotherapy in K-12 settings as indicated by their favorable rankings of 17 items. In regards to perceived comfort of personal implementation of bibliotherapy in K-12 classrooms, there was a statistically significant ($p < .01$) difference between PSTs and non-PSTs in three of 16 items—“a social skill,” “self-esteem,” and “a student with a learning disability.” The results of content analysis demonstrated that both PSTs and non-PSTs perceived comfort of bibliotherapy were more heavily influenced by teacher-centered factors as opposed to student-centered influences. Finally, the results of this study also revealed five main perceived concerns amongst the undergraduate respondents, in addition to highlighting the majority of participants held no concerns of the bibliotherapy’s usage as a tool for teachers in K-12 settings. An interesting finding that is important to note is the highest perceived concern held by PSTs (31%) and non-PSTs (21%) in regards to personal usage of bibliotherapy is the fear of upsetting or offending parents of students in K-12 classrooms. Overall, the results of this study indicated a general acceptance of bibliotherapy as a tool for teachers in K-12 settings and presented influences and concerns perceived by undergraduates that are further discussed and examined in the following chapter.
CHAPTER 5
DISCUSSION

In this chapter, I discuss the significance of the results presented in the previous chapter and note the limitations of the study. I also consider implications for practice and suggest future directions for continued research in the area of bibliotherapy.

Discussion of Results

Undergraduates’ Experiences and Current Understandings of Bibliotherapy

The findings in regards to participant knowledge of bibliotherapy indicated no significant differences between undergraduate students who were preservice teachers (PSTs) and those who were non-preservice teachers (non-PSTs). For instance, one PST defined bibliotherapy as “a way to use literature to discuss a sensitive topic/subject—brings light to hard or difficult situations.” Similarly, a non-PST participant shared their understanding of bibliotherapy in a similar fashion: “It is a way to help individuals through stressful, difficult, or sensitive times/topics.” One reason for both groups (PSTs and non-PSTs) expressing similar levels of bibliotherapy understanding could be the class status of the sample. The two courses in which the survey was given are at the 200-level, which represents courses designed for freshmen and sophomore students. PSTs in their first and second year of college have had little exposure to or have completed very few education/teacher-preparation courses, which may indicate the participants in the PST group have not yet adopted an educator mindset. As a result, the PSTs in this sample were not yet distinctly different from their undergraduate peers with differing majors.

A few participants shared a personal experience in their responses which revealed a book as being helpful to them in a difficult situation their childhood or later years. For
example, one PST respondent shared: “Bibliotherapy is a way to address an issue or struggle by using books. I did a bibliotherapy project on dealing with the death of a pet. I can personally relate to this and I was actually given a book during that time that helped me cope and make the process easier.” This finding suggests these students may be more inclined to implement bibliotherapy in their future classrooms with children and adolescents because they have personally experienced the positive benefits of literature as a tool to address a personal need or hardship.

**Acceptable Purposes for Classroom Teachers’ Use of Bibliotherapy**

The findings demonstrating the acceptability of 17 various purposes of bibliotherapy as a tool for classroom teachers suggested no statistically significant perceived differences between the study’s PSTs and non-PSTs. In both groups, the mean score of all 17 purposes were rated at approximately three or higher, indicating “acceptable” or “very acceptable.” These results illustrate a general acceptance of bibliotherapy implementation with children and adolescents in classroom settings to address a wide range of purposes. This finding is consistent with the literature, as others have presented using literature to approach a range of purposes as an acceptable practice for classroom teachers (Hynes & Hynes-Berry, 2012; Pardeck, 1994; Philpot, 1997). The perceived acceptability of three classroom purposes (“to assist the class in understanding a peer with dyslexia,” “to discuss a peer’s illness,” and “to help a student cope with a death of a loved one”) was slightly lower than the other 14 purposes for both groups of the study. This finding suggests that some purposes of bibliotherapy may be perceived as more acceptable in a classroom setting while other topics may be deemed better suited for clinical settings. The three items participants rated with a lower acceptability for
bibliotherapy in a classroom are consistent with cautions from professionals in the field who remind teachers that bibliotherapy with students should remain developmental in nature and not target clinical purposes. Some scholars believe death, chronic illness, and other medical conditions are more suited for clinical bibliotherapy (Forgan, 2002). In general, the other 14 items (i.e., developing empathy for others, practicing problem solving skills, promoting healthy self-esteem, etc.) are more easily perceived as developmental because children and adolescents are confronted with those topics on a daily basis (Forgan, 2002; Hynes & Hynes-Berry, 2012).

**Comfort with Implementing Bibliotherapy**

Statistical analysis of perceived comfort of in personal bibliotherapy implementation for a range of purposes indicated a significant difference between PSTs and non-PSTs for multiple items in the measure. The three purposes for which PSTs reported greater comfort in using literature to address the topic were: “a social skill,” “self-esteem,” and “a student with a learning disability.” This finding was expected and logical because future educators would be more comfortable with helping children and adolescents cope with social, emotional, and learning challenges than participants who may not be planning to work or interact with children and adolescents on a social, emotional, and academic level. The higher comfort levels could also be a result of PSTs having prior exposure to the terms learning disability, social skill, and self-esteem. Those unfamiliar with the terminology common for educators could be more likely to perceive those purposes as uncomfortable. Additionally, non-PSTs were found to be uncomfortable (i.e., mean scores less than three) with the following seven items: “dyslexia,” “a student with a learning disability,” “a peer’s chronic illness/cancer,”
“coping with a death of a loved one,” “dealing with abuse,” “a student with disruptive behaviors,” and “racism.” This finding is consistent with the literature as these topics are more sensitive and could provoke feelings of discomfort. Both groups (PSTs and non-PSTs) reported lower perceived comfort in personally implementing bibliotherapy for the purposes of assisting children and adolescents in addressing “a peer’s chronic illness/cancer” and “dealing with abuse.” Again, these findings demonstrate the gray area that surrounds the two types of bibliotherapy. The items illustrating perceived discomfort from participants’ rating of purposes could be perceived as more clinical and not comfortable for teachers implementing developmental bibliotherapy to address purposes that are developmental and common for the majority of children and adolescents (Forgan, 2002).

Factors Influencing Comfort in Implementing Bibliotherapy

In a systematic analysis of the narrative data retrieved from participants’ responses, I coded the factors reported as influencing the perceived comfort level undergraduate students held towards their personal implementation of bibliotherapy in school settings into two over-arching themes. These two influences were teacher-centered and student-centered. A third theme was developed to encompass participants who demonstrated both teacher and student-centered influences in their responses to the survey item. Teacher-centered influences described factors influencing the participants’ perceived comfort towards bibliotherapy implementation through a lens that focuses on the participant’s self, knowledge, and experiences. Examples in the teacher-centered category included how the respondent felt about sensitive topics, his/her knowledge of books, and his/her ideas about teaching. This is in line with the literature, as Hyun (2006)
noted teacher-centered manifestations represent a “first-person perspective” relying on first-hand knowledge and experiences of child development, subject matter, and what they consider effective teaching (p. 136). Student-centered influences described factors influencing the participants’ perceived comfort towards bibliotherapy usage in the classroom through a lens focused on the needs of children and adolescents. Examples in this category would include responses considering the age, maturity, and feelings of the student or students who would be receiving the bibliotherapy lesson. Hyun (2006) referred to this as learner-centered and notes it is imperative for educators to be able to adopt this perspective and teach with materials that are developmentally supportive for students—especially students deemed disadvantaged or at-risk.

A little more than 70% of PSTs and 54% of non-PSTs reported teacher-centered influences that impacted their perception of how comfortable they are with bibliotherapy implementation. For instance, a few participant responses illustrated this theme: “my personal knowledge about certain topics, stereotypes, and others opinions about the topics”; “my own background, values, and beliefs, and also, the knowledge that I have acquired throughout my life and schooling”; and “how I would feel standing in front of a bunch of kids talking about serious issues.” This finding is consistent with the literature as we expect developing and new teachers to adopt teacher thinking in preparation for their role in future classrooms, which may increase their likelihood to focus on themselves as teachers (Hyun, 2006; Kagan, 1992; Pajares, 1992). However, responses that indicated a priority of personal comfort (teacher-centered) over student needs is concerning and may demonstrate a low professional maturity in new and beginning teachers (Hyun, 2006).
Only 18% of PSTs and 24% of non-PSTs voiced student-centered influences as factors impacting their perceived comfort-level. While it might be initially surprising that a greater proportion of non-PSTs were more influenced by the needs of children and adolescents in their perceptions, this finding mirrors the literature because non-PSTs are not expected to adopt teacher thinking and therefore may not have a social pressure to think more about their power in guiding the development of youth (Hyun, 2006; Kagan, 1992; Pajares, 1992). Additionally, a larger proportion of non-PSTs reported both teacher and student-centered influences than their PST undergraduate peers. This finding is consistent with the earlier discussion of PSTs having more societal pressure to “think like a teacher.”

**Concerns about Implementing Bibliotherapy**

The study’s findings of perceived concerns regarding classroom bibliotherapy implementation held by undergraduate students was noteworthy as this aspect had never been measured before in a way which compared PSTs and non-PSTs. Thirty percent of PSTs and 21% of non-PSTs reported a fear of upsetting, offending, overstepping, or violating the rights of parents as a concern about using bibliotherapy in the classroom. Additionally, 6% of PSTs were also concerned about upsetting or receiving negative backlash from colleagues and/or administrators. This finding was unexpected but is consistent with the literature, as others have noted new and beginning teachers expressing concern in how others perceive their teaching ability (Shook, 2012). Furthermore, this finding may highlight the problematic nature of the therapy portion in the term bibliotherapy—this may cause facilitators to doubt their ability to implement developmental bibliotherapy in school settings for fear that others may perceive it as a
solely clinical approach (Coffman et al., 2013; Forgan, 2002; Hebert & Kent, 2000; Hynes & Hynes-Berry, 2012; Lu, 2008). In line with the literature, these findings support the importance for teachers to communicate with parents, school staff, and administrators about their pedagogy and to help increase awareness about the developmental type of bibliotherapy. This finding also indicate a need for those in the field to more clearly distinguish the differences in clinical and developmental bibliotherapy and establish guidelines for populations and purposes relative to each type. Likewise, the finding demonstrating 20% of PSTs and 12% of non-PST participants expressing concern that bibliotherapy is not for school settings further reinforces the uncertainty surrounding the varying definitions and intents of bibliotherapy that arise its use across a range of fields (Glasgow & Rosen, 1978; Hynes & Hynes-Berry, 2012; Johnson et al., 2001; Prater et al., 2006; Lindeman & Kling, 1968; Lu, 2008; Ogrenir, 2013; Rubin, 1978; Russell, 2012; Shepherd & Iles, 1976; Sullivan & Strang, 2002).

A greater proportion of PSTs than non-PSTs indicated a perceived concern for how bibliotherapy might negatively influence students. A few examples of their voiced concerns included: “upsetting child more,” “making kids feel targeted,” “children won’t be accepting,” “offending a student rather than making them feel a connection,” and “students may react in a negative way.” This finding is consistent with the literature noting bibliotherapy’s reputation as a clinical approach and highlights the lack of empirical studies of the impact on children and adolescents in classroom settings. This absence of evidence for developmental bibliotherapy could raise concerns for those in the education field to a greater degree than for those from other professional areas. Some researchers have noted the positive benefits of clinical bibliotherapy can cast away some
of these doubts because the method is so widely accepted in the medical and psychological fields (Russell, 2012; Pardeck & Pardeck, 1984; Pardeck, 1994); however, educators’ concerns are valid and should be noted.

It was not surprising that approximately 19% of PSTs and 14% of non-PSTs indicated perceived concerns about bibliotherapy implementation woes. Implementation woes were narratives including worrying about selecting the right book, properly discussing sensitive topics with students, and being unprepared to discuss non-academic topics. For example, some respondents expressed: “I would be nervous that the children would ask tough questions (depending on the situation) that I may not feel comfortable addressing.” “If I would not have enough information on the subject and teach it wrong.” “I don’t want to upset child or the child’s parents by reading the wrong book.” This finding is consistent with the literature as several authors have provided guide books, tips for teachers, book lists, and other resources developed as a means to address this concern and support teachers in implementing bibliotherapy with children and adolescents (Cartledge & Kiarie, 2001; Cook et al., 2006; Heath et al., 2008; Pardeck & Pardeck, 1984; Pardeck, 1994; Philpot, 1997; Prater et al., 2006; Sridhar & Vaughn, 2000; Womack et al., 2010).

In addition to the perceived concerns of undergraduate students presented and discussed above, 30% of PSTs and 40% of non-PSTs expressed having no perceived concerns about implementing bibliotherapy in the classroom with children and adolescents. It is important to view these numbers in context. For example, non-PSTs have no intention of being a teacher and therefore have no concerns because the instructional strategy does not apply to them or their future work; however PSTs
expressing no concern are more comfortable with the method and see value in implementing bibliotherapy with students in their future classrooms.

**Limitations**

One limitation of the study was the lack of diversity in the sample. All participants resided in the same geographic location and attended the same mid-western university. As a result, the sample consisted of nearly all White female freshmen and sophomore undergraduate students. Thus, the respondents in this study are not a representative sample of undergraduate students from the larger population and the findings may not be generalizable to other geographic locations. Furthermore, at this early stage in their college careers, the respondents may not yet have received sufficient instruction and experience in their majors to have adopted advanced thinking in their respective areas of study. This limitation may have been evident in the lack of statistically significant differences in perceived acceptability and in comfort with classroom teacher implementation that were obtained between undergraduates identifying as PST or non-PST.

Another limitation of the study lies in the design of the survey instrument. The wording of a few of the items were ambiguous and potentially caused confusion. For example, the open-ended question in the Background Information section of the survey measure did not explicitly ask participants to share their personal experiences with bibliotherapy but more broadly requested them to share their perceived meaning/definition of bibliotherapy based on their knowledge and experiences. Participants might have had more personal experiences with bibliotherapy than were shared. Additionally, the layout of the Demographics Section was not user-friendly. The
second column was missed (or overlooked) by a number of participants because it was not in a standard layout. As a result, there was some missing data in regards to participants’ gender and ethnicity. The first item in the Demographics Section also proved to be problematic as it was a loaded question (Fink, 2013) containing both college departments and majors. This may have made it challenging for respondents with double majors or a college affiliation outside of the human sciences to identify their field. Finally, the item seeking to better describe the ethnic background of the sample was unclear as both ethnicities and racial categories were included. This created some confusion due to the non-exclusiveness of the options.

**Implications for Future Research**

As indicated in the review of literature in Chapter Two, there is a gap between research on developmental bibliotherapy and its implementation in K-12 classroom settings with children and adolescents. The empirical research validating bibliotherapy is drawn almost entirely from the clinical, medical, and psychological fields. The education field cannot simply *borrow* evidence from other fields without considering the impact that doing so would have on students and teachers. This study sought to open the door to future research on developmental bibliotherapy and its role in the field of education.

Suggestions for future research include research studies in K-12 classrooms to assess efficacy, teacher action research, replication studies focused on measuring perceptions of bibliotherapy in teacher training programs, and follow-up of participants to evaluate bibliotherapy implementation of practicing teachers.

As much of the literature found on developmental bibliotherapy is descriptive in nature, there is a profound need for empirical research to evaluate the effectiveness of the
strategy in a range of educational settings with K-12 children and adolescents. Given the emphasis on implementation of evidence-based practices in education, the development of a research base for the practice of bibliotherapy is critical. Once a body of evidence exists and more teachers have been trained in bibliotherapy, follow-up studies of these trained teachers could be conducted to provide a more comprehensive evaluation of the impact and effectiveness of using bibliotherapy with K-12 students to develop the emotional and social skills necessary for effective coping of life challenges.

Action research studies are a growing methodology in the field of education because they allow practicing educators an opportunity to participate in research while still meeting the needs of students and performing their duties as classroom teachers (Creswell, 2008). I recommend action research studies in K-12 school settings because they represent a pragmatic and active way of evaluating the efficacy of developmental bibliotherapy and specifically measuring its effect on students and classroom behaviors will help fill the empty gap of bibliotherapy studies in the field of education. Teachers might design studies that document the bibliotherapy materials selected, a baseline measure of the targeted skill/behavior/topic, and post-intervention measures of the targeted skill/behavior/topic. Additionally, teachers could collect data on a variety of topics and note which topics were more effectively addressed through bibliotherapy and whether students responded better to the intervention in whole class, small group, or one-on-one settings.

Fisher (2005) noted the difficulty that teachers might face attempting to measure the effectiveness of an intervention focused on helping students achieve mutuality, self-understanding, and affirmations of acceptance. Fisher (2005) also expressed concern in
teachers’ ability to measure how much safer, accepting, and emotionally open a classroom environment became after bibliotherapy. I recommend teachers select behaviors and skills that would be feasible to define, quantify, and measure as they employ action and other forms of educational research to build an empirical base of developmental bibliotherapy studies in K-12 settings to assist in the effort in evaluating the intervention’s effectiveness with diverse populations of children and adolescents for a range of purposes.

Upon making corrections to the aforementioned limitations of the survey design, replication of this survey measure in more diverse populations is needed to gather insight into the perceptions of groups not represented in this sample (i.e., male and ethnic minority undergraduates). Additionally, replication studies could further measure and explore the influences and concerns impacting perceptions and likelihood to implement developmental bibliotherapy with students amongst PSTs in other geographic locations beyond the mid-western United States. Replication studies should also consider measuring perceptions of PSTs at different stages in their teacher training programs.

I suggest educational researchers design empirical studies evaluating teacher training of bibliotherapy and its impact on teacher perceptions and implementation practices of bibliotherapy in school settings with children and adolescents. Possibilities exist for exploring the impact of training educators in developmental bibliotherapy through more systematic research. For example, PSTs at the University of North Carolina at Greensboro (UNCG) and the University of South Carolina (USC) are instructed in how to use and select literature for bibliotherapy in their future classrooms (Gavigan & Kurtts, 2011). Researching the effectiveness and influence of UNCG and USC’s
bibliotherapy instructional programming could help to further understanding and develop curriculum to assist PSTs to more confidently utilize bibliotherapy in K-12 school settings. Achieving this would contribute to the field by exploring whether earlier exposure to pedagogy and interventions (such as developmental bibliotherapy) impacts the perceptions, behaviors, or quality of new and beginning teachers.

**Implications for Practice**

Beyond its implications for future research, this study, which measured the perceptions of undergraduates towards bibliotherapy implementation in school settings, has direct and meaningful implications for practice in the field of education. Two such direct and meaningful implications are in determining developmental bibliotherapy’s place in teacher training programs and in K-12 classroom settings.

**Teacher Training Programs**

A surprising result of this study was the fear that PSTs reported in regards to judgment, backlash, and negative responses from parents, colleagues, and administrators as being a major concern impacting their pedagogical decisions in the classroom. This was notable given that the overwhelming majority of the participants felt that most reasons and topics were appropriate for bibliotherapy use with children and adolescents. These PSTs accepted bibliotherapy, generally felt comfortable in using bibliotherapy but would hesitate to actually implement bibliotherapy in their future classrooms out of fear of how parents, colleagues, and administrators would respond. This finding reveals the vital role that teacher training programs hold in assisting PSTs to develop confidence in themselves as a teacher and equipping them with the pedagogical knowledge and practice needed to feel comfortable in their role as decision maker about instructional strategies in
their future K-12 classrooms. Professional development of instructional strategies, such as developmental bibliotherapy, is one way in which teacher training programs can help new and beginning teachers address the growing and non-academic needs of children and adolescents. Hyun (2006) noted that the early preparation of teachers is “crucial” because teachers shape societal values through “schooling” students and it is the “fundamental responsibility of teacher education programs to equip new teachers with the knowledge necessary to teach students in a way that is “developmentally meaningful” and culturally diverse (p. 3). Furnishing educators with knowledge and skills related to developmental bibliotherapy at the PST level will likely promote confident, mature, and higher quality teachers and teaching. When we prepare teachers to help children and adolescents cope with life’s challenges, we are investing in the emotional and social well-being of both our students and teachers.

**Bibliotherapy in the Field of Education**

As researchers and practitioners work to address the gap in research focused on bibliotherapy with children and adolescents in K-12 school settings, it is imperative that we clearly distinguish the differences between clinical and developmental bibliotherapy. *Clinical* bibliotherapy seeks to treat a condition while *developmental* bibliotherapy seeks to guide individuals in coping with life’s challenges in a manner that aids personal development. This distinction should not be constrained to scholarly journals and research materials—the greater educational community and teachers in the field need this knowledge to help clear up problematic misconceptions held about bibliotherapy. Teachers can communicate this distinction with parents, colleagues, and administrators to proactively tackle their perceived fears and receive support for their instructional decision.
to implement developmental bibliotherapy in their K-12 classrooms with children and adolescents. School counselors can be utilized as a resource to assist teachers in ensuring their bibliotherapy lessons are developmental in nature and not clinical. Furthermore, I encourage K-12 schools interested in adopting bibliotherapy as an instructional tool for teachers and staff to establish a building and/or district-wide decision on topics deemed developmental in nature and appropriate to address through bibliotherapy. For example, school administrators, counselors, librarians, parents, and teachers could collaborate to form a committee to categorize topics using a traffic light system—topics deemed developmental and safe for bibliotherapy would be “green”; topics deemed developmental but sensitive in some situations would be “yellow” to indicate that teachers should be especially cautious and sensitive in selecting materials and delivering bibliotherapy; topics deemed clinical would be “red” as they are likely to more adequately addressed by counselors, therapists, or in other clinical settings. Other systems could be utilized but as researchers have suggested, teachers and schools should be systematic and purposeful in their planning and implementation of bibliotherapy as a tool to aid in supporting students through developing skills and strategies to cope with life’s non-academic challenges in K-12 settings.

**Conclusion**

Young Adult author, Jay Asher (2015), speaks with schools, teachers, and other professionals about using literature to address sensitive issues such as bullying, suicide, and other issues influencing the emotional and social development of youth. I attended one of his presentations. Asher (2015) noted the vital role teachers play in the lives of students and suggested a variety of ways for teachers to use books to help students find
themselves in literature and discuss real-life issues that others are afraid to talk about.

Asher (2015) expressed his support for bibliotherapy and shared that it is “awesome and powerful for readers” because it helps them know they are not alone and lets them reach conclusions on their own without direct “preaching” from adults.

I share this experience and interaction with Asher (2015) in my study’s conclusion because it captures the power that both books and teachers possess in the lives of children and adolescents. With increasing numbers of challenges facing K-12 students, teachers are often the only caring adult consistently present in the lives of our youth. Incorporating bibliotherapy into teacher training programs is one way in which we can equip educators with one more instructional tool to assist teachers in helping children face challenges in a developmentally appropriate manner. This study is the first of its kind—more studies are needed to build an empirical research base for developmental bibliotherapy in the field of education and to assess bibliotherapy’s efficacy in K-12 classrooms with children and adolescents.
References


Rubin, R. J. (1981). The bibliographic structure of bibliotherapy and the role of the journal in the field’s development. *The Serials Librarian: From the Printed Page to the Digital Age, 5*(1), 93-102. doi: 10.1300/J123v05n01_12


APPENDIX A

INFORMED CONSENT LETTER

CONSENT FORM FOR: PERCEPTIONS OF BIBLIOThERAPY STUDY

This form describes a research project. It has information to help you decide whether or not you wish to participate. Research studies include only people who choose to take part—your participation is completely voluntary. Please discuss any questions you have about the study or about this form with the principal investigator before deciding to participate.

Who is conducting this study?
This study is being conducted by Randie Camp, graduate student in the School of Education at Iowa State University and the principal investigator of this research study.

Why am I invited to participate in this study?
You are being asked to take part in this study because you are an adult Iowa State University student enrolled in a course, which discusses education and/or children’s (including young-adult) literature. You should not participate if you are under the age of 18.

What is the purpose of this study?
The purpose of this study is to gain insight into the perceptions of bibliotherapy as a teaching strategy in classrooms.

What will I be asked to do?
If you agree to participate, you will be asked to complete a survey about your perceptions towards bibliotherapy, children’s (including young-adult) literature, and classroom strategies.

Your participation will last for about 15 minutes. The survey will include multiple choice, open-ended, and rating scale items.

What are the possible risks or discomforts and benefits of my participation?
Risks or Discomforts—There are no foreseeable risks or discomforts related to your participation in this research.

Benefits—You may not receive any direct benefit from taking part in this. The hope is that this research will benefit society by contributing to the literature on bibliotherapy and advancing the field of education by informing professionals on current perceptions of bibliotherapy as a teaching strategy.

How will the information I provide be used?
The information you provide will be analyzed and presented in the principal investigator’s thesis. Your responses may ultimately be presented in formats other than the thesis, such as journal articles, and professional development (i.e., conference) presentations.
What measures will be taken to ensure the confidentiality of the data or to protect my privacy?

Records identifying participants will be kept confidential to the extent allowed by applicable laws and regulations. Records will not be made publicly available. However, federal government regulatory agencies auditing departments of Iowa State University, and the ISU Institutional Review Board (a committee that reviews and approves research studies with human subjects) may inspect and/or copy study records for quality assurance and analysis. These records may contain private information.

To ensure confidentiality to the extent permitted by law, the following measures will be taken: identifying information will not be collected. Consent signatures will be removed from survey responses and stored in a locked file cabinet. Data will be stored on a password protected computer. Confidentially will be maintained in all formats of the research study’s results.

Will I incur any costs from participating or will I be compensated?

You will not have any costs from participating in this study. You will not be compensated for participating in this study.

What are my rights as a human research participant?

Participating in this study is completely voluntary. You may choose not to take part in the study or to stop participating at any time, for any reason, without penalty or negative consequences. You can skip any questions that you do not wish to answer. Your choice of whether or not to participate will have no impact on you as a student in any way.

If you have any questions about the rights of research subjects or research-related injury, please contact the IRB Administrator, (515) 294-4566, IRB@iastate.edu, or Director, (515) 294-3115, Office for Responsible Research, 1138 Pearson Hall, Iowa State University, Ames, Iowa 50011.

Whom can I call if I have questions about the study?

You are encouraged to ask questions at any time during this study. For further information, please contact the principal investigator, Randie Camp, at rdcamp@iastate.edu or Dr. Linda Lind in the School of Education, at lslind@iastate.edu.

Consent and Authorization Provisions

Your signature indicates that you voluntarily agree to participate in this study, that the study has been explained to you, that you have been given the time to read the document and that your questions have been satisfactorily answered. You will receive a copy of the written informed consent prior to your participation in the study.

Participant’s Name (printed) __________________________________________________________

Participant’s Signature __________________________ Date ________________________________

If you do not wish to participate, please check here □ and return the form to the principal investigator.
APPENDIX B

SURVEY

Demographics Section
1. What is your current college affiliation or major?
   - Agriculture
   - Business
   - Design
   - Engineering
   - Human Sciences
     - Child, Adult, & Family Studies
     - Early Childhood Education
     - Elementary Education
     - Special Education
   - Liberal Arts
   - Veterinary Medicine
   - Other _____________________

2. Check box for
   - Male
   - Female
   - Other _____________________

3. What is your ethnicity? (check all boxes that apply)
   - American Indian / Native American
   - Asian
   - Bi or multi-racial
   - Black / African American
   - Hispanic
   - Latino
   - Pacific Islander
   - White / Caucasian
   - Other _____________________

Background Information
What is your experience with the following courses? Please check the boxes that apply to you.

<table>
<thead>
<tr>
<th>Course</th>
<th>Currently enrolled in ISU course</th>
<th>Completed at ISU (please provide semester/year completed)</th>
<th>Completed at another college/university</th>
<th>Plan to take the course in the future</th>
</tr>
</thead>
<tbody>
<tr>
<td>HDFS 240</td>
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<tr>
<td>SPED 250</td>
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</table>

Have you received prior instruction on bibliotherapy? □ Yes □ No

What does bibliotherapy mean to you? How would you define bibliotherapy based on your knowledge and experiences?
**Part One**
Using the scale provided (1=Very unacceptable, 2=Unacceptable, 3=Acceptable, 4=Very acceptable), please determine if each of the following items are an acceptable purpose for a classroom teacher to use children’s books (including young-adult literature) in the classroom.

<table>
<thead>
<tr>
<th>Purpose</th>
<th>1=Very unacceptable</th>
<th>2=Unacceptable</th>
<th>3=Acceptable</th>
<th>4=Very acceptable</th>
</tr>
</thead>
<tbody>
<tr>
<td>To address bullying</td>
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<tr>
<td>To assist the class in understanding a peer with dyslexia</td>
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<tr>
<td>To build vocabulary</td>
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<td>To connect a student with a book character experiencing a similar feeling or situation</td>
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<tr>
<td>To develop empathy for others</td>
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<tr>
<td>To discuss a peer’s illness</td>
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<tr>
<td>To entertain students</td>
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<tr>
<td>To help a student cope with a death of a loved one</td>
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<tr>
<td>To increase reading fluency</td>
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<tr>
<td>To introduce a science concept</td>
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<tr>
<td>To model writing concepts</td>
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<tr>
<td>To offer students hope and inspiration</td>
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<tr>
<td>To practice problem solving skills</td>
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<tr>
<td>To promote healthy self-esteem</td>
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<tr>
<td>To provide students with information on an unknown or unfamiliar topic</td>
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<td>To show students quality illustrations</td>
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<tr>
<td>To teach a social skill</td>
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</tbody>
</table>

Please read the following definitions and keep them in mind as you complete the rest of the survey.

**Bibliotherapy** is “the use of reading materials for help in solving personal problems,” according to Merriam-Webster’s online dictionary. **For the purpose of this thesis research project, bibliotherapy is the utilization of children’s books and young-adult literature as an instructional strategy implemented by a classroom teacher to help children and adolescents better understand unknown concepts, cope with difficult situations, and address sensitive topics.**

**Children’s books** or children’s literature are books (and other written works/illustrations) intentionally written for children. Fadiman, editor for Encyclopedia Britannica, notes the “wide range” of children’s books, including (but not limited to): “classics of world literature, picture books and easy-to-read stories written exclusively for children, and fairy tales, lullabies, fables, folk songs, and other primarily orally transmitted materials.” Graphic novels, chapter books, and young-adult novels are also examples of children’s books. **For the purpose of this thesis research project, children’s books generally refers to all literature intended for children birth through age 18.**
**Part Two**

Using the scale provided (1=Very uncomfortable, 2=Uncomfortable, 3=Comfortable, 4=Very comfortable), please rate your level of comfort regarding a **classroom teacher** using children’s books (including young-adult literature) as an instructional tool with students to address the following items.

<table>
<thead>
<tr>
<th>Item</th>
<th>1=Very uncomfortable</th>
<th>2=Uncomfortable</th>
<th>3=Comfortable</th>
<th>4=Very comfortable</th>
</tr>
</thead>
<tbody>
<tr>
<td>A student who has a reading problem</td>
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<tr>
<td>Dyslexia</td>
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<tr>
<td>A student with a learning disability</td>
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<tr>
<td>Shyness</td>
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<tr>
<td>A peer’s chronic illness/cancer</td>
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<tr>
<td>Self-esteem</td>
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<tr>
<td>Coping with a death of a loved one</td>
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<tr>
<td>Dealing with abuse</td>
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<tr>
<td>Death of a pet</td>
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<tr>
<td>A student moving to a new school</td>
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<tr>
<td>Peer pressure</td>
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<tr>
<td>Feelings</td>
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<tr>
<td>A student with disruptive behaviors</td>
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<tr>
<td>Information on unfamiliar topic</td>
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<tr>
<td>Racism</td>
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<tr>
<td>A social skill</td>
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</tbody>
</table>

Using the scale provided (1=Very uncomfortable, 2=Uncomfortable, 3=Comfortable, 4=Very comfortable), please rate your level of comfort regarding **your use** as a classroom teacher using children’s books (including young-adult literature) as an instructional tool with students to address the following items.

<table>
<thead>
<tr>
<th>Item</th>
<th>1=Very uncomfortable</th>
<th>2=Uncomfortable</th>
<th>3=Comfortable</th>
<th>4=Very comfortable</th>
</tr>
</thead>
<tbody>
<tr>
<td>A student who has a reading problem</td>
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<tr>
<td>Dyslexia</td>
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<tr>
<td>A student with a learning disability</td>
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<tr>
<td>Shyness</td>
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<tr>
<td>A peer’s chronic illness/cancer</td>
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<tr>
<td>Self-esteem</td>
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<tr>
<td>Coping with a death of a loved one</td>
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<tr>
<td>Dealing with abuse</td>
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<tr>
<td>Death of a pet</td>
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<tr>
<td>A student moving to a new school</td>
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<tr>
<td>Peer pressure</td>
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<tr>
<td>Feelings</td>
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<tr>
<td>A student with disruptive behaviors</td>
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<tr>
<td>Information on unfamiliar topic</td>
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<tr>
<td>Racism</td>
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<tr>
<td>A social skill</td>
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<td></td>
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</tr>
</tbody>
</table>
Part Three
As you finished the items above, what factors influenced your thinking?

Do you perceive any benefits to using bibliotherapy as an instructional tool in the classroom with children and adolescents?

Do you have any concerns about your personal use of bibliotherapy as an instructional tool in the classroom with children and adolescents?
APPENDIX C

INSTITUTIONAL REVIEW BOARD APPROVAL

IOWA STATE UNIVERSITY
OF SCIENCE AND TECHNOLOGY

Date: 11/17/2014
To: Randle Camo
0043 LeBaron

From: Office for Responsible Research
Title: Perceptions of Bibliotherapy
IRB ID: 4-623

Study/Review Date: 11/15/2014

The subject referenced above has been declared exempt from the requirements of the human subject protections regulations as described in 45 CFR 46.101(b) because it meets the following federal requirements or exemptions:

- (2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement) survey or interview procedures with adults or observation of public behavior where
- Information obtained is recorded in such a manner that human subjects cannot be identified directly or through identifiers linked to the subjects; or
- Any disclosure of the human subjects’ responses outside the research could not reasonably place the subject at risk of criminal or civil liability or be damaging to their financial standing, employability, or reputation.

The determination of exemption means that
- You do not need to submit an application for annual continuing review.
- You must carry out the research as described in the IRB application. Review by IRB staff is required prior to implementing modifications that may change the exempt status of the research. In general, reviews are required for any modifications to the research procedures (e.g., method of data collection, nature or scope of information to be collected, changes in confidentiality measures, etc.), modifications that result in the inclusion of participants from vulnerable populations, and any change that may increase the risk or discomfort to participants. Changes to key personnel must also be approved. The purpose of review is to determine if the project still meets the federal criteria for exemption.

Non-exempt research is subject to many regulatory requirements that must be addressed prior to implementation of the study. Conducting non-exempt research without IRB review and approval may constitute non-compliance with federal regulations and/or academic misconduct according to ISU policy.

Detailed information about requirements for submission of modifications can be found on the Exempt Study Modifications Form. The Personnel Change Form may be submitted when only modification involves changes in study staff. If it is determined that exemption is no longer warranted, then an Application for Approval of Research Involving Human Subjects will need to be submitted and approved before proceeding with data collection.

Please note that you must submit all research involving human participants for review. Only the RB or designee may make the determination of exemption, even if you conduct a study in the future that is exactly like this study.

Please be aware that approval from other entities may also be needed. For example, access to data from private records (e.g., medical, medical, or employment records, etc.) that are protected by FERPA, HIPAA, or other confidentiality policies requires permission from the holders of those records. Similarly, for research conducted in institutions other than ISU (e.g., schools, other colleges or universities, medical facilities, companies, etc.), investigators must obtain permission from the entities as required by their policies. An IRB determination of exemption in no way implies or guarantees that permission from these other entities will be granted.

Please don’t hesitate to contact us if you have questions or concerns at 515-294-4560 or IRB@iastate.edu.
Title of Project: Perceptions of Bibliotherapy

Principal Investigator (PI): Randie Camp
University ID: [redacted] Phone: [redacted] Email Address: rdcamp@iastate.edu
Correspondence Address: 0086 Lebanon, Iowa State University, Ames, IA 50011
Department: School of Education College/Center/Institute: College of Human Sciences/ISU

PI Level: [ ] Tenured, Tenure-eligible, & NTE Faculty [ ] Adjunct/Instructor Faculty [ ] Collaborator Faculty [ ] LIA Faculty
[ ] Visiting Faculty/Visiting Scholar [ ] Career/Lecture Chairperson [ ] Emeritus/Faculty Retiring, W/PA. B. or IVM [ ] HS Fellowship, PQ & above
[ ] Extension to Families/Youth/Specialist [ ] Field Specialist III [ ] Postdoctoral Associate [ ] Graduate/Undergrad Student [ ] Other (specify: )

FOR STUDENT PROJECTS (Required when the principal investigator is a student)
Name of Major Professor/Supervising Faculty: Dr. Linda Lind
University ID: [redacted] Phone: [redacted] Email Address: lind@iastate.edu
Campus Address: E015 Langmar
Department: School of Education
Type of Project: [ ] Thesis/Dissertation [ ] Class Project [ ] Other (specify: )

Alternate Contact Person: Dr. Anne Foegel
Correspondence Address: 1730 D Lagomarino Hall
Email Address: mfoegel@iastate.edu
Phone: [redacted]

ASSURANCE
- I certify that the information provided in this application is complete and accurate and consistent with any proposal(s) submitted to external funding agencies. Misrepresentation of the research described in this or any other IRB application may constitute non-compliance with federal regulations and/or academic misconduct.
- I agree to provide proper surveillance of this project to ensure that the rights and welfare of the human subjects are protected. I will report any problems to the IRB. See Reporting Adverse Events and Unanticipated Problems for details.
- I agree that modifications to the approved project will not take place without prior review and approval by the IRB.
- I agree that the research will not take place without the receipt of permission from any cooperating institutions when applicable.
- I agree to obtain approval from other appropriate committees as needed for this project, such as the IACUC (if the research includes animals), the IBC (if the research involves biohazards), the Radiation Safety Committee (if the research involves X-rays or other radiation producing devices or procedures), etc., and to obtain background checks for staff when necessary.
- I understand that IRB approval of this project does not grant access to any facilities, materials, or data on which this research may depend. Such access must be granted by the unit with the relevant custodial authority.
- I agree that all activities will be performed in accordance with all applicable federal, state, local, and Iowa State University policies.

Signature of Principal Investigator: [redacted] Date: [9/3/14]
Signature of Major Professor/Supervising Faculty: [redacted] Date (Required when the principal investigator is a student): [9/3/14]

Printed Name of Department Chair/Head/Director: [redacted]
Signature of Department Chair/Head/Director: [redacted] Date: [12/5/14]

For IRB Use Only
[ ] Not Research Per Federal Regulations [ ] No Human Participants
[ ] Minimum Risk [ ] Exempt Per 45 CFR 46.101(b): [ ]

Office for Responsible Research
Revised: 8/11/13

IRB Reviewer's Signature: [redacted] Date: [10/11/14]