



Working Papers 2022/23: 03

Bibliotherapy: A survey of literature

Gill Partington

*Faculty of Humanities and Social Sciences,
University of Exeter*

June 2023

*WCCEH, University of Exeter, Queen's Building, The Queen's
Drive, Exeter, Devon, EX4 4QH*

01392 722143 | wellcomecentre@exeter.ac.uk

Please cite as:

Partington, G. (2023) *Bibliotherapy: a survey of literature*. Working Papers
2022/23: 03. Exeter: Wellcome Centre for Cultures and Environments of Health. ISSN: 2754-
530X

Bibliotherapy: A survey of literature

Contents

Summary	3
1. Definitions and overview: what is bibliotherapy?	4
2. The emergence and evolution of bibliography.....	7
Contemporary bibliotherapy in the UK	13
3. Does bibliotherapy have an underlying theory? Methods and methodologies	16
What is the 'biblio' in bibliotherapy? Criteria for book selection	17
Fiction-reading and bibliotherapy	21
Criticism and debate	23
4. Bibliotherapy, literary studies and the history of reading	25
5. Bibliotherapy in wider culture, literature and journalism	32
6. Conclusion.....	34
Acknowledgements and funding	35
Bibliography.....	36

Summary

This report surveys the literature of bibliotherapy. It begins by noting the difficulty in defining what this term designates. Definitions are plentiful, and there is apparent consensus on its basic principle that reading can be beneficial in terms of health. However, fundamental disagreements are apparent once definitions extend beyond this. An overview of recent studies shows that the term has become remarkably elastic, overlapping in recent years to a large degree with Cognitive Behavioural Therapy. The report notes that one reason for this is the lack of any agreed canon of theory around which the field might cohere, and a corresponding lack of interest in its own history.

In section 2, the report investigates the development of what might be called the 'bibliotherapeutic paradigm', noting the shifts it has undergone through various contexts and theoretical frameworks. One theme that emerges strongly from the literature is the change from a mid-twentieth century period in which bibliotherapy was more-or-less a unified field, to a more distributed, fragmented set of practices and concepts in the contemporary era. Examining the current state of bibliotherapy in the UK, the report notes that its driving force is now the voluntary sector, with the Reading Agency and The Reader Organisation providing two quite different versions and practices.

Section 3 examines the issue of method and theory, asking what the framework underlying bibliotherapy might be. Such questions are difficult to answer, since there are many varied practices operating under this term, some involving self-help books and others involving literature. The section focuses on the rationale behind reading fiction for health and wellbeing, finding that assumptions about literature, empathy and identification are a common thread throughout many manifestations of bibliotherapy. Whether this constitutes a scientifically rigorous foundation is a debate that concerned practitioners and theorists in the mid-twentieth century, but which was unresolved. As the report shows, however, many of the same questions and criticisms are still being raised today. This, along with the continuing refrain that bibliotherapy – although a century old – is an 'infant' or emerging field, creates the sense that the debate has not advanced.

Section 4 looks at bibliotherapy from the perspective of adjacent disciplines, notably literary studies and the history of reading. Recent work here has highlighted a contemporary nostalgic obsession with the book, and provides a context in which contemporary bibliotherapy might be understood. Such work might not be a basis for interdisciplinary collaboration, but the report examines how a move towards 'post-critique' and a concern with readerly affect holds potential for overlaps between literary studies and bibliotherapy.

Section 5 looks at manifestations of bibliotherapy in culture more widely, from the popular literary genre of the bibliomemoir to the recreational services provided by the School of Life. While such 'soft bibliotherapy' is outside the discipline as such, the report notes that it is evidence of how pervasive the bibliotherapeutic paradigm has become.

Bibliotherapy: A survey of literature

1. Definitions and overview: what is bibliotherapy?

In attempting to map the literature of bibliotherapy, the question that presents itself most frequently is whether it should be seen as a unified, coherent or single entity. Should we treat it as a 'field', a 'discipline', a 'practice', a 'movement', or simply a loose concept to which a variety of disparate activities and ideas attach themselves?¹ The sheer range of different and sometimes conflicting practices that adopt or co-opt this term is such that it might be more useful to talk about it in the plural – 'bibliotherapies' or 'bibliotherapeutic approaches' – acknowledging the separate spheres and varied ways in which the term is used. Despite the large amount of literature that exists about bibliotherapy, it is hard to point to any foundational set of texts or a universally recognised authority that practitioners or students can agree on or cohere around. Unlike other established forms of therapy – psychotherapy, psychoanalysis or behavioural therapy – it can't be said that there is any such thing as a recognised canon of theory. Instead, there is a very broad core idea – that reading can be in some way beneficial – and an umbrella term under which many things position themselves.

This is not to say there are no accepted definitions of bibliotherapy. There are many. Most of the literature typically begins by defining the term, some by recourse to basic etymology, although these accounts have a tendency to be quite brief and lacking in depth. Shelley Jackson states that it is simply 'the therapeutic use of books' while Liz Brewster avoids even the notion of therapy and calls it 'the premise' that 'information, guidance, and solace' can be found in books.² Definitions can also be couched in quite broad and non-specialist terms, avoiding any specifics about method or discipline, or areas of potential debate. Joan Hoagland states that it is 'the attempt of an individual to promote his mental and emotional health by using reading materials to fulfil needs, relieve pressures or help his development as a person.'³ Definitions can sometimes become so loose, in fact, that bibliotherapy risks losing any distinguishing features. According to a 1980 pamphlet for parents and educators, 'If you have ever felt warm, weepy, excited, or renewed after reading a book, then you have experienced a form of bibliotherapy.'⁴ What separates it from reading in general here is not entirely clear.

When definitions become lengthier or more specific, the apparent consensus can quickly break down. Some accounts insist on particular kinds of reading material – literature and poetry – while others assume that reading itself is the central feature, no matter what the text. Robert L. Barker, in the *Social Work Dictionary*, states that bibliotherapy is 'the use of literature and

¹ This report uses the term 'discipline' for the scholarly or academic domain of bibliotherapy, and 'field' or 'practice' for the more broader cultural phenomenon, but there are often overlaps and grey areas.

² Shelley A. Jackson, 'Using Bibliotherapy with Clients', *The Journal of Individual Psychology*, 57 (2001), 289–97 (p. 90). 'History and Theory of Bibliotherapy', in *Bibliotherapy*, ed. by Liz Brewster and Sarah McNicol (Facet, 2018), pp. 1–2.

³ Joan Hoagland, 'Bibliotherapy: Aiding Children in Personality Development', *Elementary English*, 49.3 (1972), 390–94.

⁴ Claudia E. Cornett and Charles F. Cornett, *Bibliotherapy: The Right Book at the Right Time* (Bloomington, Indiana: Phi Delta Kappa Educational Foundation, 1980): 7.

poetry in the treatment of people with emotional problems or mental illness,'⁵ while Brewster states that it 'involves using any text to improve physical or emotional well-being, through reading, discussing, and facilitating a greater understanding'.⁶ Other definitions claim bibliotherapy as a branch of medicine or as a particular form of specialist medical therapy. *The National Library of Medicine* has defined it since 1999 under its Medical Subject Headings (MeSh) as 'a form of supportive psychotherapy in which the patient is given carefully selected material to read'.⁷ There have long been attempts to define it as such: psychiatrist Louis Gottschalk asserted in 1948 that 'bibliotherapy may be described simply as a means of psychotherapy through reading', although Gottschalk's title carried an important qualifier to this definition: 'Bibliotherapy as an adjuvant in Psychotherapy'.⁸ The question of whether it is a distinct practice in its own right, or simply a tool to be used in another more established form of therapy is one that recurs in the literature. Debbie McCulliss, writing more recently, argues that 'bibliotherapy is not a panacea and appears to be most effective as an adjunctive therapeutic tool'.⁹ For a sense of the fault lines on this issue, it is worth visiting the Wikipedia page for bibliotherapy, which is subject to an unresolved editorial dispute on the grounds that its definition is too general, that 'libraries in hospitals for sick patients, and "therapeutic storytelling" are not bibliotherapy,' and that it is, rather 'a form of psychotherapy'.¹⁰

According to most definitions, books and reading are central, but some accounts describe forms of bibliotherapy that do not necessarily involve books. McCulliss states that it is 'an important clinical tool for mental health professionals who may prescribe reading (fiction, nonfiction, and poetry) or audiovisual material including films, in addition to engagement in discussion, an art activity, or writing, in their work with patients for the purpose of reflection, healing, and personal growth'.¹¹ R.W Marrs defines it as 'Using written materials or computer programs or listening/viewing of audio/videotapes for the purpose of gaining understanding or solving problems related to human development or treatment needs'.¹² Such definitions obviously beg the question of what part the act of reading might play (and in turn, the central question of bibliotherapy's rationale and method; namely, how does it work?). Added to this tendency toward vague and elastic definitions, there are proliferating subcategories devised by some authors – 'cognitive', 'affective' or 'creative' bibliotherapy for instance (discussed below) – which are intended to clarify or give specificity to the term. There are also adjacent activities

⁵ Robert L. Barker, *The Social Work Dictionary* (NASW Press, 2003), p. 35.

⁶ Liz Brewster, 'Books on Prescription: Bibliotherapy in the United Kingdom', *Journal of Hospital Librarianship*, 9.4 (2009), 399–407 (p. 400).

⁷ 'National Library of Medicine - National Institutes of Health' (U.S. National Library of Medicine).

⁸ Louis Gottschalk, 'Bibliotherapy As an Adjuvant in Psychotherapy,' *American Journal of Psychiatry* 104, no. 10 (1948): 632.

⁹ Debbie McCulliss, 'Bibliotherapy: Historical and Research Perspectives', *Journal of Poetry Therapy*, 25.1 (2012), 23–38 (p. 34).

¹⁰ The Wikipedia page has been disputed by one reader/editor, who states that the article 'needs attention from an expert in Psychology'. The dispute clearly signals one key and unresolved uncertainty around bibliotherapy's relationship to other forms of therapy, and how loose its definitions can be.

'Bibliotherapy', *Wikipedia*, 2023

<<https://en.wikipedia.org/w/index.php?title=Bibliotherapy&oldid=1141137074>> [accessed 9 April 2023].

¹¹ McCulliss, p. 23.

¹² R. W. Marrs, 'A Meta-Analysis of Bibliotherapy Studies', *American Journal of Community Psychology*, 23.6 (1995), 843–70.

that overlap. Sometimes bibliotherapy is seen as a subset of art therapy or writing therapy. There are also other, less frequent but overlapping terms or synonyms in circulation: 'Bibliotherapy has been known by many names, such as bibliocounselling, biblioeducation, bibliopsychology, library therapeutics, biblioprophylactics, literatherapy.'¹³

Brewster points out that definitions are necessarily shifting and complex since bibliotherapy is constantly developing as it draws on multiple disciplines (medicine and healthcare; psychology and psychiatry; information studies; literary studies; education; and social and community work) and has adapted in response to changes in the ways in which we view health and wellbeing as a society over time.¹⁴ One very recent article – 'The 100 Most-Cited Articles on Bibliotherapy: A Bibliometric Analysis' – published in *Psychology, Health and Medicine* in 2022, provides an instructive snapshot of contemporary scholarship.¹⁵ While this is predominantly a number crunching exercise and a list (it does not attempt to define bibliotherapy in any depth nor evaluate its efficacy) it does at least help to illustrate some of the field's characteristics, as well as some widespread assumptions. The first thing apparent from its list of most-cited articles is the startlingly wide range of issues and problems for which bibliotherapy is considered a potential solution: vaginismus, fear of flying, obsessive compulsive disorder, anger, dementia, panic disorder, bulimia nervosa, depression, alcoholism, gambling, social anxiety disorder among others. The other feature is the elasticity of bibliotherapy as a concept and practice, which appears to be interchangeable with (or associated with) 'internet based cognitive behavioural therapy', 'guided self-help', 'low intensity interventions' and other terms. In some instances it is clear that the reading materials provided to subjects are not books, but rather digital PDF surveys or other self-help documents. In some cases they appear not to be text-based at all. In this sense there seems to be a rather blurred distinction between bibliotherapy and other forms of therapy, notably CBT, particularly in relation to their low cost. There is a prevalence of other keywords, such as 'cost effective', 'available', and the authors of the article themselves state in their introduction that 'bibliotherapy has many advantages such as avoiding high costs of psychotherapy'.¹⁶ It seems firstly that this has become one of the attractions, if not one of the defining features of contemporary bibliotherapy, and secondly that it is a term that has acquired a very broad usage, with many kinds of remote, internet-based interventions sometimes given the designation, simply on the grounds they involve written materials of some kind.

¹³ John T. Pardeck and Jean A. Pardeck, *Bibliotherapy: A Clinical Approach for Helping Children*, Bibliotherapy: A Clinical Approach for Helping Children (Amsterdam, Netherlands: Gordon and Breach Publishers, 1993), pp. xiii, 146 (p. 1).

¹⁴ Sarah McNicol and Liz Brewster, 'Bibliotherapy in the UK: historical development and future directions', *Informatio*, 26.2 (2021), p. 9.

¹⁵ Zheng Xu and others, 'The 100 Most-Cited Articles on Bibliotherapy: A Bibliometric Analysis', *Psychology, Health & Medicine*, 2022, 1–17.

¹⁶ *Ibid.*

2. The emergence and evolution of bibliography

It is worth noting that the earliest of the one hundred currently most-cited bibliotherapy articles is from 1980, and the vast majority are far more recent.¹⁷ This reinforces the impression that the field does not rely on an established, older corpus of commonly cited literature. Nor does it tend to be particularly curious about its own history as a discipline. When looking backwards there is a tendency to refer not to specific scholarship but to a perceived 'age-old' notion that reading is beneficial. John T. Pardeck and Jean A. Pardeck are typical in stating by way of definition that 'books have been used as a resource for helping people cope for centuries'.¹⁸ These ideas of bibliotherapy's ancient wisdom sometimes stretch the timeline back still further, to a tradition of oral narrative preceding the book itself: Simon Du Plock writes that '[t]he therapeutic function of literature has probably been known since the beginning of written communication, and the oral tradition of storytelling predates even this and still continues in different ways in every culture'.¹⁹

There are a small set of more specific antecedents, cited as evidence that bibliotherapy dates back to the medieval and early modern period, for example Robert Burton's *Anatomy of Melancholy*, which likened the Bible to an apothecary's shop²⁰ and the work of the Renaissance essayist Michel de Montaigne, who argued that there were three possible cures for loneliness: to have a lover, to have friends, and to read books.²¹ But the most oft-repeated proof of bibliotherapy's origins is the library at ancient Thebes, the entrance of which bore the inscription 'the healing place for the soul'.²² This appears with such frequency in the literature that it seems an almost obligatory step in establishing bibliotherapy's credentials.²³ Nor is the tendency a recent one: according to Monique Dufour this gesture towards the library at Thebes

¹⁷ Ibid.

¹⁸ Pardeck and Pardeck, p. 2.

¹⁹ Simon Du Plock, 'Silent Therapists and the Community of Suffering: Some Reflections on Bibliotherapy from an Existential-phenomenological Perspective,' *Existential Analysis* 16 (2005): 302.

²⁰ 'Bibliotherapy against Depression – Bookophile' <<https://bookophile.com/bibliotherapy-against-depression/?lang=en>> [accessed 8 April 2023].

²¹ Germaine Leece, "'Have a Lover, Have Friends, Read Books,' Said Montaigne. He Was Right about One of Them', *The Guardian*, 24 May 2017,

<<https://www.theguardian.com/commentisfree/2017/may/24/have-a-lover-have-friends-read-books-said-montaigne-he-was-right-about-one-of-them>> [accessed 8 April 2023].

²² Although sometimes appearing in garbled form, this does have a basis in historical fact, and a more extensive examination of the inscription and its subsequent uses can be found in Cora E. Lutz, 'The Oldest Library Motto: Ψυχῆς Ιατρεῖον', *The Library Quarterly: Information, Community, Policy*, 48.1 (1978), 36–39.

²³ The following texts mention the library of Thebes inscription, but this list is far from exhaustive: Jonathan Bate and Andrew Schuman, 'Books Do Furnish a Mind: The Art and Science of Bibliotherapy', *Lancet*, 387.10020 (2016), 742–43; Christine A. Garrett Davis, "'Why Bibliotherapy?' A Content Analysis of Its Uses, Impediments and Potential Applications for School Libraries', *Qualitative and Quantitative Methods in Libraries*, 2017, 75–93 (p. 80).; 'History and Theory of Bibliotherapy', in *Bibliotherapy*, ed. by Liz Brewster and Sarah McNicol (Facet, 2018), pp. 1–2; Johnson A Afolayan, 'Documentary Perspective of Bibliotherapy in Education', 33 (1992); Fran Lehr, 'ERIC/RCS: Bibliotherapy', *Journal of Reading*, 25.1 (1981), 76–79; Helen Hoopes, 'An Introduction to Bibliotherapy', 10 (1989).; Emmanuel Stip, Linda Östlundh, and Karim Abdel Aziz, 'Bibliotherapy: Reading OVID During COVID', *Frontiers in Psychiatry*, 11 (2020); Paula S. McMillen and Dale Elizabeth Pehrsson, 'Bibliotherapy for Hospital Patients', *Journal of Hospital Librarianship*, 4.1 (2004), 73–81.; Debbie McCulliss, 'Bibliotherapy: Historical and Research Perspectives', *Journal of Poetry Therapy*, 25.1 (2012), 23–38.

came to be something of a 'solemn bibliotherapeutic ritual' in the scholarly literature from the 1930s onwards.²⁴ The effect of this is to present modern bibliotherapy not as a new phenomenon, but simply a contemporary manifestation of long-established cultural wisdom. There is some element of truth in this, as the interconnections of reading and health do indeed have a long history, but this history is complicated and fraught. Ideas about reading's healthiness have existed in tension with their opposite, and there have been long periods, notably in relation to emergence of the novel, when reading of a certain kind has been a focus of much cultural anxiety and moral panic (a theme to which this report returns below). In skipping over this history and reaching instead for the same familiar handful of precursors, bibliotherapy's own account of itself is at selective at best, and perhaps even resistant to more nuanced and complex forms of historicisation. There is a strong sense running through the literature that the genealogy of bibliotherapy as a concept does not need to be traced, since it is such a timeless, or ancient, idea.

It can therefore be hard to disentangle the actual history of bibliotherapy from these founding myths, which in turn makes the origins of the field difficult to pinpoint with precision. Several commentators have attempted to do just that, however. Phillip Wiemerskirch, writing in 1965, traced the systematic use of reading for curative or therapeutic purposes back to the early nineteenth century. His essay 'Benjamin Rush and John Minson Galt, II: Pioneers of Bibliotherapy' argued that it was in the institutional settings of asylums and hospitals for the insane that bibliotherapy first emerged. With the rise of more humane, 'moral' treatments for mental illness, reading was increasingly seen as a valuable resource for patients, with the consequence that 'libraries were established in most of the better mental hospitals of Europe by the end of the eighteenth century and of America by the middle of nineteenth century'.²⁵ In Britain, an 1844 report from the Metropolitan Commissioners in Lunacy stated that 'no asylum should be without a library', and that books 'are an important help in promoting a happy and serene state of mind'.²⁶ The York Retreat, administered by the Tuke family, was an influential example, and one which inspired the American physician Benjamin Rush. His 1810 recommendation to the Pennsylvania Hospital for the treatment of the Insane that someone should be employed specifically to administer to the patients' reading is, according to Weimerskirch, a call for a new type of 'recreational-bibliotherapist'. Rush's theories were expounded in his book *Medical Inquiries and Observations upon the Diseases of the Mind*, which went through five editions. Weimerskirch sees traces of its influence in the fact that, by 1850, the Pennsylvania Hospital for the Insane cited in its rules and regulations that it was the job of a 'teacher' to pass through the wards frequently, advising patients on the selection of books.²⁷ It was also in the mid-nineteenth century that the first scholarship about bibliotherapy emerged, in the form of John Minson Galt's 1853 article, 'On Reading, Recreations and Amusements for the Insane', which gave five reasons why reading is beneficial to the insane: it occupied the mind, passed the time, imparted instruction, fostered connection between patients and staff,

²⁴ Monique S. Dufour, *Reading for Health: Bibliotherapy and the Medicalized Humanities in the United States, 1930-1965*. Unpublished PhD Diss., Virginia Polytechnic Institute and State University; 2014., p. 7.

²⁵ P. J. Weimerskirch, 'Benjamin Rush and John Minson Galt, II: Pioneers of Bibliotherapy in America', *Bulletin of the Medical Library Association*, 53.4 (1965), 510 (p. 511).

²⁶ Quoted in Weimerskirch, p. 519.

²⁷ Cited in Weimerskirch, p. 523.

and rendered the former more manageable. As superintendent of the Eastern Lunatic Asylum of Virginia, Galt significantly expanded the collection of reading matter available to patients, and recommended that their reading was closely monitored.

Although Weimerskirch makes the case for these nineteenth century ‘pioneers of bibliotherapy’, it is important to note that the term ‘bibliotherapy’ itself was not in use until the twentieth century. This, at least, can be dated with accuracy, coined in 1916, by Samuel McChord Crothers in his *Atlantic* article ‘A Literary Clinic’.²⁸ There is an obvious temptation, therefore, to see Crothers’s article as a point of origin for bibliotherapy, but this should be treated with caution. Crothers’ article is a piece of popular journalism rather than scholarship, which stages a whimsical Socratic dialogue between Crothers and a fictional friend, Bagster, who opens a ‘Bibliopathic Institute’. The conversation speculates in a tongue-in-cheek vein about the prescription of particular books for particular maladies. Could Thomas Carlyle cure apathy? Would George Bernard Shaw be better for ‘morbid conditions’ than ‘turpentine’ and ‘Spanish flies’? Bagster asks whether books would have ‘the nature of a soothing syrup’ or the harsh effect of a mustard plaster. In terms of genre, the article seems more of a gentle satire than a polemic, with its target the emerging alternative therapies of homeopathy and naturopathy. So although Crothers is much-cited, and there is evidence that his coinage does rapidly enter the popular lexicon (taken up shortly afterwards by at least one novelist, who makes bibliotherapy central to a fictional plot) it is a mistake to see him as a serious progenitor of the field.²⁹

It might be more accurate to see Crothers’ article instead as giving a name to ideas that were already in circulation and becoming more prominent in the second decade of the twentieth century. The First World War undoubtedly gave a new impetus and urgency to the practice of therapeutic reading, and as large numbers of shell-shocked and injured soldiers returned from the front, it was deployed as a treatment for war casualties. There are some grounds for the claim that the modern bibliotherapeutic paradigm emerges in this context, therefore. In 1956, W.B. McDaniels wrote that bibliotherapy was ‘a war baby’: a product of the hospital libraries of the First World War, and a consensus of sorts has developed around this idea.³⁰ Jonathan Bate and Andrew Schuman in a short position piece in the *Lancet* recount the story of H.F. Brett-Smith, an Oxford don who had been exempted from military service on medical grounds and tasked by the British Army with drawing up a ‘Fever-Chart’ ranking the most ‘salubrious reading for the wounded’ in which Jane Austen came top. They go on to speculate that Rudyard Kipling might have been recollecting Brett-Smith’s work when, in the early 1920s, he wrote his short story ‘The Janeites’, in which a hairdresser called Humberstall, invalided out of the artillery on the Western Front, deals with his shellshock by re-reading the Austen novels that he had shared with his fellow soldiers.³¹

²⁸ Samuel McChord Crothers, “A Literary Clinic,” *The Atlantic* 118 (1916): 295;

²⁹ Novelist Christopher Morley made the concept the basis of his fictional depiction of a New York second-hand bookshop and its owner and self-described “practitioner of bibliotherapy”, Roger Mifflin. (Christopher Morley, *The Haunted Bookshop* (New York: Grosset and Dunlap, 1919).

³⁰ W.B. McDaniel, ‘Bibliotherapy – Some Historical and Contemporary Aspects’ *American Library Association Bulletin* (October 1956): 584–89.

³¹ Jonathan Bate and Andrew Schuman, ‘Books Do Furnish a Mind: The Art and Science of Bibliotherapy’, *Lancet* (London, England), 387.10020 (2016), 742–43.

As Edmund King and Sara Haslam point out, there is more myth than fact in this origin story. The story of H.F. Brett-Smith has entered popular legend, but seems to be based on much later accounts. There is no evidence of his activities, or indeed of any ‘fever chart’. King and Haslam’s account focuses instead on the War Library (later to become the Red Cross and Order of St John Library), instituted by Mrs Helen Mary Gaskell, and on the work of several other women including Flora Murray and Louisa Garrett Anderson, who ran a series of military hospitals in which libraries were an important resource.³² In 1915 Murray and Anderson recruited two volunteer librarians, including the novelist Beatrice Harraden for the Endell Street Hospital, and reported holdings of five thousand books, to ‘cater for every taste’. These hospital libraries were charitable institutions, reliant on donations of both money and books, and all were run by women. For King and Haslam, the story of bibliotherapy’s emergence is not one of heroic pioneers and progenitors or big ideas, but of female emotional labour. Accordingly, they prefer to use the term ‘literary caregiving’, underlining the fact that an implicitly gendered model of care was central to the rationale and practice in this context. Books could only ‘heal’ if they were accompanied by ‘direct personal intercourse,’ as Beatrice Harraden argued in her piece about the library published in the *Cornhill Magazine* in November 1916.³³

King and Haslam argue that the term ‘literary caregiving’ also underlines the distinction between US and UK contexts at this point. In contrast to recent broad and very general definitions, “‘bibliotherapy’ was defined and perceived more narrowly’ and ‘British hospital librarians and commentators maintained a noticeable ambivalence about applying the word “bibliotherapy” to their own operations well into the middle of the twentieth century, associating it with a set of specifically American theories’.³⁴ In a more professionalised American context the legacy of the First World War was very different, generating a body of theoretical literature which went on to shape the field over the ensuing decades: ‘librarians employed in Veterans Bureau and Administration hospital libraries in the post-war years saw it as part of their professional responsibilities to describe their operations—and the emerging bibliotherapeutic theories underlying them—in professional journals, particularly the Veterans Bureau and Administration *Medical Bulletin*’.³⁵ A three-part bibliography on hospital libraries and bibliotherapy published in 1931, for instance, provides some early testimony to the success of this programme in helping to determine the shape of the subsequent scholarly archive.³⁶ Practically all of the sources listed are American. One consequence of this, according to King and Haslam, is that the larger story of British wartime literary caregiving and its post-war legacy has been generally neglected in the existing scholarly literature on the history of bibliotherapy, which has tended to focus on American developments.³⁷

This impression is reinforced by Monique Dufour, who describes the major developments in bibliotherapy from the 1930s to 1960s as an almost exclusively American

³² Sara Haslam and Edmund G. C. King, “‘Medicinal Literature’: Bibliotherapy, Literary Caregiving, and the First World War’, *Literature and Medicine*, 39.2 (2021), 296–318.

³³ Beatrice Harraden, ‘What Our Soldiers Read,’ *Cornhill Magazine* (November 1916): 607–13. Quoted in Haslam and King, p. 305.

³⁴ Haslam and King, p. 299.

³⁵ Haslam and King, p. 309.

³⁶ W. J. Bishop, ‘Hospital Libraries and Bibliotherapy: A Bibliography.’

³⁷ Haslam and King, p. 309.

domain.³⁸ This was a crucial period, she argues, in which bibliotherapeutic practice coalesced around a body of theories, and there were self-conscious attempts to give coherence and weight to the discipline. One focus of activity was the 'patients' library movement' (PLM), which provided books in medical environments such as Veterans Administration facilities, tuberculosis sanatoria, three psychiatric clinics, and public and private hospitals. While 'bibliotherapist' was by no means a formal job title for librarians, it described a 'heightened vision' for library services directed specifically toward medical contexts. Book selection was the central task of what was called the 'guidance function' of librarianship, which cast the librarian's role as 'readers' advisor.' In 1939, the American Library Association published *Hospital Libraries* by E. Kathleen Jones, which addressed current and best practices in the mission of 'books and therapy' across the different types of hospitals of the period, including 'general, neuropsychopathic or mental, and tuberculosis.' Although bibliotherapist was not in any hospital an explicit, dedicated job title, the 1941 article 'Bibliotherapy of Tomorrow' depicted a vision of this trajectory from devoted amateur to medical professional:

The hospital librarian of yesterday was usually a person of pleasant personality, strong enough to push a heavy, frequently home-made truck around from room to room, and interested enough to do so for little or no salary. The requirements for the hospital librarian of today include the kind of training and intelligence that make it possible for her to assist that physical and chemical treatment of patients by prescription of reading...The rapid development in the psychiatric field of medicine has made the 'volunteer worker' in the hospital library of yesterday give way to the 'hospital librarian' of today, and bids fair to create a real need for the 'bibliotherapist' of tomorrow.³⁹

In the late 1930s there were attempts to move bibliotherapy into a clinical setting, through the work of psychiatrists Karl Menninger (1893-1990) and his brother William (1899-1966). Through the bulletin of the Menninger clinic in Kansas, William discussed a five-year programme of clinical bibliotherapy, incorporated into treatment of psychiatric patients in a pioneering experiment.⁴⁰ A specialist librarian, Jerome Schenck, was appointed at the clinic to oversee the project, which involved physician and librarian working systematically and closely together. The physician's responsibilities included prescribing patient assignments, discussing patients with the librarian, discussing reading with patients and conferring with the librarian about problems and results. The librarian's responsibilities included being familiar with available literature; maintaining the collection; interviewing patients about their reading assignments; and submitting a written report on each patient to the physician.⁴¹ While these initial plans and announcements seemed to herald a new phase for bibliotherapy, no conclusive results were announced and the project appears to have been quietly dropped. In the 1960s, Karl Menninger

³⁸ Dufour.

³⁹ Margaret Wallace, 'Bibliotherapy of Tomorrow,' *Library Occurrent* 13 (1941): 255.

⁴⁰ William Menninger, 'Bibliotherapy', *Bulletin of the Menninger Clinic* 1, no. 8 (November 1937): 263.

⁴¹ William Menninger, 1937, pp. 267_268.

announced that 'It is well nigh impossible to prove that reading has had a certain effect in a certain case.'⁴²

The challenge of incorporating bibliotherapy into a broadly psychoanalytic framework was taken up in the subsequent decade by Caroline Shrodes, who produced possibly the most prolific body of theoretical work in this period, beginning with a PhD dissertation which was considered a landmark publication in the field in its attempt to push bibliotherapy into the theoretical territory of the emerging 'psy-disciplines'.⁴³ Her writings positioned bibliotherapy as a mechanism for exploring psychic life, desires, and fantasies, since 'a variation of the transference may thus be evoked by the reading of imaginative literature.'⁴⁴ In a fusion of psychodynamic therapy and bibliotherapy, literature was the means to elicit a response from the reader. The book assumes the role of the analyst, or at least becomes a medium through which the dynamics of the analytic encounter can be staged, eliciting 'identification' 'projection' 'catharsis' and finally 'insight'.⁴⁵ As her work evolved, instead of imagining a clinic or hospital as a setting, Shrodes took bibliotherapy out of the institution altogether, positioning it hypothetically as part of everyday mental health. Where previous versions had imagined it as a means to treat pathologies of various kinds, Shrodes instead envisaged it as a form of therapy through which all subjects could work towards the ideal of a 'healthy personality'. 'Reading, like all other human behavior,' she explained, 'is a function of the total personality. When we read fiction or drama, no less than when we work, meet people, teach, create, or love, we perceive in accordance with our needs, goals, defenses, and values.'⁴⁶

This mid-century period, in retrospect, marks a high-water mark of bibliotherapy. After the 1960s, in to Dufour's account, the field bifurcated as theoretical work became separated from the actual practice of bibliotherapy. According to Laura Cohen, the interest in psychotherapy and psychoanalytic bibliotherapy declines, and there is a move towards a more instrumental model of self-help books underpinned by ideas of behaviourist psychology. There is some truth in both of these, but the picture is seems more fragmented and atomised. On the one hand bibliotherapy has gained a foothold in academia – a move which has conveyed a certain degree of intellectual respectability – but it has become geographically and conceptually disparate. The development of the field from the late twentieth century onwards has been uneven and difficult to trace, with successive phases distributed across different contexts rather than building incrementally on what went before. Centres of research activity exist which appear to have little overlap or dialogue with one another. At Liverpool University, the Centre for Research into Reading, Literature and Society (CRILS) has established itself as an authority, headed by Professor Phillip Davies and Dr Josie Billington. Both have backgrounds in the discipline of literature, and the emphasis of research has been into the effects of literary reading, although the centre positions itself, broadly, as part of the medical humanities. The bulk of recent academic publishing on bibliotherapy is usually in the form of quantitative studies or Randomised Control Trials, with a preponderance coming from the academic discipline of

⁴² Karl Menninger, 'Reading as Therapy,' *ALA Bulletin* 55, no. 4 (April 1961): 316.

⁴³ Caroline Shrodes, *Bibliotherapy: A Theoretical and Clinical-Experimental Study*, 1950.

⁴⁴ Caroline Shrodes, 'Bibliotherapy: An Application of Psychoanalytic Theory', *American Imago*, 17.3 (1960), 311–19 (p. 314).

⁴⁵ McCulliss, p. 27.

⁴⁶ Caroline Shrodes, 'Bibliotherapy,' *The Reading Teacher* 9, no. 1 (October 1955): 24.

psychology. This is an international phenomenon, and the USA is no longer the focus of activity. There are particular strengths in Sweden, for example, where the psychologist Per Carlbring is a central and much cited figure. These RCTs aim to establish the evidentiary basis for bibliotherapy, but in terms of rationale they tend to be narrowly focused, giving little space to mapping and defining the field. There is little sense that such contemporary work draws on or even acknowledges the formulations and ideas of earlier scholars and practitioners from the mid-twentieth century.

In some ways, the flourishing of bibliotherapy either side of the Second World War, with its sustained attempt to build a coherent field, seems an abandoned project, and its debates, theories and experiments have largely been forgotten. In its place are a set of discrete, competing versions of what bibliotherapy is. To some extent, the reasons for this are evident. These earlier versions of therapeutic reading tended to wrap themselves around ideas that are now unfashionable. The Menninger clinic drew it into now defunct notions of 'mental hygiene', for example, and the work of the Patient Library Movement, with its mission to teach and guide readers now seems paternalistic and outdated. Perhaps it is no surprise that in the later twentieth century, bibliography tended to migrate into the classroom and school library, where such ideas of overseeing and guiding reading practices were more palatable. In 1978, librarian Rhea Rubin's influential work *Using Bibliotherapy: A Guide to Theory and Practice*, classified bibliotherapy into just two categories: developmental (for educational settings) and therapeutic (for mental health settings).⁴⁷ Some definitions of bibliotherapy from this period even make the implicit assumption that children are the patient group.⁴⁸ Where Shrodes had written of the importance of a 'trained helper', Rubin assumed that most people would have minimal preparation or training for using the technique. And her guide, like much of the literature from the 1970s and onwards, is written for teachers, school librarians or occasionally child psychologists.

Contemporary bibliotherapy in the UK

In the twenty-first century, bibliotherapy has re-emerged in new guises and new contexts. In the context of the UK especially, the early 2000s were a fertile time for new models of bibliotherapy, Brewster and McNicol argue. But while it has grown in visibility, it has become simultaneously more diverse, and even harder to define with any precision. There is now no single dominant model but rather a set of parallel versions. The most widespread schemes have focused on self-help resources for diagnosed mental health conditions. The best known of these is Books on Prescription, which began in Wales with a pilot scheme in Cardiff in 2003, with UK-wide roll out following in 2005. The brainchild of psychiatrist Dr Neil Frude, the aim was to partner public libraries with health services, so that patients could be 'prescribed' specific books tailored to their particular needs, and could then take this prescription to their local library.

⁴⁷ Rhea Joyce Rubin, *Using Bibliotherapy: A Guide to Theory and Practice* (Oryx Press, 1978).

⁴⁸ See Sharon R. Morgan (1976) 'Bibliotherapy: A broader concept' in *Journal of Child and Adolescent Psychology*. Hoagland. More recently, Pardeck and Pardeck's collection, *Bibliotherapy* (Routledge, 1993) is specifically targeted at children.

Frude initially consulted clinical psychiatrists and psychologists in order to compile a list of recommended books, and in this sense the scheme deviated from previous models, in which bibliotherapeutic resources were compiled by librarians or library academics. It was a rapid success, however, quickly becoming the most widely used model of bibliotherapy in the country, with over 100 public library authorities having a scheme.⁴⁹ In 2013, the Books on Prescription scheme was rebranded and re-launched by The Reading Agency charity as 'Reading Well'. It is currently offered by 99 percent of UK public libraries (figure quoted in Brewster, as of 2021). It is no longer confined to self-help, however, and incorporates fiction and poetry in its annual list of 'Mood Boosting Books'.⁵⁰ These are supposedly 'uplifting titles', themed according to certain interest groups, but drawn mostly from popular contemporary fiction.

Books on Prescription's success clearly lay in its promise to helping patients access a form of therapy cheaply and instantly, when waiting lists for in-person therapy might be prohibitively long, and the therapists expensive. Brewster and McNicol remark that books have the benefit of being durable and 'cost-effective', and McCullis states that bibliotherapy is a more 'practical alternative for people with limited access to psychological services...Individuals in remote and rural communities, or those lacking adequate or affordable transport between major cities'.⁵¹ A more cynical observer might note that bibliotherapy's success might be seen as a marker of the NHS's failings, and that diverting patients with issues like anxiety and depression to the library rather than the pharmacy or to talking therapies is a symptom of a health service in crisis rather than one that is enlightened. Leah Price delivers a clear-eyed analysis of the reasons for its appeal in the UK, and the synergies involved not only between a struggling health service, but equally struggling cultural sectors: '[a] public library system suffering even more drastic budget cuts than the health service was in no position to turn away the foot traffic, funding, and legitimacy that Book Prescription supplied.'⁵² What Price calls the 'medicalisation' of literature is a phenomenon driven by socio-economic factors, therefore, outsourcing as it does the work of expensive medical professionals to 'underpaid librarians and cheap books.'⁵³

Whilst the impetus for Books on Prescription was initially provided by psychiatrists and psychologists, bibliotherapy schemes that focus on fiction and poetry are more often devised by those with expertise in literature or education. The 'Shared Reading' initiative is a prominent example. Initially called 'Get Into Reading', it was designed by Jane Davis, an English teacher in the Department of Continuing Education at the University of Liverpool who now heads The Reader organisation. Shared Reading, as its name suggests, is based around group reading and discussion of texts under the guidance of a facilitator, and has been adapted to work in a variety of settings from community centres and in patient wards to public libraries to prisons. Where Books on Prescription imagines bibliotherapy as a largely solitary activity, Shared Reading sees it as inherently communal, involving reading aloud and responding to the text in question. And while its mission is geared primarily towards improving well-being, this model of bibliotherapy

⁴⁹ Sarah McNicol and Liz Brewster, 'Bibliotherapy in the UK'.

⁵⁰ 'Mood-Boosting Books | Books | Reading Well' <<https://reading-well.org.uk/books/mood-boosting-books>> [accessed 8 April 2023].

⁵¹ McCulliss, p. 31.

⁵² Leah Price, *What We Talk About When We Talk About Books: The History and Future of Reading*, 1st edition (Basic Books, 2019), p. 207.

⁵³ Price, p. 207.

places heavy emphasis on works of literary fiction and poetry. The aim is not simply to read, but to read specific types of (largely canonical) texts which are considered to be beneficial by virtue of their literary qualities. In this sense, the work of The Reader organisation marks a return to earlier iterations of bibliotherapy, based implicitly around notions of literary value and self-improvement, and away from the more mechanistic models of self-help reading.

Brewster and McNicol identify a third model of bibliotherapy currently in use in a UK context, which they call the 'Kirklees model'. The 'Reading And You' Scheme, (later known as 'Well into Words'), was launched in Kirklees in West Yorkshire, and has operated in public libraries, and in day services and in-patient wards. This model of bibliotherapy is more diverse and 'person-centred', defined by its 'ethos, rather than a prescriptive list of its activities'.⁵⁴ It draws on a wide variety of resources (not only textual but audio-visual, music and song), and the precise nature of activities are tailored to specific patients, or decided by the members of particular group. As of 2018, the Kirklees scheme has developed into something called 'Words in Mind', which focuses on dementia and mental health problems, and is run in various care settings and residential homes. While words are in theory still the focus, in practice the priority is stimulating memory and recollection through a variety of stimuli, and the description of this scheme in action seems to stretch the definition of bibliotherapy to its limits. In some groups, a lot of time is given over to sharing of experiences in relation to the resources, while others focus more on the content of the resources shared. There is scope to engage with images, sensory resources (things to smell or touch), and reviewing song lyrics (and singing or listening to songs) alongside more traditional poems, short stories and extracts from novels.⁵⁵

While some of these activities and schemes are run in conjunction with health services, care homes and GP practices, what is notable is that all are primarily volunteer-run. Throughout its history bibliotherapy has always been reliant on volunteer work and unpaid labour to some extent, never succeeding in becoming completely professionalised. But it seems that the story of its success over the past two decades in a twenty-first century UK context is tied up with the charity sector's growing cultural prominence in health and wellbeing. The Reader organisation may have begun as a bibliotherapy scheme, but it is now a successful and high profile body with many adjacent activities and partnerships, which publishes its own reports and research into the effects of reading.⁵⁶ It is here, as much as in peer-reviewed scholarship or the professional journals of librarianship or psychology that bibliotherapy research is now published. In 2017, backed by the National Lottery Heritage Fund and Liverpool City Council, The Reader organisation carried out a multi-million pound refurbishment to a Grade-II listed mansion in Liverpool, and now runs a shop, café, venue, festival, podcast and magazine. It claims not simply to be about bibliotherapy, but a 'reading revolution', promoting the benefits of reading, and bringing serious literature to ordinary people.

There are many other voluntary organisations and community initiatives; too many to include in this report. But it is obvious that bibliotherapy, after a century of mutations and shifts,

⁵⁴ Liz Brewster and Sarah McNicol, 'Bibliotherapy in Practice: A Person-Centred Approach to Using Books for Mental Health and Dementia in the Community', *Medical Humanities*, 47.4 (2021).

⁵⁵ McNicol and Brewster, 'Bibliotherapy in the UK' p. 20.

⁵⁶ See, for example, a recent lengthy report with its own research findings compiled in collaboration with Guys' and St Thomas' Charity, 'What-Literature-Can-Do.Pdf' <<https://www.thereader.org.uk/wp-content/uploads/2022/11/What-Literature-Can-Do.pdf>> [accessed 8 April 2023].

is continuing to evolve and change, and to occupy new cultural and disciplinary spaces. It also seems that it has come to occupy some emerging, more hybrid and hard-to-define cultural locations. ReLit, the 'Foundation for Bibliotherapy' founded in 2016 by literature professor Jonathan Bate and his wife, author Paula Byrne has a series of aspects and activities that bridge research and practice. Its website endorses 'the complementary treatment of stress, anxiety and other conditions through slow reading of great literature, especially poetry', and it has undertaken RCTs in this area, using the organisation's own *Stressed/Unstressed* poetry anthology to test the effects of what it terms 'mindful reading'. It also ran (from 2016-2018) an online course under the auspices of Warwick University's Business Studies department, on the FutureLearn platform of the Open University.⁵⁷ Despite this supposedly academic setting, however the course appears to consist largely of online videos featuring Stephen Fry, Ian McKellen and other celebrities earnestly discussing the benefits of literature and poetry. Attempting to straddle popular culture and academia, ReLit might be seen, perhaps, as symptomatic of bibliotherapy's ambivalence in the twenty-first century. It is unclear whether this is a form of scholarship, recreation, public health or self-help. But the urgent rhetoric in which voluntary and third sector organisations like ReLit – but also The Reader, and The Reading Agency – frame bibliotherapy suggests that it might best be described as a social movement, driven as much by the passion of its adherents, as by scholarly research.

3. Does bibliotherapy have an underlying theory? Methods and methodologies

As seen above, bibliotherapy has taken different forms and operated in a variety of settings throughout its history – hospitals, clinics, libraries, classrooms, health centres, dementia wards and now online. In some of its incarnations a trained helper, a specialist therapist or a the guidance of a physician has been seen as a key feature, while in others it has not. Bibliotherapy has sometimes been imagined as a largely solitary activity, but, as with The Reader's 'shared reading' model, participation in group discussion is also seen as a central aspect. In short, there has never been any single, or even dominant model, and if anything the practice seems to be growing more disparate rather than developing towards a coherent and unified approach. This diversity makes the issue of methodology a difficult one to discuss as Jack and Ronan point out.⁵⁸ Despite all the data that seems to evidence its effectiveness in a variety of ways, there is no overall consensus as to how it should be practiced. This means that it is difficult to find a clear answer to the question of how it works, or identify a definitive 'theory of bibliotherapy'.

The selection of reading materials and literary genre would seem to be fundamental in formulating such a theory, but again, there is little consensus on this issue. Even the basic distinction between fiction and self-help books is something which has not often been the

⁵⁷ <https://www.relitfoundation.org/activity/conversations>

⁵⁸ Sarah J. Jack and Kevin R. Ronan, 'Bibliotherapy: Practice and Research', *School Psychology International*, 29.2 (2008), 161–82.

subject of explicit discussion. For John T. Pardeck and Jean A. Pardeck, in their definition of bibliotherapy, this distinction appears not to be a vital one, since they state that ‘both fiction and non-fiction can be used’.⁵⁹ Liz Brewster, in her more recent survey of the field in the UK, recognises the difference by dividing bibliotherapy into two categories: ‘self-help’ and ‘creative’.⁶⁰ While the former is dominated by the Books on Prescription scheme (now called Reading Well), she associates the latter approach with The Reader organisation, which prioritises the reading of poetry and fiction. Brewster suggests that these different models imply different modes of reading and different theories of efficacy. The methodology of self-help bibliography is broadly based on the model of cognitive behavioural therapy (CBT), using books that address and alleviate a number of specific conditions, typically anxiety, depression and stress. The theoretical framework underpinning ‘creative’ bibliotherapy is more complex and difficult to identify. This section concentrates on the criteria informing the selection of particular texts, and the larger question of why novels, poetry or other forms of literature might be seen conducive to health.

What is the ‘biblio’ in bibliotherapy? Criteria for book selection

Josie Billington’s 2016 book *Is Literature Healthy?* is one of the few book-length studies of bibliotherapy, and also a rare attempt to provide a sustained and detailed account of how bibliotherapy actually works, and why the reading of a certain type of literature might be crucial to its method or efficacy. Based at the Liverpool Centre for Research into Reading Literature and Society (CRILS), which has close links with The Reader organisation, Billington’s book can be seen in light of these connections in that it provides a rationale for contemporary ‘creative bibliotherapy’. It is clear that, for Billington, the key distinction is not simply one of ‘creative’ versus ‘self-help’, or fiction versus non-fiction, but one of literary value. For Billington, literature of a serious, canonical variety is important in its ability to explore difficult states and feelings. It represents an alternative to the creeping ‘medicalization’ of depression. Where medicine sees depression as something that can and should be treated or cured, literature offers another perspective:

[I]n its deeper languages of experience, as emotion, [literature] radically challenges the conventions of health professional’s view that sufferers diagnosed with depression are medically ill. It allows sufferers themselves a representations of sadness as a human norm.⁶¹

⁵⁹ Although they state that ‘behaviourally oriented reading materials, in the form of self-help books, have the greatest empirical support as successful clinical tools’. John T. Pardeck and Jean A. Pardeck, *Bibliotherapy: A Clinical Approach for Helping Children*, Bibliotherapy: A Clinical Approach for Helping Children (Amsterdam, Netherlands: Gordon and Breach Publishers, 1993), pp. xiii, 146 (p. 12).

⁶⁰ Liz Brewster, ‘Books on Prescription: Bibliotherapy in the United Kingdom’, *Journal of Hospital Librarianship*, 9.4 (2009), 399–407 (p. 400).

⁶¹ (Billington, 3) Josie Billington and Josie Billington, *Is Literature Healthy?: The Literary Agenda*, The Literary Agenda (Oxford, New York: Oxford University Press, 2016), p. 3.

Billington is explicit in not only in her choice of literature, but in her rationale. Her book concerns itself with nineteenth century realist novels, with *Middlemarch* and *Anna Karenina* for instance, because they can do things that self-help books cannot: '[w]hat these literary texts offer, by contrast with modern self-help guides, is the unbalancing thought that in order to learn from experience, the evolutionary process may well have to be gone through again and again, at every new stage of life'.⁶² George Eliot and Tolstoy, she insists, are '[l]iterature's best witnesses of how there are no shortcuts in real thinking'.⁶³ What sets this apart from many approaches to bibliotherapy is Billington's insistence that reading does not make states such as depression 'better', but rather enables the reader to bear them, and by providing a language in which they can be comprehended and faced. She states that 'a book can have thoughts that humans cannot have' and that literature has a power to 'hold thoughts which humans feel it would almost kill them to contain in themselves'.⁶⁴ Drawing on the work of psychoanalyst Wilfred Bion, Billington makes a distinction between disruptive or unprocessed 'thoughts', and the difficult task of 'thinking' them. Literature is a medium through which such thinking can be performed, confronting and working through things that would otherwise be suppressed. Billington frames a theory of bibliotherapy in terms of what she calls 'literary thinking'.

This merging of literature, psychoanalytic concepts and bibliotherapy has an obvious precursor in the work of Caroline Shrodes in the 1950s and 1960s. (Although, in another example of bibliotherapy's characteristic amnesia, Billington's book contains no mention at all of Shrodes, or indeed of any other precursors in the field.) Shrodes drew not on Bion but on Freud, whose own theories of literature seemed to contain the germ of a certain kind of bibliographic thinking:

Freud describes the power of the imaginative artist to order the judgement of the reader and redirect his emotions [...] 'the storyteller has a peculiarly directive influence over us, by means of the states of mind into which he can put us, and the expectations he can arouse in us, he is able to guide the current of our emotions, dam it up in one direction and make it flow in another.'⁶⁵

Shrodes, too, placed importance on canonical literature as the means of eliciting profound psychological responses. In the anthology *Psychology Through Literature* she included literary selections from William Shakespeare, Jean-Jacques Rousseau, Gustave Flaubert, Fyodor Dostoyevsky, Virginia Woolf and James Joyce. Shrodes's approach anticipates Billington in its confidence that the depth of experience conveyed in such literary narrative has the power to connect with and shape the consciousness of the reader. Having followed Marcel Proust's narrator's experience, for example, Shrodes suggested the reader might embark on other experiences of his own, but with greater awareness of his own mind, and the interrelations of

⁶² Billington, p. 30.

⁶³ Billington, p. 30.

⁶⁴ Billington, p. 44; p. 31.

⁶⁵ Caroline Shrodes, 'Bibliotherapy: An Application of Psychoanalytic Theory', *American Imago*, 17.3 (1960), 311–19 (p. 315).

memory and consciousness.⁶⁶ There are differences however, Shrodes' selection is noticeably broader than Billington's both in terms of period and style, incorporating essays, drama and modernist experimental prose as much as nineteenth-century realist novels. For Billington, early modern drama, like modernist experiment, is a deliberate exclusion, since it 'would not serve equally well to demonstrate what is essential and vital in the problems of thinking and mind'.⁶⁷

This concern with literary and the canonical is prefigured in some earlier versions of bibliotherapy, although its value is implicit in the practice of bibliotherapists rather than explicitly theorised. Sara Haslam and Edmund King note, for example, that there was a good deal of commentary about the reading tastes of convalescing First World War soldiers. Beatrice Harraden, librarian at the Endell Street military hospital, reported that patients constantly requested popular novels about horse racing and sport by Nat Gould, but made no secret of the fact she wanted them to widen their reading. Taste was encouraged to grow, rather than required, and she made sure 'good books' were always within reach.⁶⁸ Meanwhile, an article published in *The Times* in April 1915, entitled 'What to read the wounded', claimed that 'a highly trained nurse' had warned against delivering the soldiers' preferred diet of detective novels and adventure stories. Such overstimulating reading matter could be unhealthy for the wounded, but the work of Jane Austen proves to be 'as soothing to the pulse as might be a walk to a convalescent through the half-deserted rooms of Kensington Palace'.⁶⁹

This question of what reading matter was considered 'healthy' needs to be framed in the larger context of pre-war Edwardian debates surrounding the value of books in society, argues Marcella P. Sutcliffe. The First World War shaped and widened existing debates in an ongoing battle for education and 'high culture'. It was within this debate that what Sutcliffe calls 'humanities activists' sought to play a role.⁷⁰ The idea that a certain type of canonical literature could be 'improving' was inextricably entwined with bibliotherapy, and indivisible from notions of health and wellbeing. Nor is this notion is not confined to early twentieth century, of course. It persists in discourse about literary value to the present day, and perhaps even still finds its way into bibliotherapy. The Reader's 'reading revolution' for example, is not simply a health-based initiative, but a wider ambition to bring reading – and specifically literary reading – into ordinary communities and everyday life, into contexts outside the HE academy.⁷¹

This concern with cultural value and the canon is far from universal in the literature of bibliotherapy, however. For Benjamin Rush and John Minson Galt, working in the context of nineteenth-century mental asylums, the choice of books was based on different criteria. Galt's 'On Reading, Recreation and Amusements for the Insane' emphasized keeping patients docile and occupied, which did not require the use of fiction, and Galt's preferred genres were instead

⁶⁶ Caroline Shrodes, Richard W. Husband, Justine Van Gundy, (eds.) *Psychology Through Literature: An Anthology* (OUP, 1943), p. 64.

⁶⁷ Billington, p.18.

⁶⁸ Haslam and King, p. 306.

⁶⁹ 'Anon, 'What to Read the Wounded', *The Times* (April 20, 1915), 6. Quoted in Haslam and King, p. 301.

⁷⁰ Marcella P. Sutcliffe, 'Reading at the Front: Books and Soldiers in the First World War', *Paedagogica Historica*, 52.1–2 (2016), 104–20 (p. 105).

⁷¹ The Reader organisation's website describes the need for a 'reading revolution' in terms of literature's potential to address wider social problems: 'We believe that literature's unique power has the potential to connect individuals, help us feel better and to rebuild lost social bonds.' 'About Us', *The Reader* <<https://www.thereader.org.uk/about-us/>> [accessed 12 April 2023].

travel, biography, history and polite letters (the reading of newspapers was encouraged, with the proviso that stories of murder and suicide were censored).⁷² Works of fiction should be in the minority, avoiding any with 'immoral tendencies, and confined to the work of certain authors: Sir Walter Scott, Maria Edgeworth and the now-obscure Martha Sherwood (an author of moral and religious stories for younger readers)'.⁷³ Rush was slightly better disposed to fiction, although its chief benefit was that it contained a series of events which 'arrest the attention, and cause the mind to forget itself.'⁷⁴ The lengthy prose of a novel was in preference to any reading that involved rapid changes in topic, a particular danger with journals and periodical literature: 'the debilitating effects of these sudden transitions upon the mind are sensibly felt after reading a volume of reviews or magazines.'⁷⁵ Foreshadowing modern ideas that reading books combats the distractions of technology, Rush argued that long novels could help to fix the mind on one topic.

From the 1930s, the Patients' Library Movement promoted the reading of novels in hospital, but considerations of literary merit or canonical status were not paramount. Its recommendations were issued via the regular Hospital Book Guide (a mimeographed pamphlet sponsored by the American Libraries Association), and was largely a list of recently published, popular and middlebrow fiction which would appeal to broad tastes. For the benefit of hospital librarians, these were tailored to particular kinds of patients, although many recommendations seems to be made along lines of gender or age as much as particular pathologies. There are also books listed with warnings that they contain disturbing or overstimulating plot and themes. Like Minson Galt, the work of the Patients' Library Movement had a tendency to emphasise the prohibition as much as the provision of books, if for different reasons. One Hospital Book Guide, from 1946, contains the listing for a novel called *Deliver Me from Eva*, by Paul Bailey:

a gruesome and fantastic yarn about a lawyer who marries a strange and beautiful girl. He falls into the clutches of her legless, earless father, an evil genius who claims to create marvellous human intelligence by cranial manipulation. There are horrible murders, cremations and raving maniacs. Not for patients.⁷⁶

The texts listed by William Menninger in his clinical bibliotherapy programme contains less sensational fare, but perhaps equally populated with the period's bestsellers and popular, middlebrow fiction: Pearl Buck's *Exile*, Margaret Mitchell's *Gone with the Wind*, Zane Grey's Westerns, and Edward Everett Hale's 'A Man Without a Country', a short story first published in *The Atlantic* in 1863.⁷⁷ These appear to have been chosen by patients themselves, rather than prescribed, as does the selection of what Menninger refers to as 'mental hygiene literature', but

⁷² John Minson Galt, 'On Reading, Recreation and Amusements for the Insane' (1853) quoted in P. J. Weimerskirch, 'Benjamin Rush and John Minson Galt, II: Pioneers of Bibliotherapy in America', *Bulletin of the Medical Library Association*, 53.4 (1965), 510 (p. 517).

⁷³ Weimerskirch, p. 521.

⁷⁴ Benjamin Rush, *Medical Inquiries and Observations upon the Diseases of the Mind* (1812) quoted in Weimerskirch, p. 513.

⁷⁵ Benjamin Rush, quoted in Weimerskirch, p. 512.

⁷⁶ *Hospital Book Guide*, July 1944, quoted in Dufour, p. 43.

⁷⁷ William Menninger, p. 270.

what we might now call self-help, or pop psychology: Bernard Hart's *Psychology of Insanity*, Myerson's *The Nervous Housewife*, Pratt's *Your Mind and You*, Appel's *Discovering Ourselves* and Karl Menninger's *The Human Mind*.⁷⁸ This list adds weight to Monique Dufour's claim that the range of reading matter in use in bibliotherapy from the 1930s to the 1960s was broader than in contemporary practice, involving popular fiction, biographies, non-fiction, and literature both Classical and modern.⁷⁹ It is evident that by the 1930s, self-help literature has begun to join this list, and is developing in synergy with bibliotherapy, in the sense that books are increasingly seen as a technology that can not only entertain but educate, and shape and heal the self in targeted, specific ways.⁸⁰ Despite this capacious list, there was one prohibition in Menninger's programme: the Bible. Religious reading of any kind 'appeared to increase, rather than decrease the mental illness'.⁸¹ The Bible, it turns out, is something that bibliotherapy has historically avoided in case it promoted delusions, even in the nineteenth century mental asylum, with all its moral strictures.

In its later development, as bibliotherapy was incorporated into child psychology, other criteria began to emerge. Reading should be appropriate to age, and should also be tailored to the experience and particular issues and experiences of the reader. In considering the applications of bibliotherapy in the classroom in 1976, Morgan argues that books have to be chosen carefully in order to provide children with material they can relate to. There are risks to this, since she acknowledges that children's books often convey powerful and conservative messages about gender and race that can be detrimental to a child's self esteem and self image. She gives the obvious example of *Little Black Sambo*, but also the stereotyped gender roles in adventure stories.⁸²

Fiction-reading and bibliotherapy

The analogy between books and drugs is a tempting and obvious one to make in relation to bibliotherapy. It was a frequent theme in the early development of the field. More recently such direct comparisons have fallen out of favour and perhaps that is no surprise, since they beg some awkward questions.⁸³ If books are a kind of medication, what is their active ingredient? What effects does reading have and how exactly does it work? Bibliotherapy has operated on different models and selected books according to different criteria. In the nineteenth and early twentieth century the aim appeared to be the pacification of patients, keeping them occupied and 'soothing' them, and avoiding over-stimulation. From the 1930s onwards, this is superseded by ideas of 'identification'. For William Menninger, whatever its subject matter or fictional status, a book is an opportunity for 'identification of the patient with some particular character or

⁷⁸ William Menninger, p. 263.

⁷⁹ Monique Dufour, p. 11.

⁸⁰ See Beth Blum for more on the emergence of self-help as a genre, *The Self-Help Compulsion: Searching for Advice in Modern Literature* (Columbia University Press, 2020).

⁸¹ William Menninger, p. 273.

⁸² Sharon R. Morgan, 'Bibliotherapy: A Broader Concept', *Journal of Clinical Child Psychology*, 5 (1976), 39–42 (p. 40).

⁸³ The metaphor persists in the recent 'Books on Prescription' scheme, but in a looser way. Books are prescribed in place of – rather than as – medication.

experience [...] He may obtain relief from the recognition that other people have problems similar to his own.'⁸⁴ This, as far as he is concerned, is a key method through which bibliotherapy works. He goes on to describe how:

one elderly patient, who felt that her family had deserted her, found great satisfaction in reading Pearl Buck's *Exile*. The struggle that the author's mother experienced stimulated the patient to write of her own mother, but it was apparent she was writing a good deal about herself [...] Still another patient was very definitely benefited from reading Ludwig's *Marie Antoinette*. In this instance the patient had been told with her husband that he would not live with her again, and she identified herself with Marie Antoinette, feeling that the heroine was unappreciated and that the king should have been in Marie's shoes.⁸⁵

This principle of identification is the common thread running through much of bibliotherapy. Similar variations on this idea that readers might understand their own predicaments or problems by seeing themselves reflected in fiction can be found everywhere throughout the literature from the pre-war period to the present day. Gottschalk writes that the patient is able to recognise his own problems 'in the vicissitudes of others' while Appel states that 'bibliotherapy may offer opportunities for identification and compensation.'⁸⁶ For Barbara Griffin, writing in 1984, '[when] therapists use fiction in bibliotherapy, clients read about a character facing a problem similar to their own'.⁸⁷ A decade later, Laura Cohen states that 'the experience of therapeutic reading emerged from readers recognising themselves in literary characters.'⁸⁸ John T. Pardeck states that one of bibliotherapy's key goals is 'to create awareness that others have dealt with similar problems'.⁸⁹ Even Shrodes's more sophisticated psychodynamic framework bases its notions of bibliotherapy's functioning on identification with fictional characters:

an eighteen-year-old boy who had never before experienced any sense of personal involvement in his reading confronts himself in Sherwood Anderson's *Weinsberg Ohio*. His comment betrays both his shock of discovery and his implied distaste: 'the stories gave me a frightened doubt that I myself was being portrayed in exaggerated fashion.'⁹⁰

⁸⁴ William Menninger, p. 270.

⁸⁵ William Menninger, p. 271.

⁸⁶ L. A. Gottschalk, 'Bibliotherapy as an Adjuvant in Psychotherapy', *The American Journal of Psychiatry*, 104.10 (1948), 632-37 (p. 632). Kenneth E. Appel, 'Psychiatric Therapy', in *Personality And The Behavior Disorders - Vol II* pp. 1107-63. Edited by McV. Hunt, 1944. Quoted in David H. Russell and Caroline Shrodes, 'Contributions of Research in Bibliotherapy to the Language-Arts Program. I', *The School Review*, 58.6 (1950), 335-42 (p. 337).

⁸⁷ Barbara K. Griffin, *Special Needs Bibliography: Current Books For/About Children and Young Adults Regarding Social Concerns, Emotional Concerns, the Exceptional Child* (The Griffin, 1984).

⁸⁸ Laura J. Cohen, 'Phenomenology of Therapeutic Reading with Implications for Research and Practice of Bibliotherapy', *The Arts in Psychotherapy*, 21.1 (1994), 37-44 (p. 39).

⁸⁹ J. T. Pardeck, 'Using Literature to Help Adolescents Cope with Problems', *Adolescence*, 29.114 (1994), 421-27 (p. 421).

⁹⁰ Caroline Shrodes, 'Bibliotherapy: An Application of Psychoanalytic Theory', p. 316.

It would be reductive to argue that Josie Billington's recent work revolved around identification in any straightforward way, and her theory of 'literary thinking' might be considered an attempt to move bibliotherapy beyond this model. But the idea lingers nonetheless in her choice of texts. The nineteenth-century realist novel is chosen as the genre in which readers can best recognise their own psychological dramas, difficulties and processes. There is an assumption that this mode of realism is not just a literary style from a particular era, but holds a mirror up to nature, that it provides direct access to the truth of human existence, and presents a fictional world in which readers can find and explore themselves.

More recently, this theory of identification has been updated along different lines, as it has merged with cognitive psychology's 'theory of mind' and the notion that fiction can help the reader become more empathetic.⁹¹ At the University of Toronto, Professor Keith Oatley has been investigating the psychology of fiction from this perspective: 'we have started to show how identification with literary characters occurs; how literary art can improve social abilities, how it can move us emotionally and prompt changes of selfhood.'⁹² The field of bibliotherapy, in so far as it uses fiction, has not moved beyond this rationale of identification, but rather seeks to find more scientific evidence for its workings.

Criticism and debate

How far can such ideas about identification and empathy be a theoretical basis for bibliotherapy, and how far are they simply a hypothesis based on widely accepted assumptions? Bibliotherapy's struggle for theoretical rigour was the topic of much debate in the early decades of its development. In 1939, Columbia University Library School professor Alice I. Bryan posed the question 'Can there be a science of bibliotherapy?'⁹³ Most of the work in the field was based on 'untested assumptions', she wrote, urging that bibliotherapy 'must pass beyond the anecdotal stage in formulating principles and proceed to scientific experimentation.'⁹⁴ Bryan's question was one that the literature of bibliotherapy returned to many times in the following decades. There were concerted efforts during this period to impart rigour to bibliotherapy, or at least to reflect on issues of method. But there was also evidence of uncertainty: librarians began to affix question marks to the end of the confident announcements in so many titles in the literature: "Curing Through Reading?"⁹⁵

⁹¹ Raymond A. Mar, Keith Oatley, and Jordan B. Peterson, 'Exploring the Link between Reading Fiction and Empathy: Ruling out Individual Differences and Examining Outcomes', *COMM*, 34.4 (2009), 407–28. David Comer Kidd and Emanuele Castano, 'Reading Literary Fiction Improves Theory of Mind', *Science*, 342.6156 (2013), 377–80.

⁹² Keith Oatley, *Such Stuff as Dreams: The Psychology of Fiction* (Wiley-Blackwell, 2011). Quoted in Ceridwen Dovey, 'Can Reading Make You Happier?', *The New Yorker*, 9 June 2015 <<https://www.newyorker.com/culture/cultural-comment/can-reading-make-you-happier>> [accessed 12 April 2023].

⁹³ Alice I. Bryan, 'Can there be a Science of Bibliotherapy?', *Library Journal* 64 (October 15, 1939): 773–776.

⁹⁴ Alice I. Bryan, 'Can there be a science of bibliotherapy?', quoted in Armando R. Favazza, 'Bibliotherapy: A Critique of the Literature *', *Bulletin of the Medical Library Association*, 54.2 (1966), 138–41 (p. 138).

⁹⁵ Dufour, p. 27.

Some two decades later, Armando Favazza returned to Bryan's question, giving an unsparing assessment of the state of bibliotherapy, which he claimed was little more than commonplaces and assumptions given the veneer of scientific method: 'the truth of the matter is that the vast majority of the literature on bibliotherapy is repetitiously shallow, anecdotal, unscientific, conjectural, confusing, propagandistic and static.'⁹⁶ Models of how bibliotherapy may help were still based on rather common sense psychiatric arguments rather than clinical case study. Authors had a tendency to leap from their own experience of a limited number of cases to large-scale hypotheses and dicta. Questions about the nature of reading were still unanswered. It was not exactly clear what was being 'dispensed' through bibliotherapy and how exactly it works. It was not even clear how and why reading, as opposed to some other aspect of the bibliotherapeutic encounter, was the catalyst for change. Other commentators neatly sidestepped Bryan's question. For William K. Beatty, the lack of a satisfactory scientific method was less concerning if bibliotherapy was given the status of an 'art' and not a science, and situated within librarianship.⁹⁷

In the intervening years, this debate has faded from view and sceptical voices like Favazza's are harder to find among contemporary commentators on bibliotherapy. Yet these questions about bibliotherapy's rigour, methodology and status are far from resolved. Julie Latchem and Janette Greenhalgh strike a measured note of recent criticism, observing that the role of reading in wellbeing is an under-researched area and 'the results should be viewed with caution due to the lack of randomisation, the small numbers of participants involved, and the limited and heterogeneous evidence base'.⁹⁸ A 2022 article on quantitative methods begins with the observation that 'bibliotherapy is under-theorized and under-tested: its purposes and implementations vary widely, and the idea that 'reading is good for you' is often more assumed than demonstrated'.⁹⁹

And if bibliotherapy is still vulnerable to much the same criticisms, these continue to be answered with the same note of cautious optimism about its future potential. In 1940, Gordon Kamman wrote that 'the science of bibliotherapy is still in its infancy but ... has possibilities for development far beyond the dreams of even its most ardent enthusiasts.'¹⁰⁰ In 1994, Laura Cohen made the same observation: 'research on bibliotherapy is still in its infancy and the term bibliotherapy is poorly conceptualized'.¹⁰¹ In 2008, Sarah Jack and Kevin Ronan urge that the discipline of bibliotherapy 'holds promise', but 'must continue to strive toward more systematic research and evaluation'.¹⁰² This idea that more work still needs to be done is an established refrain and, having passed its centenary, bibliotherapy continues to be seen as an infant discipline, yet to achieve its potential. Similarly, there continue to be counterpoints to this

⁹⁶ Favazza, p. 138.

⁹⁷ William K. Beatty, 'A Historical Review of Bibliotherapy', 1962, p. 114.

⁹⁸ Latchem JM, Greenhalgh J. The role of reading on the health and well-being of people with neurological conditions: a systematic review. *Aging Ment Health* 2014;18: 731-44

⁹⁹ 'Quantitative Methods for Group ... | Wellcome Open Research' <<https://wellcomeopenresearch.org/articles/7-79>> [accessed 12 April 2023].

¹⁰⁰ Gordon Kamman, 'Balanced Reading Diet Prescribed for Mental Patients', *Modern Hospital* 55, no 5 (Nov 1940). Quoted in Dufour, p. 46.

¹⁰¹ Cohen, p. 38.

¹⁰² Jack and Ronan, p. 161.

criticism which echo William K. Beatty in arguing that bibliotherapy does not need to struggle for scientific rigour since it deals with matters much more ineffable and unquantifiable. Jonathan Bate and Andrew Schuman suggests that striving after evidence is beside the point. Perhaps the kind of 'hard data' that scientists hunger for is not available, and instead, what matters is the 'testimony of centuries of readers.'¹⁰³

These tensions remain unresolved, but ultimately, such issues are inextricable from questions of discipline. Where exactly does bibliotherapy belong? What kind of data does it produce? What kinds of theories and methods of evaluation are appropriate to it? Since one of the features of contemporary bibliotherapy is its increasingly distributed nature, parcelled out between the fields of librarianship, education, mental health, psychology, and the medical humanities, these questions are becoming ever more complex. But perhaps they were always impossible to answer because bibliotherapy itself promises to blur the distinctions between disciplines and modes of thought. As Dufour perceptively argues, it is a 'unity narrative', bringing together science and culture, and claiming the book for disciplines such as medicine, psychology and education.¹⁰⁴ It gained traction because of the power of this narrative, 'because people believed in it and pursued it in sustained professional projects'.¹⁰⁵ Rather than looking for a coherent theoretical framework and method, perhaps we need to understand bibliotherapy in terms of this broader investment in reading and its presumed value. Literature is seen to intuit wisdoms about humanity which are deeper than science, but at the same time there is a desire to validate this knowledge through scientific method, and to bring the two together. In the words of Caroline Shrodes: 'the novelist and playwright have plumbed the deep reaches of man's nature and often anticipated the discoveries of science'.¹⁰⁶ Yet this promised synergy of science and literature is elusive, and bibliotherapy has always struggled to reconcile the irreconcilable: on the one hand the opaque and complex process of reading, and on the other hand the demand for scientific evidence.

4. Bibliotherapy, literary studies and the history of reading

Bibliotherapy would seem to have an obvious affinity – or at least a proximity – to literary studies, and yet, as has already been noted, the relationship is a fraught one. In the case of Josie Billington's recent book, bibliotherapy in fact sets out its rationale by establishing distance from a discipline of literature in which the dominance of 'theory' and analysis have left no room for more traditional humanist notions of the effect of reading on the self. This section examines the relationship from the other side, looking at how recent work in literary studies has either addressed bibliotherapy directly, or provided contexts in which it might be understood. In

¹⁰³ Jonathan Bate and Andrew Schuman, 'Books Do Furnish a Mind: The Art and Science of Bibliotherapy', *Lancet*, 387.10020 (2016), 742–43 (p. 743).

¹⁰⁴ Monique Dufour, p. ii.

¹⁰⁵ Monique Dufour, p. 2.

¹⁰⁶ Shrodes, 'Bibliotherapy: an Application of Psychoanalytic Theory.' p. 311.

particular, it begins by considering work by Jessica Pressman, Leah Price and Deidre Lynch, whose approach to literature is focused on the history of books and reading, and whose themes have a bearing on bibliotherapy.

Jessica Pressman's *Bookishness* charts the emergence of a particular nostalgic fixation with – and even fetishisation of – the book in the contemporary era.¹⁰⁷ In the age of digital technology and disconcerting change, the printed book – reassuringly physical and old-fashioned – has been positioned as a guarantor of enduring human values, even as it is threatened with extinction. Pressman cites Sven Birkerts' 1994 *The Gutenberg Elegies: The Fate of Reading in an Electronic Age* as an early example of this impulse to celebrate the book while lamenting its demise.¹⁰⁸ Birkerts' real concern is the imagined loss of a certain kind of reading, since our increasing reliance on screens brings with it a more superficial set of reading habits, lacking not only the sustained focus but also the immersive engagement with literature in print. The printed book is of course still alive and kicking, well over two decades on, but this at once wistful and elegiac narrative is the dominant cultural mode towards the book. Tracing it through literature and culture more broadly, Pressman notes that books have become a supposed 'refuge' and safe haven from the perceived encroachments of modern digital life.

The spatial metaphors are telling. The 'depth' of immersion in a book provides a space of escape, in contrast to the shallowness and superficiality of screen reading. The former, as described by Birkerts, is both sustained and sustaining, while the latter is distracted and fragmented, in line with the now-familiar idea that digital life involves a loss of focus and concentration. One significant problem with this notion, Pressman points out, is that anxieties about superficial and fragmented reading practices are not new, and in fact are as old as the codex itself. The book historian Peter Stallybrass has argued that the most important feature of the codex book as opposed to the scroll is an ability to skip between pages, to move back and forth and read not sequentially but in disjointed fragments.¹⁰⁹ Dennis Duncan's recent *Index, A History of The*, also makes the point that the printed index in the medieval period brought with it criticisms about superficial reading and knowledge which sound very similar to today's anxieties about digital reading.¹¹⁰ The codex book was once a technological innovation, as these historical insights make clear, but it is now recast as something unchanging and enduring, and as a bulwark against the march of newer technologies.

Leah Price's *What We Talk About When We Talk about Books* traces a long list of more recent studies that have followed in the footsteps of Sven Birkerts, casting the book 'as both savior and martyr' and reading as something 'out of step' with the present, which promises to rescue us from the twenty-first century's accelerated change and all its associated problems.¹¹¹ She cites David Ulin's *The Lost Art of Reading: Why Books Matter in a Distracted Time* (2010), Alan Jacobs's *The Pleasures of Reading in an Age of Distraction* (2011), David Mikics's *Slow Reading in a Hurried Age* (2013), Martha Pennington and Robert Waxler's *Why Reading Books*

¹⁰⁷ Jessica Pressman, *Bookishness: Loving Books in a Digital Age* (Columbia University Press, 2020).

¹⁰⁸ Sven Birkerts, *The Gutenberg Elegies* (New York: Faber and Faber, 2006).

¹⁰⁹ Peter Stallybrass, 'Books and Scrolls: Navigating the Bible', in *Books and Readers in Early Modern England* eds. Anderson and Sauer (University of Pennsylvania Press, 2012).

¹¹⁰ Dennis Duncan, *Index, A History of The* (S.I.: Allen Lane, 2021).

¹¹¹ Leah Price, *What We Talk About When We Talk About Books: The History and Future of Reading*, 1st edition (Basic Books, 2019).

Still Matters: The Power of Literature in Digital Times (2017), and Meghan Cox Gurdon's *The Enchanted Hours: The Miraculous Power of Reading Aloud in the Age of Distraction* (2019).¹¹²

You'll have noticed that the "in" around which each title pivots counterpoints reading to an "age" or a "time." While each book links the decline of reading to a different category of problem – political (Ulin), spiritual (Jacobs), moral (Mikics), social (Pennington and Waxler), or developmental (Gurdon) – all ask reading to counteract not just the problems that characterize their moment in history but also, more fundamentally, the very fact of historical change.¹¹³

Like Pressman's *Bookishness*, Price's study is a piece of popular scholarship from the field of book history, able to critically interrogate contemporary reverence for the book by contrasting it with the very different ways that reading has historically been constructed. The irony, as Pressman points out, is that precisely the kind of immersive reading held up as a positive feature of the book was once considered to be its biggest threat. In the nineteenth century there were 'fears about the dangerous physical and mental effects young women faced because of their novel reading-the very kind of immersive reading Birkets and Carr praise-are just one familiar point of evidence that reading has never been understood as good for all people'.¹¹⁴ Price goes further, directly contrasting reading's murky past with the almost universal twenty-first century assumption that reading is beneficial.

Price devotes an entire chapter, 'Prescribed Reading', to the theme of reading and health, in a rare example of book historical scholarship engaging directly with the theme of contemporary bibliotherapy. She traces a recent history of bibliotherapy, beginning with the emergence of the Books on Prescription scheme in 2005 in Cardiff. Given that Price herself is American, it is worth observing that her account of bibliotherapy is focused on a UK context, presumably because it is more embedded in the culture and institutions of healthcare. Price is particularly interested in its adoption by the NHS, delivering a more critical cultural and analysis than is found anywhere else in recent literature about bibliotherapy. While bibliotherapy itself presents its influence as benign, what strikes Leah Price by contrast is the coercive and ever more ubiquitous influence of this reading for health discourse. Reading has been medicalised, and placed in the service of mental and physical well-being, but also 'institutionalized, as state-funded agencies are weighing in ever more systematically on whether to read and what to read.'¹¹⁵

Price also delivers a rare critical analysis of the logic behind the kind of reading matter recommended by bibliotherapy. While Books on Prescription and the Reading Well scheme

¹¹² David Ullin, *The Lost Art of Reading: Why Books Matter in a Distracted Time* (Sasquatch Books, 2010); David Mikics, *Slow Reading in a Hurried Age* (Cambridge, Massachusetts: Harvard University Press, 2013); Alan Jacobs, *The Pleasures of Reading in an Age of Distraction* (New York: OUP USA, 2011); Martha Pennington, and Robert Waxler, *Why Reading Books Still Matters: The Power of Literature in Digital Times* (2017); Meghan Cox Gurdon and Kate McCabe, *The Enchanted Hour: The Miraculous Power of Reading Aloud in the Age of Distraction* (2019).

¹¹³ Price, p. 47.

¹¹⁴ Pressman, p. 58.

¹¹⁵ Price, p. 209.

focused largely on self-help books, ‘within three months, English libraries had lent over 100,000 copies of the prescribed titles – 20,000 more than *Fifty Shades of Grey*.’¹¹⁶ Price also notes some other surprising inclusions. Reading Well’s strand of ‘Mood Boosting Books’ consists of fiction, poetry and memoir that tackle themes of mental health in various ways (Mark Haddon’s *A Spot of Bother*, for example), and books which depict reading itself as a consolation or communal activity (*The Guernsey Literary and Potato Peel Pie Society* by Mary Ann Shaffer and Annie Barrows). However, it also includes Alice Munro’s short stories about the power of literature to unsettle and disturb, which Price sees as evidence of confused rationale or even misunderstanding of Munro’s themes: ‘One wonders if the person who added Munro’s collection to the list of Mood-Boosting Books got past its title page’.¹¹⁷ This conjunction of literature and self-help has a certain irony to it from a historical perspective, since the earliest self-help literature specifically warned against the reading of novels, (Samuel Smiles’ *Self-Help* likened it to ‘dram-drinking’).¹¹⁸ In fact, as Prince points out, while there is nothing new in the NHS’s idea that novels can affect body and mind:

for most of the Gutenberg era, that effect was rarely thought to be for the better. Mood-Boosting Books reverses half a millennium’s worth of campaigns against fiction waged first by churches, then by schools, and, eventually, by the public libraries founded in the nineteenth century that rationed the number of novels a borrower could take out but allowed all-you-can-read essay borrowing.¹¹⁹

Price’s analysis offers some valuable and much needed historical context for contemporary bibliotherapy. Our now blanket assumptions about reading’s beneficial effects were, until relatively recently, not only absent but completely the opposite. Well into the nineteenth century, Price points out, doctors were more likely to think novels caused madness rather than cured it. And while modern parents struggle to persuade teenagers to read for their own wellbeing, in 1883 in New York it was forbidden by law to give any minor under the age of sixteen a ‘dime novel or work of fiction’.¹²⁰

The historical picture of reading that Price provides is almost an exact mirror image of bibliotherapy. Reading and pharmaceuticals were once aligned very differently to today, with books being perceived as a harmful, dangerous and addictive kind of drug rather than a beneficial one. She locates the beginnings of a shift in attitudes in Sadie Peterson Delaney’s 1938 article, ‘The Place of Bibliotherapy in a Hospital’.¹²¹ Price’s claim that this is when the term

¹¹⁶ Price, p. 207.

¹¹⁷ Price, p. 209.

¹¹⁸ Price, p. 218.

¹¹⁹ Price, p. 220.

¹²⁰ Price’s book draws on the plentiful book historical scholarship focused on the cultural anxieties around reading, especially in the early days of the novel. Annika Mann’s *Reading Contagion* provides a comprehensive account of how of this anti-reading discourse was prevalent in the eighteenth and nineteenth centuries. Such studies are historically beyond the scope of this report, but nevertheless highlight the disconnect between present-day platitudes about reading’s beneficial effects, and the fact that historically it was long seen as anything but. (Annika Mann, *Reading Contagion: The Hazards of Reading in the Age of Print* (University of Virginia Press, 2018).

¹²¹ Sadie Delaney, ‘The Place of Bibliotherapy in a Hospital,’ *Library Journal* 62 (April 15, 1939): 305.

bibliotherapy is coined is inaccurate, although her argument that this is a crucial period in which we can see the beginnings of literature as medicine is persuasive. This gradual shift from books as disease carriers to books as cure-alls goes together with 'a shift from the message to the medium.'¹²² Whereas the trivial, tawdry, or titillating content of novels were the focus of cultural anxieties, fiction is now perceived in terms of its beneficial effects. Or rather, as Price points out, it is actually the *medium* of the book, rather than its content, that is the focus of bibliotherapy. The exact nature of this content has become largely irrelevant, she argues, since any long-form fiction in print is now assumed to be beneficial. Bibliotherapy, in this analysis, is an illustration of Price's overall theme: the book has become an object of reverence in contemporary culture.

Deidre Lynch's *Loving Literature* examines the same kinds of shift from suspicion to reverence, but argues that it begins much earlier. Against the historical backdrop of discourse about reading's potentially corrosive and addictive influence, Lynch looks at how poetry and fiction of a certain kind were culturally repositioned as objects of affection or even love.¹²³ The gradual emergence of literature as an academic field over the course of the nineteenth century, as she writes, involved more than the transformation of poetry and novels from entertainment to serious knowledge. Crucially, it also involved cultivating a new kind of personal and affective relationship to the act of reading. Readers learned to 'think of their intensely felt transactions with their reading matter as something other than enthrallment to empty fictions or empty rhetoric and to think of literature, instead, as the locus of ethical transactions whose essence was human contact'.¹²⁴

Lynch describes how discourses surrounding reading changed during this period, a change detectable across personal testimony, philosophy and letters, the nascent Victorian science of psychology and in literature itself. It was in the era of Romanticism that poetry self-consciously assumed a new role as a privileged vehicle of self-knowledge and self-realisation, as theorised by Wordsworth. Much of this discussion centred on the relative merits of certain kinds of reading matter over others. Returning to the same poem repeatedly could be beneficial, whereas the jarring novelty of periodicals was distracting (the similarities with contemporary descriptions of books as the antidote to the distractions of screen reading are inescapable here). Even the novel, often considered that most tawdry and suspect reading matter, could have beneficial effects. The lengthy novels of Samuel Richardson were rehabilitated as a means to foster a sustained and durational relationship with the book (Lynch recounts how the 'mad' poet William Cowper was soothed in his mania by rereading Richardson's *Pamela*).

Such discourses about reading's effects had overlaps with eighteenth-century associationist philosophy and with nineteenth-century thinking about the mind, and at times more explicitly with health. Francis Turner Palgrave's *The Golden Treasury of English verse* (1861) sold ten thousand copies a year for a century and '[i]n the preface to its first edition, Palgrave tacitly recapitulates arguments about the brain, attention, and time that informed

¹²² Price, p. 233.

¹²³ Deidre Shauna Lynch, *Loving Literature: A Cultural History*, Illustrated edition (University of Chicago Press, 2014).

¹²⁴ Lynch, p. 12.

medical culture's promotion of healthful habit'.¹²⁵ Benjamin Rush, dubbed by Lynch as the 'father of bibliotherapy', features a number of times in her narrative, emphasizing that the ideas she examines here are those which underpin not only bibliotherapy as a discipline, but the now-widespread contemporary notion that reading is beneficial as a key part of self-development and even mental health. The notion that reading is good for you may be taken for granted, but was hard won, as Lynch shows through her important historical work of tracing its emergence in the debates and discourses of previous centuries. As such, Lynch provides an example of how literary and cultural history have points of potential intersection with bibliotherapy. But at the same time, it is difficult to see how such interdisciplinary exchanges could be mutually beneficial, or even what they might look like. If bibliotherapy's aim is improving wellbeing in the present, it has little to gain by investigating or acknowledging the historical origins of its own central rationale. Indeed, the very notion that reading has a contested and problematic history might compromise that rationale.

A recent move within literary studies towards 'postcritique' presents a more promising zone of overlap, however. This is an approach pioneered by Rita Felski, which aims to centre 'lay reading' rather than narrowly academic modes of analysis or critique. She offers not a history of reading but a polemic, although one which is shaped by an interest in reading's past and influenced by Deidre Lynch's account of readers' 'loving' relationship with their books. This affective response to literature is one that academia has lost sight of, she argues. Contemporary literary studies is based on hierarchical assumptions about the gulf between scholarly and lay reading practices, positioning the former as the skilled work of the detached, professional, theoretically-aware critic, and the latter as mere amateur enjoyment. How ordinary people read is therefore of little interest to scholars, relegated to a marginal position in literary studies, under the name of 'reception studies' or 'audience studies', and seen as distinct from the actual business of literary analysis:

One reason for the nonimpact of audience studies on the mainstream of the humanities surely lies in its splicing of these audiences into very specific demographics: studies of Harlequin romance readers or of Bruce Springsteen fans. The very framing of such responses as 'other' – as the property of a group that is not one's own – lets critics off the hook. It allows them to keep such responses at arm's length; to dismiss them as being of merely sociological interest; to evade, in short, their normative implications for, and provocation to, a certain academic self- image... oppositions between a specialized guild of interpreters concerned with knowledge and meaning and a broader public driven only by feeling and pleasure create a distorted picture of both.¹²⁶

This separation and privileging of the rational over the emotional not only works to distance academic literary analysis from mere 'reading for pleasure', but also to disavow and denigrate the place of attachment in the act of reading. Such attachment can play no role in the proper analysis of reading, according to academia's own self-image. Felski, by contrast, wants to see it

¹²⁵ Lynch, p. 188.

¹²⁶ Rita Felski, *Hooked: Art and Attachment*, First edition (The University of Chicago Press, 2020), p. 4.

as central to theories of reading. If literary studies has spent the past few decades approaching the literary work by attempting to uncover its latent, concealed meanings, postcritique instead reimagines a mode of literary analysis grounded in connection and affect rather than suspicion and detachment. (She draws here on Eve Kossof Sedgwick's not dissimilar argument contrasting the 'hermeneutic of suspicion' common in literary analysis with a 'reparative' mode of reading.) Her intervention is not only an attempt to 'build bridges' between academic reading and lay reading, but to celebrate and investigate affect as a strength rather than a weakness. In doing so she lays out a model of reading as a mode of connection and attachment with an aesthetic object. In *Uses of Literature* she maps out a taxonomy of affective reading based on responses of 'recognition', 'enchantment', 'knowledge' and 'shock'.¹²⁷ In *Hooked*, she describes how readers – like film-goers and music fans – are drawn into a relationship with the artwork that is not entirely voluntary. The kind of connection she describes is not specific to books as a particular medium, nor is it the preserve of high culture (she discusses Taylor Swift as well as Bach, Matisse and James Joyce).

Felski's is careful to distinguish postcritique from a psychoanalytic model of 'attachment theory' as pioneered by Winnicott or Bowlby. Instead, her ideas take their theoretical impulse from Latour's Actor Network Theory. According to this scenario, reading subjects are not atomised individuals exercising their judgment from a critical distance, but are part of a shifting network, bound together with objects, others and cultural artefacts. 'It is possible', she argues, 'to be as tightly bound to a seventeenth-century painting as to a friend seen every day, as intensely invested in *Big Little Lies* as the dramas of one's neighborhood community'.¹²⁸ There are elements in this discussion of attachment and recognition that have clear overlap with bibliotherapy. In particular, Felski's turn away from literary studies' default mode of critique seems to echo Josie Billington's book, *Is Literature Healthy?* Rather than dismiss attachment and recognition as readerly naïveté, Felski, like Billington, sees it as the basis for reorienting literary scholarship. Both are concerned with the 'uses' that literature might have in terms of the psychic and social life of its readers. And in fact, Felski is founder of the Centre for Uses of Literature at the University of Southern Denmark, and it seems that such outward looking, interdisciplinary initiatives within literary studies are where common ground with bibliotherapy is most likely to be found.

However, there are some fundamental differences, most obviously their disciplinary location. Where Billington distances herself from the discipline of literary studies, rejecting wholesale its embrace of theory and positioning herself instead in the medical humanities, Felski's work is instead an attempt to shift paradigms from within the discipline, or at least to broaden its parameters. Her reliance on ANT deploys its own distinctively Latourian, post-human theoretical model, avoiding the kind of psychological/psychoanalytic reading advocated by Billington. It is also markedly less canonical, describing a mode of attachment that is not to do with the plotlines and characters of great literature, but instead with the almost arbitrary connections we make with cultural artefacts of all kinds, connections that are heavily shaped by our social and media environment. Whereas Billington's book spends much of its time analysing

¹²⁷ Rita Felski, *Uses of Literature*, 1st edition (Malden, MA ; Oxford: WB, 2008).

¹²⁸ Felski, *Hooked*, p. 27.

how the plots of *Anna Karenina* or *Middlemarch* play out universal human psychic dramas, Felski is much more interested in theorising the nature of attachment in the abstract, and how connections with aesthetic objects in general (books, films, artworks) are made and sustained. To put things another way: '[t]he emotional content of artworks does not correspond in any straightforward way to the kinds of emotions we have about them.'¹²⁹

5. Bibliotherapy in wider culture, literature and journalism

The preceding sections have so far dealt with forms of bibliotherapy as practiced and theorised within institutional settings – the academy; the hospital; the clinic; NHS; schools; libraries; charitable organisations. But this report would not be complete without reflecting the wider cultural reach and resonance of bibliotherapy. The last couple of decades has seen the emergence of a wider context of what might be called 'soft bibliotherapy', in which the central tenets, arguments and research findings of bibliotherapy have become pervasive in the culture at large. Manifestations of the message that reading is good and beneficial are widespread in popular media, culture and literature, although such ideas are rarely packaged under the name of 'bibliotherapy'. The direction of travel of these ideas is a complex question. As has already been noted, the field of bibliotherapy may be said to be based on underlying cultural assumptions about reading and its benefits. But there is also an undeniable reciprocal movement, in which the research findings of bibliotherapy studies percolate into wider discourse, providing 'scientific' justification for arguments that reading is good for you. Such research is sometimes deployed in a vague, non-specific sense. Radio 4's recent 2022 documentary 'Just One Thing', focused one of its episodes on reading as a simple thing that can be beneficial, referring to the many 'studies which have shown' the difference it can make to daily life and to low mood.¹³⁰ Reading for health is also a popular topic for health and lifestyle articles in the mainstream press. Blake Morrison's 2008 article highlighting the work of The Reader organisation seems to be an early example of this, but since then, there has been a steady stream of journalism on the theme of bibliotherapy, in *The Guardian* and elsewhere.¹³¹ In these, links to research or 'new studies' are sometimes provided, making the topic periodically, and regularly newsworthy. A 2017 piece by Germaine Leece links to studies from the University of Sussex, as well as the New School for Social Research in New York, both of which claim to have discovered links between reading and empathy.¹³²

Bibliotherapy has also given rise to a literary genre of sorts. Helen Macdonald's *H is for Hawk* combines grief memoir and a meditation on goshawk-training, and was an unexpected

¹²⁹ Felski, *Hooked*, p. 30.

¹³⁰ *Just One Thing*, BBC Radio 4, 20 September 2022, 13.45.

¹³¹ Blake Morrison, 'The Reading Cure', *The Guardian*, 5 January 2008 [accessed 1 April 2023]. For further examples, see: Andrew Gregory, 'The Pick-Me-up Papers: Dickens Better for Mental Health than Self-Help Books', 11 May 2023 [accessed 11 May 2023]. Lucia Osborne-Crowley, 'How Bibliotherapy Helped Me to Deal with Trauma', 8 September 2019 [accessed 1 April 2023].

¹³² Germaine Leece, '"Have a Lover, Have Friends, Read Books," Said Montaigne. He Was Right about One of Them', *The Guardian*, 24 May 2017 [accessed 8 April 2023].

commercial and critical success. Journalist Laura Freeman's *The Reading Cure: How Books Restored My Appetite*, tells of how books aided her recovery from teenage anorexia, and how reading about food in novels allowed her to once again enjoy food. Rachel Kelly's account of the restorative powers of poetry, *Black Rainbow*, describes the effect on her of learning and repeating lines from George Herbert's poem 'The Flower': 'In those moments of the day when I held hands with Herbert, the depression couldn't find me. It felt as though the poet was embracing me from across the centuries, wrapping me in a cocoon of stillness and calm.'¹³³ Such writing might be considered an offshoot of what has been dubbed the 'bibliomemoir', a mode of life-writing told through encounters with books, glossed by Joyce Carol Oates as 'a subspecies of literature combining criticism and biography with the intimate, confessional tone of autobiography'.¹³⁴ In this more specific tie-in with bibliotherapy, such memoirs deal with emotional difficulties, grief or depression overcome through reading.

A visit to Waterstones bookshop in Gower Street, WC1, shows how embedded reading for health has become in popular literary culture. Not merely because of the amount of books now devoted to it, but because there is a 'Reading for Therapy Hub' in one ground floor corner. The hub – designed as a quiet and meditative nook, with plants and a place to sit as well as a shelf of suggested reading – is a partnership initiative between Waterstones and The School of Life, based in nearby Bloomsbury. Some signage announces its intention: 'Our collection of books, games and wellbeing tools can help you learn more about yourself, change the way you think about your problems, and bring about lasting improvements in every area of life.' Founded by philosopher Alain de Botton, The School of Life is a commercial organisation offering books, programmes, and other services with advice on life issues, which has a specialist 'bibliotherapy clinic', established by Susan Elderkin and Ella Berthoud in 2008. As Berthoud recalls in a *New Yorker* article:

[N]obody was doing it in that form at the time...Bibliotherapy, if it existed at all, tended to be based within a more medical context, with an emphasis on self-help books. But we were dedicated to fiction as the ultimate cure because it gives readers a transformational experience.¹³⁵

There is now a network of bibliotherapists selected and trained by Berthoud and Elderkin, and affiliated with the School of Life, working around the world, from New York to Melbourne. Berthoud and Elderkin are also the authors of *The Novel Cure: An A-Z of Literary Remedies*, which is written in the style of a medical dictionary and matches ailments ('failure, feeling like a') with suggested reading cures (*The History of Mr. Polly*, by H. G. Wells).¹³⁶ First released in the U.K. in 2013, it is now being published in eighteen countries, and, in an interesting twist, the contract allows for a local editor and reading specialist to adapt up to

¹³³ Rachel Kelly, *Black Rainbow* (Yellow Kite Books; London, 2014), p. 78.

¹³⁴ Lucy Scholes, 'Close Readings: The Rise of the Bibliomemoir', *Financial Times*, 23 February 2018 [accessed 10 May 2023].

¹³⁵ Ceridwen Dovey, 'Can Reading Make You Happier?', *The New Yorker*, 9 June 2015 [accessed 8 April 2023].

¹³⁶ Ella Berthoud and Susan Elderkin, *The Novel Cure: An A to Z of Literary Remedies*, Main edition (Edinburgh: Canongate Books, 2015).

twenty-five per cent of the ailments and reading recommendations to fit each particular country's readership and include more native writers.

The School of Life has 'clients' rather than 'patients', and its website offers books to address specific emotional problems or issues, without pathologising or medicalising those issues. This is not a form of bibliotherapy with any affiliation to medicine or health services, in other words. It is, rather, what Leah Price terms 'hobby bibliotherapy', more about life-coaching and lifestyle than about health. *Guardian* lifestyle articles have regularly featured the School of Life, sending a series of columnists for literary prescriptions, usually as the pretext for slightly tongue-in-cheek pieces of journalism.¹³⁷ Price's own account of visiting the School of Life describes it as a leisure activity aimed at those with disposable income, with its bibliotherapists playing the role of 'sommeliers' rather than physicians. They not only prescribe books, but can assist in finding the ideal Tuscan retreat in which to read them. This is a recreational, commodified mode of bibliotherapy: in Bath, Price describes how a bookstore opened a bibliotherapy room dubbed a 'reading spa', while in Berlin a 'book pharmacy' sells beauty products packaged with books 'specially selected for their cleansing, soothing and revitalizing qualities.'¹³⁸ Bibliotherapy in this popular iteration occupies much the same cultural ecosystem as the wellness industry. It also seems to be largely an offshoot of mindfulness meditation techniques, important not for the specific qualities of what is being read, but for its potential to bring about calmness and relaxation in the reader. And in fact, 'mindful reading' and 'slow reading' are concepts that are gaining traction in some contemporary accounts of bibliotherapy, deployed by ReLit, and especially embraced by the School of Life, whose specialist bibliotherapist Ella Berthoud has authored a book entitled *The Art of Mindful Reading: Embracing the Wisdom of Words*.¹³⁹

6. Conclusion

While the systematic use of therapeutic reading has precursors in the nineteenth century, bibliotherapy in its modern form is just over a century old. In one sense it appears to be a thriving practice, supported by a growing body of academic research and deployed in an increasing number of settings including the voluntary sector, schools, libraries, prisons, and health care. But while there is much evidential data apparently attesting to its beneficial effects in terms of wellbeing, the question of exactly what is effective and how it works remains less clear. In the mid-twentieth century, there were sustained attempts to develop a body of theory and to establish bibliotherapy as a branch of medical or scientific knowledge. Ultimately these failed to resolve lingering questions about its status and scientific rigour, and contemporary bibliotherapy has largely preferred to leave such broad conceptual issues behind in favour of

¹³⁷ Jay Rayner and others, 'A Dose of Prose: Bibliotherapy', *The Observer*, 27 November 2011 [accessed 1 May 2023].

¹³⁸ Price, p. 236.

¹³⁹ Ella Berthoud, *The Art of Mindful Reading: Embracing the Wisdom of Words*, 1st edition (Leaping Hare Press, 2019).

more narrowly focused research and practice. While the general concept of reading for health is now widely accepted, finding expression in popular literature, culture and media, bibliotherapy as a field has become characterised by its disparate nature, occupying diverse cultural locations and taking many different forms.

Acknowledgements and funding

This review was funded by the Wellcome Trust, through the WCCEH centre grant 203109/Z/16/Z. It was conducted as part of a collaboration with the [Exeter UNESCO City of Literature](#) on Reading as Therapy. The author is grateful to the rest of the project team for support and input, particularly Judith Green (University of Exeter, principal investigator of the project) and Anna Cohn Orchard and Liv Hooper (Exeter City of Literature).

Bibliography

- Afolayan, Johnson A., 'Documentary Perspective of Bibliotherapy in Education', *Reading Horizons: A Journal of Literacy and Language Arts*, 33.2 (1992) 137-148
- Appel, Kenneth E., 'Psychiatric Therapy', in *Personality And The Behavior Disorders - Vol II*, ed. by McV. Hunt, (New York: Ronald Press Company, 1944) pp. 1107-63
- Barker, Robert L., *The Social Work Dictionary* (Washington DC: NASW Press, 2003)
- Bate, Jonathan and Andrew Schuman, 'Books Do Furnish a Mind: The Art and Science of Bibliotherapy', *Lancet*, 387.10020 (2016), 742–43
- Beatty, William K. 'A Historical Review of Bibliotherapy', *Library Trends* 11.2 (1962), 106-117
- Berthoud, Ella and Susan Elderkin, *The Novel Cure: An A to Z of Literary Remedies*, (Edinburgh: Canongate Books, 2015)
- Billington, Josie, *Is Literature Healthy?* (Oxford: Oxford University Press, 2016)
- Bishop, W. J., 'Hospital Libraries and Bibliotherapy: A Bibliography', *The Library Association Record*, Series 3, 1 (1931) 198-200
- Birkerts, Sven, *The Gutenberg Elegies* (New York: Faber and Faber, 2006)
- Blum, Beth, *The Self-Help Compulsion: Searching for Advice in Modern Literature* (Columbia University Press, 2020)
- Brewster, Liz and Sarah McNicol (eds.), *Bibliotherapy*, (Cambridge: Cambridge University Press, 2018)
- and Sarah McNicol, 'Bibliotherapy in the UK: Historical Development and Future Directions', *Informatio*, 26.2 (2021)
- and Sarah McNicol, 'Bibliotherapy in Practice: A Person-Centred Approach to Using Books for Mental Health and Dementia in the Community', *Medical Humanities*, 47.4 (2021)
- , 'Books on Prescription: Bibliotherapy in the United Kingdom', *Journal of Hospital Librarianship*, 9.4 (2009), 399–407

- Bryan, Alice I., 'Can there be a Science of Bibliotherapy?', *Library Journal*, 64 (October 15, 1939), 773-776
- Cohen, Laura J., 'Phenomenology of Therapeutic Reading with Implications for Research and Practice of Bibliotherapy', *The Arts in Psychotherapy*, 21.1 (1994), 37-44
- Cornett, Claudia E. and Charles F. Cornett, *Bibliotherapy: The Right Book at the Right Time* (Bloomington, Indiana: Phi Delta Kappa Educational Foundation, 1980)
- Crothers, Samuel McChord, 'A Literary Clinic,' *The Atlantic*, 118 (1916)
- Cox Gurdon, Meghan and Kate McCabe, *The Enchanted Hour: The Miraculous Power of Reading Aloud in the Age of Distraction* (2019)
- Delaney, Sadie, 'The Place of Bibliotherapy in a Hospital,' *Library Journal* 62 (April 15, 1939)
- Dovey, Ceridwen, 'Can Reading Make You Happier?', *The New Yorker*, 9 June 2015
- Du Plock, Simon, 'Silent Therapists and the Community of Suffering: Some Reflections on Bibliotherapy from an Existential-phenomenological Perspective', *Existential Analysis*, 16 (2005)
- Dufour, Monique S., *Reading for Health: Bibliotherapy and the Medicalized Humanities in the United States, 1930-1965*, Unpublished PhD Diss., (Virginia Polytechnic Institute and State University: 2014)
- Duncan, Dennis, *Index, A History of The* (London: Allen Lane, 2021)
- Favazza, Armando R., 'Bibliotherapy: A Critique of the Literature', *Bulletin of the Medical Library Association*, 54.2 (1966), 138-41
- Felski, Rita, *Uses of Literature*, (Oxford: Wiley-Blackwell, 2008)
- , *Hooked: Art and Attachment*, First edition (Chicago: The University of Chicago Press, 2020)
- Galt, John Minson, *On Reading, Recreation and Amusements for the Insane* (Richmond, Va. : Printed by Ritchies & Dunnivant, 1853)
- Garrett Davis, Christine A., "'Why Bibliotherapy?'" A Content Analysis of Its Uses, Impediments and Potential Applications for School Libraries', *Qualitative and Quantitative Methods in Libraries*, 2017, 75-93
- Gottschalk, L.A., 'Bibliotherapy as an Adjuvant in Psychotherapy', *The American*

Journal of Psychiatry, 104.10 (1948), 632–37

Griffin, Barbara K., *Special Needs Bibliography: Current Books For/About Children and Young Adults Regarding Social Concerns, Emotional Concerns, the Exceptional Child* (New York: The Griffin, 1984)

Gregory, Andrew 'The Pick-Me-up Papers: Dickens Better for Mental Health than Self-Help Books', *The Times* (1 March 2020)

Harraden, Beatrice, 'What Our Soldiers Read,' *Cornhill Magazine* (November 1916)

Haslam, Sara and Edmund G. C. King, "'Medicinal Literature": Bibliotherapy, Literary Caregiving, and the First World War', *Literature and Medicine*, 39.2 (2021), 296–318

Hoagland, Joan, 'Bibliotherapy: Aiding Children in Personality Development', *Elementary English*, 49.3 (1972), 390–94

Hoopes, Helen, 'An Introduction to Bibliotherapy', *Children's Book and Media Review* 10.4 (1989)

Jack, Sarah J. and Kevin R. Ronan, 'Bibliotherapy: Practice and Research', *School Psychology International*, 29.2 (2008), 161–82

Jackson, Shelley A., 'Using Bibliotherapy with Clients', *The Journal of Individual Psychology*, 57 (2001), 289–97

Jacobs, Alan, *The Pleasures of Reading in an Age of Distraction* (New York: OUP USA, 2011).

'Read', *Just One Thing* - with Michael Mosley, BBC Radio 4, 20 September 2022

Kamman, Gordon, 'Balanced Reading Diet Prescribed for Mental Patients', *Modern Hospital*, 55, no 5 (Nov 1940)

Kelly, Rachel, *Black Rainbow* (Yellow Kite Books: London, 2014)

Leese, Germaine, "'Have a Lover, Have Friends, Read Books," Said Montaigne. He Was Right about One of Them', *The Guardian*, 24 May 2017

Kidd, David Comer and Emanuele Castano, 'Reading Literary Fiction Improves Theory of Mind', *Science*, 342.6156 (2013), 377–80

Latchem, J.M. and J. Greenhalgh, 'The role of reading on the health and well-being of people with neurological conditions: a systematic review', *Aging and Mental Health*, 18 (2014), 731–44

- Lehr, Fran, 'ERIC/RCS: Bibliotherapy', *Journal of Reading*, 25.1 (1981), 76–79
- Lutz, Cora E., 'The Oldest Library Motto: Ψυχὴ ἰατρεῖον', *The Library Quarterly: Information, Community, Policy*, 48.1 (1978), 36–39
- Lynch, Deidre Shauna, *Loving Literature: A Cultural History* (University of Chicago Press, 2014)
- Mann, Annika, *Reading Contagion: The Hazards of Reading in the Age of Print* (University of Virginia Press, 2018)
- Mar, Raymond A., Keith Oatley, and Jordan B. Peterson, 'Exploring the Link between Reading Fiction and Empathy: Ruling out Individual Differences and Examining Outcomes', *COMM*, 34.4 (2009), 407–28
- Marrs, R. W., 'A Meta-Analysis of Bibliotherapy Studies', *American Journal of Community Psychology*, 23.6 (1995), 843–70
- McCulliss, Debbie, 'Bibliotherapy: Historical and Research Perspectives', *Journal of Poetry Therapy*, 25.1 (2012), 23–38
- McDaniel, W.B., 'Bibliotherapy – Some Historical and Contemporary Aspects', *American Library Association Bulletin* (October 1956): 584–89
- McMillen, Paula S. and Dale Elizabeth Pehrsson, 'Bibliotherapy for Hospital Patients', *Journal of Hospital Librarianship*, 4.1 (2004), 73–81
- Menninger, Karl, 'Reading as Therapy,' *ALA Bulletin* 55, no. 4 (April 1961)
- Menninger, William 'Bibliotherapy', *Bulletin of the Menninger Clinic* 1.8 (November 1937) 263-274
- Mikics, David, *Slow Reading in a Hurried Age* (Cambridge, Massachusetts: Harvard University Press, 2013)
- Morgan, Sharon R., 'Bibliotherapy: A broader concept' in *Journal of Child and Adolescent Psychology* 5.2 (1976) 39-46
- Morley, Christopher, *The Haunted Bookshop* (New York: Grosset and Dunlap, 1919)
- Morrison, Blake, 'The Reading Cure', *The Guardian*, 5 January 2008
- Oatley, Keith, *Such Stuff as Dreams: The Psychology of Fiction* (Oxford: Wiley-Blackwell, 2011)

- Osborne-Crowley, Lucia, *The Times* 'How Bibliotherapy Helped Me to Deal with Trauma', 8 September 2019
- Pardeck, John T. and Jean A. Pardeck, *Bibliotherapy: A Clinical Approach for Helping Children* (Amsterdam: Gordon and Breach Publishers, 1993)
- , 'Using Literature to Help Adolescents Cope with Problems', *Adolescence*, 29.114 (1994), 421–27
- Pennington, Martha and Robert Waxler, *Why Reading Books Still Matters: The Power of Literature in Digital Times* (Abingdon: Routledge, 2017)
- Pressman, Jessica, *Bookishness: Loving Books in a Digital Age* (New York: Columbia University Press, 2020)
- Price, Leah, *What We Talk About When We Talk About Books: The History and Future of Reading*, (New York: Basic Books, 2019)
- Rayner, Jay and others, 'A Dose of Prose: Bibliotherapy', *The Observer*, 27 November 2011
- Rubin, Rhea Joyce, *Using Bibliotherapy: A Guide to Theory and Practice* (Oryx Press, 1978)
- Russell, David H. and Caroline Shrodes, 'Contributions of Research in Bibliotherapy to the Language-Arts Program. I', *The School Review*, 58.6 (1950), 335–42
- Scholes, Lucy, 'Close Readings: The Rise of the Bibliomemoir', *Financial Times*, 23 February 2018
- Shrodes, Caroline, 'Bibliotherapy,' *The Reading Teacher* 9, no. 1 (October 1955)
- , *Bibliotherapy: A Theoretical and Clinical-Experimental Study*, (University of California, Thesis dissertation, 1950)
- , 'Bibliotherapy: An Application of Psychoanalytic Theory', *American Imago*, 17.3 (1960) 311–19
- , Richard W. Husband and Justine Van Gundy, (eds.) *Psychology Through Literature: An Anthology* (Oxford: OUP, 1943)
- Stallybrass, Peter, 'Books and Scrolls: Navigating the Bible', in *Books and Readers in Early Modern England*, ed. by Anderson and Sauer (University of Pennsylvania Press, 2012)

Stip, Emmanuel, Linda Östlundh, and Karim Abdel Aziz, 'Bibliotherapy: Reading OVID During COVID', *Frontiers in Psychiatry*, 11 (2020)

Sutcliffe, Marcella P., 'Reading at the Front: Books and Soldiers in the First World War', *Paedagogica Historica*, 52.1–2 (2016), 104–20

Ullin, David, *The Lost Art of Reading: Why Books Matter in a Distracted Time* (Sasquatch Books, 2010)

Wallace, Margaret, 'Bibliotherapy of Tomorrow,' *Library Occurrent* 13 (1941)

Weimerskirch, P. J., 'Benjamin Rush and John Minson Galt, II: Pioneers of Bibliotherapy in America', *Bulletin of the Medical Library Association*, 53.4 (1965), 510

Xu, Zheng et al, 'The 100 Most-Cited Articles on Bibliotherapy: A Bibliometric Analysis', *Psychology, Health & Medicine*, 2022, 1–17



**wellcome
centre
cultures+
environments
of health**