

Application of Bibliotherapy Technique in Library and Information Service Provision for Clients with Certain Mental Disorders

¹Wada, Hafsat Mohammed, ²Maifata, Nurudeen Mu'azu, ³Adamu Yahaya

^{1, 2, 3}University Library, Nasarawa State University, Keffi

¹hafsydaz@yahoo.com, ²maifata@nsuk.edu.ng, ³yahayaadamu17519@gmail.com

Abstract

Libraries have the responsibility of engaging the public with the necessary information and providing free and open access to the library for all citizens irrespective of their health challenges. Bibliotherapy is the technique of healing through reading, and it refers to the therapeutic process in which the client uses books and educational materials to enhance their mental health. This paper discussed the importance of bibliotherapy application in library and information services and reveals the effectiveness of Bibliotherapy to library customers with mental disorders. Research indicates that Bibliotherapy effectively treats various pathological symptoms that prevail in major depressive disorders, anxiety disorders, grief, and trauma. This study shows the relevance of bibliotherapy skills in attending to customers with a mental disorder in the University Library environment and provides Librarians with an effective and efficient mechanism to implement the approach.

Keywords: Bibliotherapy, Books, Mental Disorder.

Introduction

Books have the competency to pull a person from the minute and spot to a different time and atmosphere. Whenever one feels alone, a book is convincingly a companion. The diagnosis of the positive effect of books on our mental health is not new. According to Öner(2007), the root of Bibliotherapy is dated back to Ancient Greeks who designed libraries so that the citizens could have a good time together. Subsequently, it was irregularly utilized by western communities just as eastern communities. Bibliotherapy is an old idea in Library Science. According to the Greek antiquarian Diodorus Siculus, in his great work *Bibliotheca Historica*, there was an expression over the passage to the imperial chamber where books were put away by King Ramses II of Egypt. Viewed as the most established known library saying on the planet, “the house of recuperating for the soul.”

Mental Disorder

Roughly 20% of the youths aged 13 to 18 experienced some severe mental disorder each year (Duckworth, 2013). Mental disorders can be a life-transforming and damaging disease that affects the students and their friends, family, and community. According to Aguilar-Gaxiola and Mental Health America(2013). "Mental illnesses are serious medical conditions, just like Cancer or Diabetes, that can have a sudden impact on a person's life, family, community and the society as a whole –and they can be tremendously weakening."

Stein et al. (2010) proposed the following definitions of mental and psychiatric disorders: A behavior or psychological syndrome or pattern that occurs in an individual, the consequences of which are clinically significant distress (e.g., a painful symptom) or disability (i.e., impairment in one or more important areas of functioning); must not be merely an expectable response to common stressors and losses (for example, the loss of a loved one) or a culturally sanctioned response to a particular event (for example, trance states in religious rituals); that reflects an underlying psychobiological dysfunction; that is not solely a result of social deviance or conflicts with society; that has diagnostic validity using one or more sets of diagnostic validators (e.g., prognostic significance, psychobiological disruption, response to treatment); that has clinical utility (for example, contributes to better conceptualization of diagnoses, or better assessment and treatment).

On the other hand, the World Health Organization (WHO) (2001a), mental health is: "... a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community." The WHO stresses that mental health "is not just the absence of mental disorder." (WHO, 2001). According to the American Psychiatric Association (2014), several symptoms must be observed over a long period in order for a student to be considered as living with a mental illness. One or two symptoms are not enough to raise serious concern.

Common Mental Health disorders

The most common types of mental illness are Anxiety disorders, Mood disorders, and Schizophrenia disorders.

Anxiety Disorder

Anxiety disorders are the most widely recognized sorts of psychological instability. The individual has a serious dread or uneasiness, which is connected to specific items or circumstances. The vast majority with an uneasy issue will attempt to maintain a strategic distance from introducing whatever triggers their disorder. Instances of uneasiness disorder include:

- **Panic disorder** - the individual encounters unexpected paralyzing terror or a feeling of imminent disaster.
- **Phobias** - these may additionally consist of simple phobias (an excessive worry of objects), social phobias (fear of being issue to the judgment of others),

and agoraphobia (fear of circumstances where escaping or breaking free might be troublesome). We truly do not know what number of fears there are - there could be a large number of types.

- **Obsessive-compulsive disorder (OCD)** - the individual has obsessions and compulsions. As it were, steady distressing contemplations (obsessions) and an incredible inclination to perform monotonous acts, for example, hand washing (compulsion).
- **Post-traumatic stress disorder (PTSD)** can happen after someone has experienced a horrendous mishap - something appalling or horrifying that they encountered or saw. During this event, the individual thinks that their life or others' lives are at serious risk. As a result, the affected people may feel afraid or feel that they do not influence what is happening.

Mood Disorders

These are also known as affective disorders or depressive disorders. Patients with these conditions have considerable changes in temperament, by and large, including either lunacy (rapture) or depression. Examples of mood disorders include:

- **Major Depression:** the individual is never again keen on and does not enjoy activities and events previously like. There are excessive or prolonged intervals of disappointment.
- **Bipolar disorder** - previously acknowledged as manic-depressive illness or hyper misery—the individual switches from episodes of euphoria (mania) to depression (despair).
- **Persistent depressive disorder** - recently known as dysthymia, this is mild chronic (long term) depression. The patient has related symptoms to major depression but to a lesser degree.
- **SAD (seasonal affective disorder)** is a type of major depression triggered by a lack of daylight. It is generally basic in nations a long way from the equator during late pre-winter, winter, and late winter.

Schizophrenia Disorders

Whether schizophrenia is a solitary issue or a gathering of related sicknesses still cannot seem to be completely decided. It is a profoundly complicated condition. Schizophrenia typically begins between the ages of 15 and 25. The individual has considerations that seem divided; they also find it challenging to process information. Schizophrenia has negative and positive side effects. Positive side effects incorporate daydreams, thought issues, and visualizations. Negative indications incorporate withdrawal, absence of inspiration, and a level or wrong mindset.

Early signs of Mental Health

According to the American Psychiatric Association (2014), several continuous symptoms or signs must be observed to tell whether someone develops a mental health

problem. However, if such signs show up in a short space of time, it might offer pieces of information:

- Withdrawing from people or activities, they would regularly appreciate;
- Sleeping or eating excessively or excessively little;
- Feeling as though nothing matters;
- Mood swings;
- Consistently low vitality;
- Using drugs more than ordinary (counting liquor and nicotine);
- Displaying unique feelings;
- Confusion;
- Not being able to complete standard tasks, such as getting to work or cooking a meal;
- Persistent thoughts or memories that reappear regularly;
- Deterioration in personal hygiene;
- Thinking of harming one's self or others;
- Hearing voices and
- Delusions.

Bibliotherapy

The Online Dictionary for Library and Information Science (2011) defined Bibliotherapy as the utilization of books chosen based on content in an arranged perusing programme intended to encourage the recuperation of patients experiencing psychological maladjustment or passionate unsettling influence. In a perfect world, the procedure happens in three stages: individual recognizable proof of the reader with a specific character in the prescribed work, bringing about mental cleansing, which prompts objective knowledge concerning the pertinence of the arrangement recommended in the content to the reader's understanding. Bibliotherapy can likewise be utilized with skilled and gifted youngsters as a method for helping them for self-improvement. It makes an environment where the psychological and enthusiastic needs of skilled and gifted kids can be viable. A model used in the bibliotherapy procedure in the libraries is Roald Dahl's *Matilda* (a book of a five-year-old girl whom her parent and kin are abusing). Leana-Taşçılar (2012) presents a pragmatic methodology dependent on that book to be utilized with skilled youngsters, and this methodology fills a critical gap in bibliotherapy studies. This study highlights the points to focus on before, during, and after reading the book, emphasizes the possible content to be included in the stages of Bibliotherapy, and gives examples on questions that could be discussed within

these. Such practices in libraries could yield beneficial results for understudies to locate their answers.

Types of Bibliotherapy

McCulliss (2012) indicated two different types of Bibliotherapy: Developmental Bibliotherapy and Clinical Bibliotherapy. Developmental Bibliotherapy has the goal of building awareness and provides support. A psychological counselor working at the elementary level can also benefit from that technique to develop interpersonal relations, create health awareness, help to accept classroom rules, and gain vocational understanding within the framework of developmental Bibliotherapy (Öner and Yeşilyaprak, 2006). One of the most basic motivations behind formative Bibliotherapy applied in instructive conditions is to decide the issues of understudies and dispose of potential emergencies, for example, harassment. The librarians, lecturers, and university instructors can likewise exploit Bibliotherapy to improve understudies at numerous measurements. As Leana-Taşçılar (2017) pointed out, Bibliotherapy can be used in libraries and classrooms for preventive psychological counseling, problem-solving, and empathy.

Clinical Bibliotherapy is authorized for people who have emotional or behavioral problems. This type is applied by mental health experts and is mainly about a reading process that helps cure pathology (Jones, 2006). The clinical type of Bibliotherapy mainly indicates a cognitive process. The principal goal is to increase the intellectual functioning of the client via a written text, with constrained or no therapist involvement at all.

Benefits of Bibliotherapy

- Bibliotherapy incorporates a decrease of negative feelings and side effects with their substitution by progressively positive practices and sentiments.
- Bibliotherapy is powerful in advancing critical thinking, expanding empathy, creating compassionate comprehension, and improving mindfulness.
- Bibliotherapy supports successful social conduct, explains values, and imparts social character and ethnic pride.
- Bibliotherapy is material to people and gatherings; gathering benefits incorporate input from others concerning translations and practices and open doors for demonstrating and improving correspondence.

Bibliotherapy in Library

The benefit of Bibliotherapy in the library could be achieved when the following factors are observed:

Inclusive Environment

In order to implement effective Bibliotherapy in the library, a positive and inclusive atmosphere must be established (Maich & Kean, 2004). One of the most

important characteristics that may lead to developing an enticing and appropriate library environment includes student-librarian and student-peer relationships built on trust, respect, comfort, and knowledge of one another (Maich& Kean, 2004). These characteristics for the appropriate academic environment can be found in an inclusive library setting. An inclusion library environment provides students who have special needs with reasonable accommodations and modifications to learn and thrive in general education alongside their neurotically developing peers (Friend, 2011). Students with remarkabilities who are fully capable of academically succeeding in general education with reasonable accommodations and modifications are placed in the general library settings under an inclusionary setting (IDEA, 2004).

Bibliotherapy has a fundamental role in treating certain mental disorders, but it must be implemented in the correct library environment. Mental disorders can be very difficult to understand and work with, and students with mental challenges can be challenging in the library setting; when they are not receiving proper and sufficient care. Inclusion provides a healthy, positive environment for Bibliotherapy to take place effectively. As long as Bibliotherapy is implemented correctly and effectively in an inclusion library setting, the next generation of students with mental disorders will have the opportunity to develop and progress in a welcoming and encouraging environment.

Outreach

Librarians can apply the bibliotherapy model in attending to the information needs of customers with a mental disorder, which can advance a connection between staff and the student's life. Furthermore, librarians can contact guardians and local gathering pioneers and urge them to apply Bibliotherapy in their particular surroundings. "Parental contribution to the intervention process can be accomplished by sending home copies of the reading selections, journals, and any activity assignments the student completes" (Sullivan & Strange, 2003). The outreach can help families and communities further the positive effects of Bibliotherapy as a treatment for a mental disorder and reduce the stigma associated with the disease.

Be Knowledgeable

One of the best ways librarians can help students with mental disorders and fight the stigma is to learn more about mental illness. Much information on mental illnesses and symptoms is available on different websites. Knowledge about mental illness makes it more familiar and might make an unusual behavior seem less disconcerting or threatening. In addition, familiarity with symptoms of mental disorder may empower a librarian to inform the student counseling department or any relevant group within the university if a student begins displaying symptoms of mental disorder in the library. At the same time, librarians should not try to diagnose or label students with a mental disorder as this is best left to trained medical professionals.

Create and Reliably Uphold Library Rules

Most students have an experience of what is good or inappropriate in the library. However, it is beneficial to have regulations already in the region to enforce when anyone exhibits inappropriate behavior. Rules must be displayed at the library entrance and specified notice boards. Explicit guidelines put students with mental sickness to be aware of what conduct is excellent in the library. According to mental health professionals, people with mental disorders typically adhere to explicit rules, and when told there are rules against certain behaviour, they will change their behaviour to suit the rules.

At the same time, library rules should have enough flexibility to accommodate all students. A library should comply with laws that prohibit discrimination based on mental health. When possible, library policymakers can consider how current and prospective rules may impact students with mental disorders. Noise Policies, loan periods, and other library rules need to be put in place to ensure effortless operation of the library, and those rules should not be strict.

Work jointly with the School's Counselling Department.

Librarians can collaborate with the university counseling department to design different bibliotherapy programmes and therapies to help students with mental health disorders.

How Bibliotherapy can be administered in the Libraries, Books to be used, and the Duration of the Therapy

Bibliotherapy can be administered virtually any school day and used with individuals, small groups, or the whole class. The treatment's versatility makes it easy to integrate into the inclusion classroom curriculum (Maich & Kean, 2004). Library professionals report that "bibliotherapy sessions can take place as students arrive at school, during special activities, at silent reading time, as a part of library time, during lunch, or just before it is time to leave for the day" (Sullivan & Strang, 2003, p. 76).

While it can be incorporated in many different ways and times throughout the school day, it is crucial to administer Bibliotherapy when students are in a calm environment and have a reflective attitude. The Librarian should choose the material that contains ideas or themes similar to the student's situation. The Librarian must fully understand both the selected material and the student and how the two relate to one another. While administering treatment, the Librarian must maintain an active dialogue with the student to assess their understanding and interpretation of the material. In addition to the discussion, Librarians should "allow the students to engage in expressive activities, such as drawing, role-playing, or writing, so that each student has the opportunity to share his or her feelings" (Sullivan & Strang, 2003, p. 77).

Examples of Books to be used in Bibliotherapy

The list of book titles targeting students with mental illness is extensive. There are numerous bibliographies and collections of literature that provide lists of titles that could be appropriately used in the library for bibliotherapy purposes (Maich & Kean, 2004). Examples of some of the books to be used in bibliotherapy according to (readingagency.org.uk) are:

	Title	Author	Publisher
Anger	Overcoming Anger and Irritability: A Self-help Guide Using Cognitive Behavioural Techniques	Davies, William	Constable & Robinson
Anxiety	Overcoming Anxiety: A Self-help Guide Using Cognitive Behavioural Techniques	Kennerley, Helen	Constable & Robinson
	Overcoming Anxiety, Stress, and Panic: A Five Areas Approach	Williams, Chris	CRC Press
	Feel the Fear and Do it Anyway	Jeffers, Susan	Vermilion
Binge Eating/Bulimia Nervosa	Overcoming Binge Eating (<i>new edition – ‘Overcoming Binge Eating: The Proven Programme to Learn Why You Binge and How You Can Stop’ – available in HB and PB from September 30 2013</i>)	Fairburn, Christopher	Guilford Press
	Getting Better Bit(e) by Bit(e): A Survival Kit for Sufferers of Bulimia Nervosa and Binge Eating Disorders	Schmidt, Ulrike, and Treasure, Janet	Routledge
	Overcoming Bulimia Nervosa and Binge Eating: A Self-help Guide Using Cognitive Behavioural Techniques	Cooper, Peter J.	Constable & Robinson
Chronic Fatigue	Chronic Fatigue Syndrome (second edition)	Campling, Frankie and Sharpe, Michael	Oxford University Press
	Overcoming Chronic Fatigue: A Self-help Guide Using Cognitive Behavioural Techniques	Burgess, Mary and Chalder, Trudie	Constable & Robinson

Chronic Pain	Overcoming Chronic Pain: A Self-help Guide Using Cognitive Behavioural Techniques	Cole, Frances; Carus, Catherine; Howden-Leach, Hazel; and Macdonald, Helen	Constable & Robinson
Depression	Overcoming Depression and Low Mood: A Five Areas Approach (third edition)	Williams, Chris	CRC Press
	Mind Over Mood: Change How You Feel by Changing the Way You Think	Greenberger, Dennis and Christine Padesky,	Guilford Press
	Overcoming Depression: A Self-help Guide Using Cognitive Behavioural Techniques	Gilbert, Paul	Constable & Robinson
Health Anxiety	Overcoming Health Anxiety: A Self-help Guide Using Cognitive Behavioural Techniques	Veale, David and Willson, Rob	Constable & Robinson
Health Anxiety ctd...	An Introduction to Coping with Health Anxiety	Hogan, Brenda and Young, Charles	Constable & Robinson
	Understanding Obsessions and Compulsions	Tallis, Frank	Sheldon Press
	Break Free from OCD: Overcoming Obsessive Compulsive Disorder with CBT	Challacombe, Fiona, Oldfield, Victoria Bream, and Salkovskis, Paul M.	Vermilion
Panic	Overcoming Panic and Agoraphobia: A Self-help Guide Using Cognitive Behavioural Techniques	Silove, Derrick and Manicavasagar, Vijaya	Constable & Robinson
	Panic Attacks: What They Are, Why They Happen and What You Can Do About Them	Ingham, Christine	HarperCollins
Phobias	An Introduction to Coping with Phobias	Hogan, Brenda	Constable & Robinson
Relationship Problems	Overcoming Relationship Problems: A Self-help Guide Using Cognitive Behavioural	Crowe, Michael	Constable & Robinson

Techniques

Self-Esteem	Overcoming Low Self-esteem: A Self-help Guide Using Cognitive Behavioural Techniques	Fennell, Melanie	Constable & Robinson
Social Phobia	The Feeling Good Handbook Overcoming Social Anxiety and Shyness: A Self-help Guide Using Cognitive Behavioural Techniques	Burns, David and Butler, Gillian	Penguin Constable & Robinson
Sleep Problems	Overcoming Insomnia and Sleep Problems: A Self-help Guide Using Cognitive Behavioural Techniques	Espie, Colin A.	Constable & Robinson
Stress	The Relaxation and Stress Reduction Workbook Manage Your Stress for a Happier Life	Davis, Martha Looker, Terry and Gregson, Olga	New Harbinger Hodder
Worry	The Worry Cure: Stop Worrying and Start Living How to Stop Worrying	Leahy, Robert, L. Tallis, Frank	Piatkus Books Sheldon Press

The procedure of Bibliotherapy as a library administration must be comprehended as one that might be started by the student with the issue, by a bibliotherapist, or a curator in blend with the customer or advisor with-customer. The announcement of the students' concern is never the Librarian's; the administrator may aid the examination just according to what the curator has to know to make the insightful choice of the materials. The Librarian must realize which types of writing (print, film, or recording) the students' circumstances according to the issue to choose the materials that best reflect the parts of the issue that need comprehension and goals. The Librarian must evaluate the limit of the student to continue ID with the circumstance or characters for the length of the chose materials and strengthen that preparation to support the encountering of the writing. The Librarian must give the student any support expected to attempt reflection and knowledge. The bibliotherapeutic procedure is essentially the student who must put forth a large portion of the attempts -

to peruse, reflect, talk about, express experiences, and typify new comprehension in changed conduct or direction to the circumstance. All else is strengthening and steady. Bibliotherapy is not a one-time magic thing, but a cyclic process, with small effects cumulating and the potential of major change coming in a series of small, non-traumatic transformations of attitude or behaviour (Rubin, 1978:26)

Conclusion

Bibliotherapy as a meditation technique has the right stuff to be effective in different mental states of mind. In the light of the investigations on Bibliotherapy, the upsides of recuperating with books, educative and instructive materials bring along seem to be infinite. Although it offers significant achievements both in terms of time and effort, it is anything but a generally examined idea in our libraries. Nevertheless, it gives viable outcomes to the various issues at a low or medium level, for example, melancholy, uneasiness, tormenting, misery, social issue, and the like. Books likewise present a productive situation for battling against tension or bitterness, which one cannot face or handle.

References

- Aguilar-Gaxiola, S., & Mental Health America of Wisconsin (2013). *Mental health: Myth vs. reality*. Retrieved from <http://www.mhawisconsin.org/>
- American Psychiatric Association. (2014). Warning signs of mental illness: Recognizing early warning signs of mental illnesses. Retrieved from <http://www.psychiatry.org/mental-health/more-topics/warning-signs-of-mental-illness>.
- Duckworth, K. (2013). *Mental illness: Facts and numbers*. Retrieved from <http://www.nami.org/factsheets/>
- Friend, M. (2011). *Special education: Contemporary perspectives for school professionals* (3rd ed.). Upper Saddle River, NJ: Pearson. <https://www.medicalnewstoday.com/>
<https://readingagency.org.uk/adults/BoP%20core%20booklist%20April%202013.pdf>
- Individuals with Disabilities Education Act (IDEA), 20 USC (2004). Joan M. Reitz. *"Bibliotherapy"*. *Online Dictionary for Library and Information Science*. Retrieved September 9, 2019
- Jones JL (2006). *A closer look at Bibliotherapy*. *Young Adult Library Services*, Fall, 24-27.
- Leana-Tascilar MZ (2012). Use of Bibliotherapy in classrooms with gifted and talented students: Model proposal. *Turkish Journal of Superior Intelligence and Education*, 2: 118-136
- Leana-Taşçılar M.Z. (2012). Üstün zekâlı ve yetenekli öğrencilerin de bulunduğu sınıflarda

- bibliyoterapi kullanımı: Model önerisi. *Türk Üstün Zekâ ve Eğitim Dergisi*, 2:118-136.
- Leana-Taşçılar (2017). Bibliyoterapi programının üstün zekâlı ve yetenekli öğrencilerin öz saygı düzeylerine etkisi. *Balıkesir Üniversitesi Sosyal Bilimler Enstitüsü Dergisi*, 20(37):73-95.
- Maich, K. & Kean, S. (2004). Read two books and write me in the morning: Bibliotherapy for social-emotional intervention in the inclusive classroom. *TEACHING Exceptional Children Plus*, 1(2): p.
- McCulliss D (2012). *Bibliotherapy: Historical and research perspectives*. *J Poetry Ther*, 25:23-38
- National Institute of Mental Health (2010). *Any disorder among children*. Retrieved from <https://www.nimh.nih.gov/health/statistics/prevalence/>
- Öner U, Yeşilyaprak B (2006). Bibliyoterapi: Psikolojik danışma rehberlik programlarında çocuk edebiyatından yararlanma. II. Ulusal Çocuk ve Gençlik Edebiyat Sempozyumu Bildiriler Kitabı. Ankara: Ankara Üniversitesi Eğitim Bilimleri Fakültesi yayını, 203:559-565.
- Öner U, Yeşilyaprak B (2006). Bibliyoterapi: Psikolojik danışma rehberlik programlarında çocuk edebiyatından yararlanma. II. Ulusal Çocuk ve Gençlik Edebiyat Sempozyumu Bildiriler Kitabı. Ankara: Ankara Üniversitesi Eğitim Bilimleri Fakültesi yayını, 203:559-565.
- Öner U (2007). Bibliyoterapi. *Çankaya Üniversitesi Fen Edebiyat Fakültesi Dergisi*, 7:133-150.
- Rubin, Rhea J. 1978. Using Bibliotherapy: a guide to theory and practice. London: Oryx.
- Stein, D., Phillips, K., Bolton, D., Fulford, K., Sadler, J., & Kendler, K. (2010). What is a mental/psychiatric disorder? From DSM-IV to DSM-V. *Psychological Medicine*, 40(11), 1759-1765. doi: 10.1017/S0033291709992261
- Sullivan, A. K., & Strang, H. R. (2003). Bibliotherapy in the classroom. *childhood education*, 79(2), 74-80.
- WHO (2001a). Strengthening mental health promotion. Geneva, World Health Organization (Fact sheet, No. 220). Retrieved from <https://www.who.int/mental>