Qualitative analysis of bibliotherapy as a tool for adults who stutter and graduate students

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ABSTRACT

Purpose: The purpose of this study was to investigate the use of bibliotherapy as a therapeutic tool for adults who stutter (AWS) and as an educational tool for graduate students in speech-language pathology. Bibliotherapy refers to the process of reading, reflecting upon, and discussing literature, often first person illness or disability narratives, to promote cognitive shifts in the way clients and clinicians conceptualize the experience of disability.
Method: Five AWS and six graduate students participated in supervised bibliotherapy using a stuttering memoir during therapy sessions. An inductive, qualitative analysis was utilized to analyze data collected from questionnaires and interviews. An additional deductive qualitative approach was utilized to explore how client data fit into an existing five-outcome model of bibliotherapy from the psychology literature.
Results: Graduate students reported developing essential clinical skills for working with clients who stutter, including an improved understanding of the experience of people who stutter and an increased ability to form and strengthen the therapeutic alliance. Clients reported experiencing shifts in the cognitive and affective components of the disorder. Imposing the five-outcome model on client data indicates that at least two clients in the current study experienced all five outcomes of bibliotherapy. These include client experiences of involvement, identification, catharsis, insight and universalism.
Conclusion: Both graduate students and clients reported benefits from reading and discussing a memoir about stuttering. Bibliotherapy can be an effective tool in therapy and clinical education when used appropriately.

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1. Introduction

Stuttering is a multi-faceted fluency disorder, including behavioral, cognitive and affective components (Floyd, Zebrowski, & Flamme, 2007; Manning, 2010; Yaruss & Quesal, 2006). The term "stuttering management" has emerged in the literature to acknowledge the importance of therapeutic gain in all three components of the disorder, whereas traditionally, "recovery" has solely focused on the elimination of stuttering like behaviors (Plexico, Manning, & DiLollo, 2005). Adults who stutter (AWS) have identified specific cognitive and affective shifts that contribute to successful stuttering management, including

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increased confidence, motivation, self-acceptance, and willingness to take risks, as well as decreased fear of failure (Anderson & Felsenfeld, 2003; Plexico et al., 2005).

Speech-language pathologists often indicate that they do not feel confident treating people who stutter, and that they feel the least confident treating the affective component of the disorder (Cooper & Rustin, 1985; Crichton-Smith, Wright, & Stackhouse, 2003; Kelly et al., 1997). Some clinicians hold unsubstantiated or negative views about stuttering or people who stutter (Cooper & Cooper, 1996), perhaps resulting from limited educational or clinical experience (Kelly et al., 1997; Yaruss & Quesal, 2002). Few evidence-based options exist to treat the cognitive and affective components of stuttering. Less is known about teaching graduate students how to plan and respond therapeutically to these particular needs of their clients.

In the psychotherapy literature, bibliotherapy is an evidence-based technique used to facilitate cognitive and affective growth in children and adults coping with personal problems. Bibliotherapy refers to the process of reading, reflecting upon, and discussing literature, often first person illness or disability narratives, to promote cognitive shifts in the way clients and clinicians conceptualize the experience of disability. Bibliotherapy is distinct from using literature for self-help, in that the former must include elements of written reflection and/or discussion of the literature with others in a structured setting.

Adult clients benefit from bibliotherapy when facing a variety of problems including coping with alcoholism (Apodaca & Miller, 2003; Rus-Makovec, Furlan, & Smolej, 2015), bereavement (Mahan, Schreiner, & Green, 1983), and depression (Scogin, Hamblin, & Beutler, 1987). Additionally, participating in bibliotherapy has shown to decrease the rate of recidivism in people on criminal probation (Schutt, Deng, & Stoehr, 2013). However, in total, research regarding the efficacy of bibliotherapy has yielded mixed findings. Bibliotherapy appears to be most efficacious when the professional has a deep understanding of the client's problem and chooses literature that is specific to the client's individual needs. Additionally, bibliotherapy is more efficacious when used as a supplemental tool as opposed to a stand-alone therapy approach (Heath, Sheen, Leavy, Young, & Money, 2005).

When facilitated with appropriate literature and a knowledgeable clinician, results from bibliotherapy tend to follow a similar trend across a range of problems and disorders. Lenkowsky (1987) identified three potential outcomes of effective bibliotherapy including *identification*, *catharsis*, and *insight*. Heath et al. (2005) proposed a bibliotherapy model which includes these three outcomes along with two others, *involvement* and *universalism.* The first outcome, *involvement*, occurs when the client demonstrates interest in the characters and events in the book. As clients' interests in the book increases, they begin to relate to the characters they are reading about. This is *identification.* By identifying with the characters, clients are able to vicariously experience the problems and feelings of characters in the book. During *catharsis*, clients release tension as the characters they identify with begin to solve problems or navigate difficult situations. *Insight* occurs as clients think about the situations, problems, and characters and apply what they have read to their own lives. Here they gain hope and motivation as they begin to perceive their problem as less overwhelming and more manageable. In the final outcome, *universalism*, clients feel less isolated and more supported (Ford, 2000). By reframing their perspective of the problem, these five bibliotherapy outcomes free mental resources to devote to positive coping mechanisms.

In communication disorders, social stories are a form of bibliotherapy commonly used with children with autism spectrum disorder (ASD) (Gray & Garand, 1993). Additionally, bibliotherapy has been used to promote education and advocacy in siblings and peers of children with ASD (Maich & Belcher, 2012; Strobel, 2011; Turner, 2013). Siblings of children with ASD participated in a bibliotherapy intervention that included discussions and activities centering on a book about a child with ASD. Data were responses to pre- and post-surveys, sibling comments during sessions, and sibling journal entries. Although bibliotherapy significantly increased knowledge about ASD, experiences of all bibliotherapy outcomes and changes in family interactions were not significant (Strobel, 2011).

Experimental evidence for bibliotherapy as a therapeutic technique for stuttering does not exist at this time. Two studies have described the use of books in stuttering therapy. Emerick (1966) used a form of bibliotherapy before it was well-established and provided anecdotal evidence for its use with students in speech-language pathology and their adolescent and adult clients who stutter. In their respective pairs, students and their clients researched the lives of famous people who stuttered and collaborated to write short biographies. They discussed these biographies within a group setting. Emerick's (1966) descriptions of client progress were consistent with the outcome of *identification* in the bibliotherapy model proposed by Heath et al. (2005). One adolescent client utilized the biography he helped write to "make comparisons from [the famous person who stutter's] life to modern theories of etiology as well as to his own situation." Other adult clients discussed "possible etiology, distressing listener reactions, and deleterious adjustments in the lives of famous stutterers" (Emerick, 1966). He concluded that discussing biographies about famous people who stutter could allow for adolescents and adults who stutter to address their problems in a non-threatening manner.

Logan, Mullins, and Jones (2008) reviewed 29 children's books that featured a person who stutters, described the disorder of stuttering and its features accurately, and included stuttering-related situations and problems in the plots. Although the authors acknowledged that no experimental evidence for bibliotherapy existed at the time of the study, they concluded that all 29 books contained at least one scene that could be appropriate for treating the cognitive and affective components of stuttering. One of the goals of the current study was to investigate the therapeutic outcomes of bibliotherapy with AWS.

Clients are not the only people to benefit from reading and discussing literature, as this technique has been described as "illuminating" for graduate students as well (McAllister, Brien, Alexander, & Flynn, 2014). Using patient-centered literature to promote educational outcomes in students is commonly referred to as "narrative training" in the medical field, but the term "bibliotherapy" has extended to encompass both client and student outcomes in the counseling literature. Whereas