

The Treatment of Emotional Abuse Using Bibliotherapy

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“The ability of the written word to comfort and console is known to anyone who has ever turned to literature at times of distress and grief.” - Jonathan Bate

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Abstract

Past research concludes that experiencing emotional abuse as a child has many adverse effects on the child's health later on in life. Emotional abuse is difficult to detect because physical signs of abuse are not typically present. Many studies attempt to define emotional abuse and examine traditional methods of treatment for children who have been emotionally abused. The present study investigates bibliotherapy as an effective way to treat emotional abuse in children. Many forms of treatment occur outside of the school environment; implementing a way to treat emotional abuse while children are still in the school environment will be immensely helpful to children. The current study includes data collected from a survey sent to guidance counselors from Rutherford County Schools. Data collected through the current study supports the idea that guidance counselors are being trained on abuse consistently and effectively. Therefore, the current study concludes that both teachers and guidance counselors will benefit from being trained on how to use bibliotherapy within a school environment.

Research Question

Can the use of bibliotherapy effectively treat the effects of emotional abuse in children?

Research Purpose

The purpose of this study is to evaluate the effectiveness of bibliotherapy in the treatment of childhood emotional abuse. This study focuses on the treatment of the psychological well-being of minors who have been emotionally abused by their parent or guardian. It briefly reviews the several definitions, identification, protocol, occurrence, and severe cases of emotional abuse. This study also reviews alternative methods of therapy, the history of bibliotherapy, and current uses of bibliotherapy. The goal of the method is to survey guidance counselors to justify that emotional abuse is a serious issue and to establish that bibliotherapy is a viable source of treatment.

Background Information**Definitions of Abuse**

Abuse is “a corrupt practice or custom; a deceitful act; language that condemns or vilifies usually unjustly, intemperately, or angrily; physical maltreatment.” This definition can relate to the three main types of child abuse: physical, sexual, and emotional. There is a distinction between the criteria for each type of abuse. Physical abuse is described as “any non-accidental physical injury or trauma that could cause injury inflicted by a parent, caretaker, relative or any other person who is responsible for the care, supervision or treatment of the child” (Tennessee Department of Child Services, 2016). Physical abuse is focused on the purposeful actions of anyone taking care of the child. These actions lead to harm of the child physically. Additionally,

“sexual abuse occurs when a child who is under the age of 13 or was under the age of 13 when the abuse occurred or a child is age 13-18 and meets the relationship criteria per policy, and the child is involved in intentional sexual acts that produce sexual arousal and/or gratification for the perpetrator” (Tennessee Department of Child Services, 2016). This form of abuse also focuses in on the abuser’s actions rather than the child’s. Sexual abuse can have a variety of different outcomes including psychological effects and possibly pregnancy. Tennessee’s Child Protective Services (CPS) has a section of their work aid that also describes psychological harm. The literature written about psychological harm states that it is “a repeated pattern of caregiver behavior or extreme incident (so that convey to children that they are worthless, flawed, unloved, unwanted, endangered) or only of value in meeting another’s needs and may include both abusive acts against a child and failure to act; neglectful behavior when age appropriate action is required for a child’s healthy development” (Tennessee Department of Child Services, 2016). Child Welfare Information Gateway defines emotional abuse as “injury to the psychological capacity or emotional stability of the child...” (Tennessee Department of Child Services, 2016). These definitions are focused on the child rather than the actions of the abuser. Tennessee law defines emotional abuse as “an injury to the intellectual or psychological capacity of a child as evidenced by a discernible and substantial impairment in the child's ability to function within the child's normal range of performance and behavior, with due regard to the child's culture” (Child Welfare Information Gateway, n.d.). This definition focuses more on the child’s ability to function at the correct social and intellectual level for their age rather than the actions of the abuser.

Identification

Emotional abuse is a concept that is constantly changing, “unlike sexual and physical abuse and neglect, the emotional-abuse concept has been much slower to gain acceptance as a part of child protection, requiring conferencing, registration, assessment, and intervention including in severe cases court proceedings; such tardiness is not surprising, as emotional abuse is a dynamic and changeable social construct” (Iwaniec, 2006). What is considered to be emotional abuse now would not have been considered abuse that warrants attention less than a century ago, and it is currently not considered abuse in many areas of the world (Iwaniec, 2006). Identifying emotional abuse is a very difficult task. There is a blurred line between harsh emotional treatment and emotional abuse, and it is hard to discern one from the other (Iwaniec, 2006). Because it is so difficult to discern the difference between emotional abuse and emotionally harsh treatment, not much has been done to encourage people to identify and report this type of abuse. The study of abuse is a continuously changing field. Categorizing abuse as emotional abuse is often difficult because the point where emotionally harsh treatment becomes emotional abuse relies purely on the child. It cannot be classified without talking to the child and seeing how they personally feel. It has to be taken on a child-by-child basis. Iwaniec (2006) says, “because of difficulties in substantiating emotional abuse and proving its harmful nature, both researchers and child-protection agencies have tended to keep a low profile, resulting in slow progress in academic and practice arenas”. Emotional abuse is often viewed as something not particularly harmful to the health of the person being abused since physical signs are not immediately present unless it is a very severe case. Because of this, researchers do not typically spend much time epidemiologically researching emotional abuse.

When studying emotional abuse, it is important to remember that all parents will act inappropriately or thoughtlessly at some point. Emotional abuse is not only occasionally acting thoughtless towards a child. In general, parents should be loving and supportive of their children. Children will not be well rounded if they grow up in a micromanaged and over supervised environment. Emotional abuse is a chronic pattern of parental behavior that brings harm to a child (Iwaniec, 2006).

When a child is being emotionally abused, they often succumb to learned helplessness, which means that the child feels as though they do not have control of the outcome of adverse childhood events (Suligman, 1975, as quoted in Iwaniec, 2006). According to Vollmayr & Gass (2013), “The concept of learned helplessness defines an escape or avoidance deficit after uncontrollable stress and is regarded as a depression-like coping deficit in aversive but avoidable situations.” Children who resort to learned helplessness will often experience emotional abuse at a severe level since they often will not seek help. Being able to identify a child who is experiencing abuse can prevent a child from learning learned helplessness.

Protocol

Protocol for reporting emotional abuse is the same as the protocol for reporting any other form of abuse in Tennessee and many other states. Legally, everyone in the state of Tennessee is a state-mandated reporter, meaning that if someone witnesses or has knowledge of abuse, they are required to report it. Under Tennessee Code Annotated 37-1-403(i) (1),

Any person who has knowledge of or is called upon to render aid to any child who is suffering from or has sustained any wound, injury, disability, or physical or mental condition shall report such harm immediately if the harm is of such a nature as to

reasonably indicate that it has been caused by brutality abuse, or neglect or that, on basis of available information, reasonably appears to have been caused by brutality, abuse, or neglect. (TN Department of Child Services)

Failure to report a case of child abuse that you are aware of is a violation of the law and can cause the person responsible for not reporting abuse to spend up to three months in prison (TN Department of Child Services). To report child abuse, one must call a DCS hotline and answer the questions that are asked as accurately as possible.

Occurrence of Emotional Abuse and Severe Abuse Cases

According to Binggeli, Hart, & Brassard (2001), nearly one third of all adults in the US have experienced some degree of emotional abuse and are still affected by it during adulthood. Emotional abuse comes in many forms, whether that be neglecting to tell your child that they are wanted and loved, thus resulting in them feeling worthless, or something much more severe. Some severe cases may result in physiological effects on the child's health. Three severe cases of this are discussed in the *Sociology & You* textbook.

Anna was a six year old girl found in Pennsylvania in 1938. Anna was born to her unmarried mother, and she had one sibling. For the first six months of her life, she lived in a children's home or with a practical nurse until private agencies stopped paying for her care. After this, she was returned back to her birth mother. Because her mother feared the reaction of her father, she hid her away. When she was found, she was tied up to a chair in a second floor storage room. Anna was unable to talk and could not hold herself up to sit. She did not know how to eat solid foods and could not drink from a cup. She had been shown no signs of attention or love. When Anna arrived at the county home, she started to show signs of improvement.

Because she was now given attention, love, and a healthy diet, she started to improve quickly. Anna lived at the county home for a year and a half after she was found, and while she was there, she continued to show signs of improvement. Anna was transferred to a school for learning disabled children where she continued to show signs of improvement, but her age level was only around the level of a nineteen month old. Anna continued to make some progress until she died at age ten, but she never reached the social maturity level above a child at age two (Shephard & Greene, 2014).

Isabelle was a six year old girl found in Ohio around nine months after Anna was found. She was born to a single mother who was blind and nonverbal. Isabelle struggled to learn to speak because of her mother's deficiencies. Because of this, Isabelle communicated in a very primal level. Isabelle and her mother stayed secluded in a dark room, but unlike Anna, Isabelle was shown love from her mother. When Isabelle and her mother were rescued by authorities, Isabelle was thought to have an IQ of nearly zero. She had severely bowed legs and was ill because of her lack of exposure to sunlight and lack of proper nutrients. Isabelle was put on an intensive rehabilitation program, and she made improvements quickly. By the time she was eight years old, she was at the same intelligence level as other children her age, and she seemed normal. Her quick paced progress was likely due to the fact that she was loved by her mother when she was a baby (Shephard & Greene, 2014).

Genie was found in 1970 in California when she was fourteen years old. From the time Genie was only two years old, her father kept her locked in a room because he believed that she was mentally disabled. Genie was tied to a pottie chair in a room with almost nothing to look at and with no easy way to communicate with anyone else. Genie weighed 59 pounds when she

was found. She was unable to chew solid food. She walked in a strange bunny walk fashion, and she clawed and spat. She took whatever she wanted without asking. When doctors tested her brain waves, they were abnormal. Linguists believe that there is a window in which children must learn how to speak, and if children do not learn how to speak during this window, they will never learn how to speak. Genie did show further progress, but she never attained the ability to speak fully and clearly (Shephard, 2014).

These cases highlight the idea that children need human contact in order to function at the normal level of a child their age. They also allude to the idea that being shown love and affection is essential to human development. These children were all physically abused, but they also experienced significant emotional abuse. Anna and Genie both experienced the most severe emotional abuse, and they both had the hardest time with rehabilitation. Isabelle was able to be rehabilitated completely, and this is likely due to her being shown love and affection (Shephard & Greene, 2014).

The History of Bibliotherapy

“Bibliotherapy is the use of books as therapy in the treatment of mental disorders. The theory behind bibliotherapy is that reading about one’s problem areas can produce change that is specific and predictable” (Lewis, Amatya, Coffman, Ollendick, 2015). Bibliotherapy is not a new idea, but it is a new area of research in science. Diodorus Siculus is quoted as saying that the library is “the healing place of the soul” in the second millennium BC (Bate, 2016).

The great Renaissance essayist Michel de Montaigne argued that there were three possible cures for that most terrible of mental afflictions, loneliness: to have a lover, to have friends, and to read books. The problem with love affairs, he complained, is that

sexual pleasure is fleeting and betrayal all too common. Friendship (and he did not deny that a lover could also be a friend) is much better, but it is ended by death. Montaigne was deeply afflicted by the death from plague of his friend, Etienne de la Boétie. He concluded that the only therapy that endures through life— so long as we have our mental capacities and our sight, or someone to read to us—is the companionship of books (Bate, 2016).

De Montaigne provides a problem with love affairs and friendship because they both can be terminated in a lifetime. However, reading can be a lifelong companion.

In ancient Greece, Plato believed that poets should be banished because they stirred up unhealthy emotions. His claim was established on the occurrence of the murder, rape, and incest in Greek tragedy. This idea later turned into Freud's psychoanalysis, although Freud still believed the root of his "talking cure" was in literature (Bate, 2016).

In the nineteenth century anthologies were specifically marketed for Victorians to study and pace themselves in the newly busy world. In the early twentieth century, libraries were implemented in psychiatric hospitals so that their patients could access "intellectual and emotional pharmacies" (Bate, 2016).

Bibliotherapy as a research science is a term coined by Samuel McChord Crothers who wrote an essay called *A Literary Clinic* in 1916 (Bate, 2016). His essay was written in interview format, which created a story about using stories as therapy.

How Bibliotherapy is Currently Being Used

Currently, bibliotherapy is being used to help treat autism and children with sleeping disorders such as chronic nightmares and several other severe psychological disorders.

Children who experience frequent and severe nightmares benefit greatly from bibliotherapy. Many children experience extreme anxiety while trying to go to sleep, and the use of bibliotherapy may help children feel more at ease. Bibliotherapy is an accessible form of therapy. Bibliotherapy has many advantages: “ease of administration, potential to enhance motivation for change, and the ability to incorporate a number of therapeutic components into a format that is intrinsically appealing to children” (Coffman, Andrasik, and Ollendick, 2013, as quoted by Lewis, Amatya, Coffman and Ollendick, 2015). Bibliotherapy is useful to families who are unable to get their children to therapy on a regular basis for reasons such as distance, time, or monetary reasons. Bibliotherapy can be used at home; parents may read to their children to help them feel more at ease when trying to go to sleep (Lewis, Amatya, Coffman and Ollendick, 2015).

Turner (2013) states that “Bibliotherapy using children's books featuring children with disabilities has been shown to be an effective way to sensitively relay important information.” This raises the question if bibliotherapy can sensitively relay important information to children with autism, children who experience chronic nightmares, and people with alcohol use disorders, then could bibliotherapy sensitively relay similar information and coping mechanisms to emotionally abused children? The treatment of emotional abuse is a sensitive topic, especially because an emotionally abusive parent most likely will not take their child to therapy. It creates a need for a therapy that repetitively can be shown to these children during short periods of time (i.e. while at school).

The Role of Bibliotherapy in Treating Emotional Abuse

Currently, there is not research out about the use of bibliotherapy to treat emotional abuse. This could be a shortcoming of our study.

Hypothesis

There is a need for a treatment option for emotional abuse that can be used during the school day to treat the children who have been emotionally abused. Bibliotherapy is a repetitive, fast paced treatment option that gives children the coping skills and encouragement that is needed to heal. Therefore, the current study believes that bibliotherapy is a valid option for childhood emotional abuse treatment and that counselors should receive training on how to use bibliotherapy to treat emotional abuse.

Methods

Participants

Each participant is a guidance counselor from schools in Rutherford County Tennessee (TN). Participants were volunteers. The survey was sent to Central Magnet School guidance counselors who then distributed it to other Rutherford County counselors.

Procedure

The electronic survey (Appendix A) was sent via email to guidance counselors across the school district, in which respondents had five day.

Results

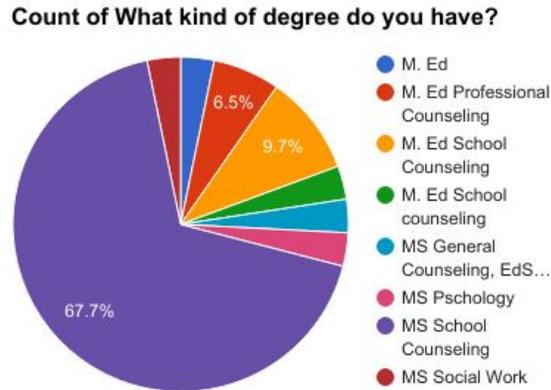


Figure 1.

This graph is a count of what kind of degrees each counselor has. 67.7% of the population surveyed reported that they have a masters degree in school counseling.

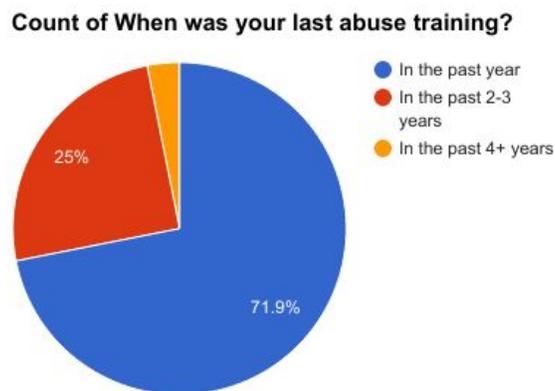


Figure 2.

This graph is a count of when the counselors last abuse training was. 71% of the counselors surveyed reported that they had received abuse training within the past year. 25% reported that they had received abuse training within the last two to three years. 4% of guidance counselors reported that they had received abuse training in the past four or more years.

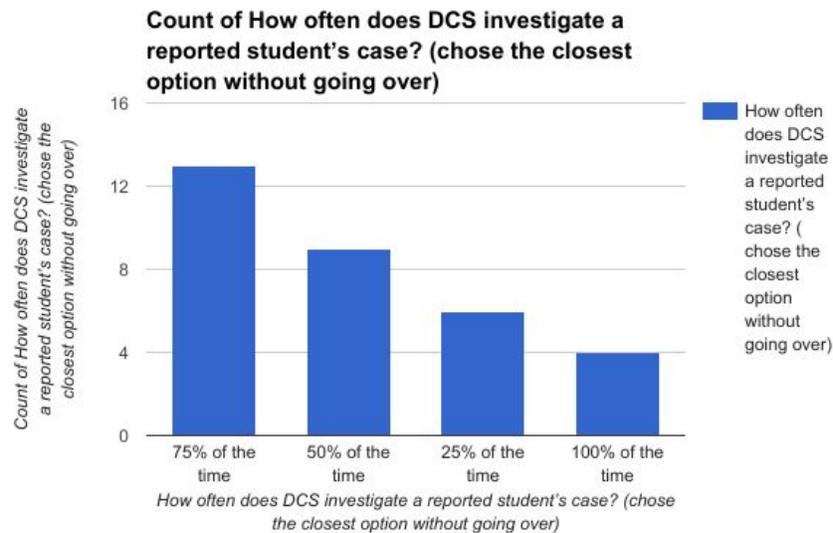


Figure 3.

This graph is a count of how often DCS investigated a reported student's case. Twenty-four counselors reported that they have to report abuse cases less than five times a year. Seven counselors reported that they have to report abuse cases five to ten times a year, and only one counselor reported that they have to report abuse eleven to fifteen times a year.

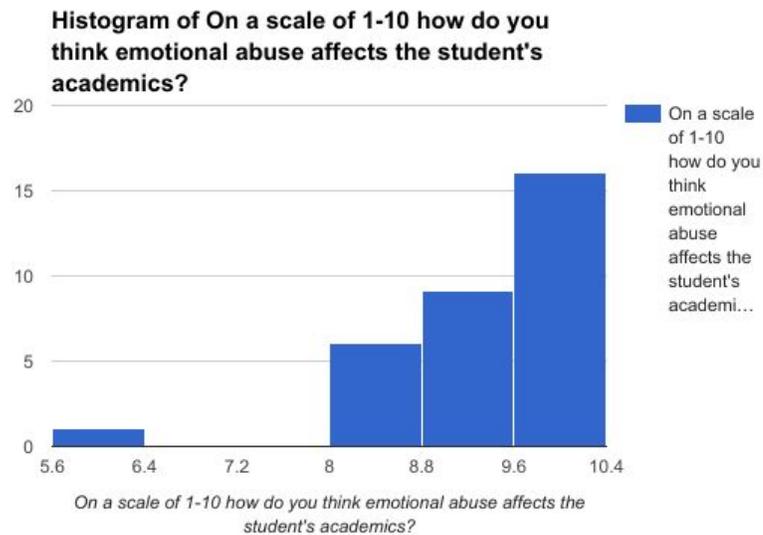


Figure 4.

This graph is a count of how emotional abuse affects a student’s academic life. 97% of counselors reported that on a scale of one to ten, emotional abuse had an effect of eight or over on a child's school life.

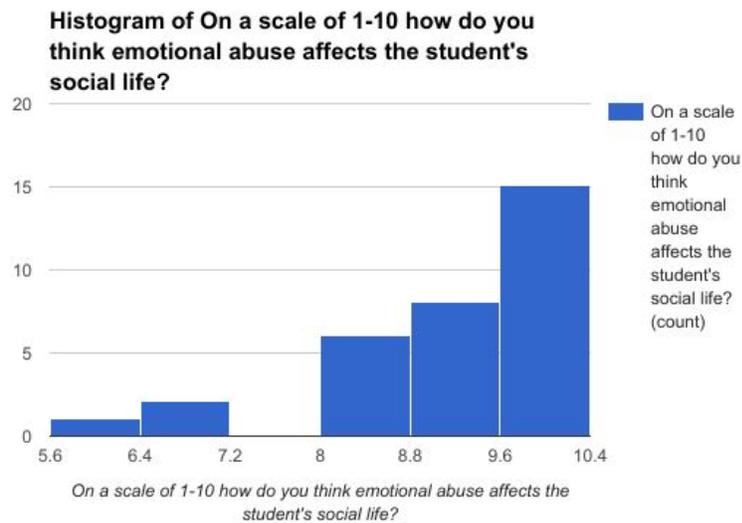


Figure 5.

This graph is a count of how emotional abuse impacts a student's social life. 90% of guidance counselors reported that emotional abuse has an effect of eight or more (on a scale of one to ten) on the life of a student.

Discussion

The data that was collected through this survey suggests that in many cases, abuse training is being done correctly and consistently. The majority of responses indicated that guidance counselors receive abuse training annually or semi-annually, as shown in Figure 2. This training seems to be furthering the level of empathy that guidance counselors have for their students. Guidance counselors generally reported that emotional abuse has an impact on both the social life and school life of a child, as shown in Figures 4 and 5. Therefore, the training that counselors receive should continue in order to maintain a high level of empathy for students.

Along with training guidance counselors on emotional abuse annually, teachers should receive abuse training. Teachers are often the primary source in abuse cases. Students are likely to turn to teachers when something is bothering them at home. Teachers should be equipped with the skills necessary for spotting cases of abuse. If teachers are aware of the signs of emotional abuse, they will also be able to communicate the needs of the student faster and more efficiently. Students are less likely to reach out to a guidance counselor for help because they are less likely to be comfortable with their guidance counselors. So, a teacher is often the person that they will turn to.

In order to use bibliotherapy in a school setting, the teachers and guidance counselors would need to communicate the needs of students that they believe are experiencing emotional abuse. Without this communication, guidance counselors are not likely to be able to efficiently assist a student in need. The data collected through the survey sent to guidance counselors suggests that guidance counselors are being trained effectively and that their training is assisting in being able to show empathy to their students. Training on how to use bibliotherapy within a

school environment could assist in successfully implementing bibliotherapy as a form of therapy used to treat emotionally abused children.

Limitations

There has been no previous discussion of bibliotherapy as a treatment for emotional abuse. This is a shortcoming of this study because there is no previous supporting data for the claim, thus making it harder to argue.

The researchers were unable to conduct interviews with specific counselors due to time restraints. Therefore, counselors were not asked about their thoughts on bibliotherapy and how it could be used as a treatment option for emotional abuse. This takes away data that could have further backed the hypothesis that bibliotherapy is a viable treatment option for these students.

A question that should have been asked during the survey is “How many years of experience do you have as a guidance counselor?” The counselor’s answers could have varied by how they have been trained and how much experience they have within their field. Not distinguishing between elementary, middle, and high school could be a shortcoming as well.

Due to the limited population of guidance counselors in Rutherford County, the survey only received thirty-two responses. If there had been more time to conduct the experiment, the survey could have also gone out to surrounding counties. There would have also had to be an approval process of the survey because it was leaving the county.

Future Research

Future research on this topic could include conducting interviews with individual guidance counselors about their opinions on bibliotherapy to treat emotional abuse, as well as

distributing another electronic survey with questions specifically involving bibliotherapy for a similar set of counselors.

Future research regarding this topic could also include the creation of a program to assist in training counselors and teachers on how to use bibliotherapy for children experiencing abuse. This program could further the use of bibliotherapy within schools and make it easier accessible to these children.

Appendix A

1. What kind of degree do you have?
 - a. BS Psychology
 - b. BS Counseling
 - c. MS School Counseling
 - d. MS Education Psychology
 - e. Other
2. When was your last abuse training?
 - a. In the past year
 - b. In the past 2-3 years
 - c. In the past 4+ years
3. How often do you have to report child abuse?
 - a. Less than 5 times a year
 - b. 5-10 times a year
 - c. 11-15 times a year
 - d. More than 15 times a year
4. How often does DCS investigate a reported student's case? (chose the closest option without going over)
 - a. 25% of the time
 - b. 50% of the time
 - c. 75% of the time
 - d. 100% of the time

5. On a scale of 1-10 how do you think emotional abuse affects the student's academics?
 - a. (linear scale- 1 being least likely to affect the student; 10 being most likely to affect the student)

6. On a scale of 1-10 how do you think emotional abuse affects the student's social life?
 - a. (linear scale- 1 being least likely to affect the student; 10 being most likely to affect the student)

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