

Why Bibliotherapy Works

Emotion, Empathy and Critical Thinking in Reading Fiction

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Abstract

The article explores bibliotherapy's theoretical underpinnings and mechanisms, arguing for its effectiveness in addressing psychological, social, and emotional challenges through literary fiction¹. Bibliotherapy diverges from traditional reading by targeting specific issues and employing structured therapeutic processes, such as engagement, identification, catharsis, and reflection. Modern theories, including cognitive literary studies and ethical literary perspectives, provide evidence for literature's ability to evoke empathy, critical thought, and emotional insight.

Drawing on natural narratology and neuroscience, the paper emphasizes the embodied nature of reading. It highlights how literary fiction activates the same cognitive and emotional mechanisms as real-life experiences, enabling readers to safely explore diverse scenarios. The text stresses the role of fictiveness and mimesis in creating safe psychological spaces for self-reflection, identification, and transformation. Additionally, narrative techniques – such as third-person narrative – foster empathy and immersive experiences, integral to bibliotherapy.

The article concludes that literary fiction's multilayered and reflective qualities make it uniquely suited for therapeutic contexts, fostering personal growth and emotional resilience. Bibliotherapy's utility extends to both clinical and non-clinical settings, offering a scientifically grounded method to enhance mental well-being amidst contemporary challenges such as societal stressors and the rise of social media's negative impacts.

Keywords: embodiment, therapeutic reading, literary theory, cognition, narrativity, narrative fiction

Introduction

Since its origins with Plato, literary studies have known that reading literary texts affects readers. Numerous literary texts, from the very beginnings of the modern novel with Cervantes' *Don Quixote* or the classic *Madame Bovary* by Flaubert, even thematize the

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problematic aspects of excessive reading of literature, which can negatively influence readers. One can also think about Goethe's *The Sorrows of Young Werther* and the protagonist's suicide, a topic not only discussed by the press at the time but also frequently referenced in modern literary studies as a text that allegedly caused a wave of suicides among its readers. In the eyes of readers and researchers alike, literature has an undeniable influence on its audience, and this influence is not necessarily always positive. On the contrary, as these famous examples show, the thematization of the negative influence of reading literary fiction occupies a more prominent place in literary history than the positive, even therapeutic, effects of reading. On the other hand, Aristotle opposed Plato's rejection of literature with the argument that literary creation adheres to different criteria of validity than philosophy and historiography. According to Aristotle, literature's importance does not lie in telling the truth but in being persuasive, evoking the emotions it intends to evoke.²

Modern literary studies, particularly within the field of ethical literary studies, have developed an explicitly positive stance on the significance of literature for society (e.g., Martha Nussbaum) and also for the individual reader (e.g., Anne Mangen). Although opinions differ on whether the influence of reading literary texts on society or individuals is inherently positive or sometimes negative, it is undoubtedly possible to assert that literature works. This belief underpins bibliotherapy as a method of reading literary texts for therapeutic purposes, whether in clinical contexts like clinical bibliotherapy or in non-clinical contexts (libraries, schools, etc.) as developmental bibliotherapy. Bibliotherapy can occur solely through reading literary texts (Wimberley, Mintz, and Suh, 2015) or involve reading accompanied by discussions about the text (Zabukovec, 2017). Both forms are used, and even the first approach is based on bibliotherapeutic procedures.

The first characteristic of bibliotherapy – or bibliotherapeutic procedures – which distinguishes it from regular reading of literature, is its focus on a specific problem or set of problems. The problem should be individually defined according to the needs of the participant or patient, while in group bibliotherapy, defining a problem broad enough to be shared by all participants is key. Therapeutic reading addresses a psychological, social, or societal theme, reflecting on it and attempting to resolve associated problems.

The second distinguishing characteristic of bibliotherapeutic reading is *contradictory reading*. This concept, already well known in contemporary literary theory, is typically applied to texts that use alternative versions of historical events to construct their fictional narratives. For therapeutic reading, this means isolating a specific aspect of the literary text that addresses and positively resolves a psychological or social issue, even if, within the narrative, the chosen aspect has a completely different meaning. Piskač and Marinčič similarly state that "therapeutic reading is not an entirely exact process; readers do not seek the 'correct' answer but practice connecting emotional metaphors in discourse with possible emotions" (Piskač and Marinčič, 2024, 20). For readers in bibliotherapy, it is not necessary to fully understand the motivations behind the actions of literary characters; rather, they create their own

² Compare Aristotle's definition of the tragedy and his distinction of history and poetry (Aristotle, 1984, 2320 and 2322–2323).

interpretation of these motivations, which they can then apply to thinking about themselves or the psychological, social, or other problems that the bibliotherapeutic process addresses.

The choice of appropriate texts is crucial for bibliotherapy. Bibliotherapeutic theory is least developed in this area, emphasizing primarily the psychological aspect of text selection – such as the exposure of the problem and its positive resolution – while aspects of text functioning and effects, articulated by cognitive literary studies as well as older traditions like reception aesthetics and reader-response theory, are usually not considered. Similarly, bibliotherapeutic theory has not yet addressed the narratological, aesthetic, and axiological aspects of reading texts used in the process of literary bibliotherapy, which I regard as integral elements of the effectiveness of bibliotherapeutic processes.

Therapeutic reading, due to its focus on a specific problem or theme, follows a defined therapeutic bridging process. This process represents another characteristic of bibliotherapy, segmented differently by various theorists and bibliotherapists. Melissa Allen Heath proposes a detailed description of the stages of bibliotherapeutic reading: engagement, identification, catharsis, insight, and universalization (Heath et al., 2005, 568). The engagement stage involves developing an interest in the story; the identification stage involves the reader identifying with the literary character, their challenges, and their resolutions. A positive outcome is thus essential from a psychological perspective. Only identification enables catharsis, just as fear and compassion in Greek tragedy serve as steps toward catharsis, achievable only through immersion in the text.

Heath suggests that catharsis occurs when the literary character successfully resolves a problem. This presupposes an embodied experience for the reader, who viscerally experiences an analogous transformation to the literary character. However, the bibliotherapeutic process does not end there. The next stage, insight, involves exiting the aesthetic illusion and establishing aesthetic distance, where the reader consciously reflects on what happened in the story, their own life, and their experience of the narrative. This is a stage of rational analysis and reflection, leading to the final stage of the bibliotherapeutic bridging process: universalization.

Other bibliotherapists and researchers (Piskač and Marinčič, 2024) argue that such segmentation of stages is inappropriate, as they do not acknowledge the importance or even the existence of catharsis. The core aspect of bibliotherapy is not the reader's realization that, regardless of their problem, others have successfully overcome similar issues. Instead, it is the experience of acceptance by the community, thereby reducing feelings of isolation and alienation (Heath et al., 2005, 568). The essence of bibliotherapy lies in the participant transferring insights gained into daily life in the form of personal growth, changes in behavior, thinking, or even in how they experience life itself. This transfer is the final stage of the bibliotherapeutic process.

The purpose of this article is to demonstrate why bibliotherapy works by using literary fiction, therefore addressing both forms of bibliotherapeutic processes mentioned and both clinical and non-clinical contexts. I focus on literary fiction and its role in therapeutic reading, as the research I cite, as well as the literary theory I draw from, highlights the numerous advantages

of literary fiction in the context of therapeutic reading. These advantages are further explored in the third section of this discussion.

Reading and the Brain

Literary fiction is not typically read in a therapeutic way, that is, with a focus on the emotional and other underlying contexts of the stories. Nonetheless, the psychological experience of the reader during reading is processed through the same cognitive mechanisms as everyday experiences. This is a fundamental finding of so-called "natural narratology," first developed by Monika Fludernik and later elaborated by Marisa Bortolussi and Peter Dixon in their most significant book, *Psychonarratology*, which underpins contemporary scientific research on the effects of reading.

To achieve the goals of bibliotherapy – such as changes in specific personality traits of the reader, their mood, behavior, or self-image – many conditions must be met, from the reader's motivation for change to the suitability of the bibliotherapeutic context and execution procedure. From the perspective of cognitive literary studies, the most important characteristic of reading is its *embodiment*. Embodiment refers to the connection between the individual cognitive processes involved in thinking, language, and, ultimately, reading, and the motor and sensory areas responsible for processing the physical, bodily position in space/time and in relation to the environment.

There are at least four different definitions of embodiment: embodiment related to body anatomy, to bodily activity or action, to body representations, and to bodily modes of representation (Goldman and de Vignemont, 2009, 154). Embodiment does not merely refer to the belief that human cognition – as the set of all mental processes, from sensation to emotion to thinking – depends on the dimensions, activities, and functions of the human body. Goldman and de Vignemont also consider embodiment as a mode of bodily representation. Regarding the embodiment of language, they specifically highlight neuroscientific findings showing that embodiment can be understood as part of linguistic processing at the levels of syntax (Tettamanti and Moro, 2012, 924–925.) and semantics (Aziz-Zadeh and Damasio, 2008). On the other hand, Tettamanti and Moro emphasize the complexity of linguistic processing, arguing that it cannot be explained by a "comprehensive MNS theory" alone but requires "integration of internal computational mechanisms and percepto-motor systems" (Tettamanti and Moro, 2012, 932). For literary reading, this means that embodied cognition operates at the levels of syntactic, rhythmic, metric, and other textual transformations, as well as at the levels of semantic and narrative aspects.

But first, it is necessary to have a broad understanding of the neurobiology of reading. At this level, reading begins when light falls on the retina. Then after 150 milliseconds, the Visual Word Form Area (VWFA)³ is activated. Between 180 to 300 milliseconds after the signal

³ This is now a canonized hypothesis about the functioning of the visual cortex during reading, first introduced by Stanislas Dehaene in his book *Reading in the Brain*. For a more recent longitudinal study of this phenomenon, see Dehaene-Lambertz, Monzalvo, and Dehaene (2018).

reached the eye, it further travels via the dorsal and ventral pathways to Broca's and Wernicke's areas. And at the latest stage of reading a kind of holistic dispersed cognitive processing involves other interconnected brain centers, such as those responsible for long-term memory, social emotions, motor and sensory domains, depending, of course, on the content of what is read. Only 500–600 milliseconds after the stimulus has reached the eye do we become aware of what we have read. According to Paul Armstrong, this temporal description of reading could be termed the "asynchrony of reading," as it involves temporally segmented and spatially distributed processes throughout the brain that are far from being purely cognitive but are also emotional and motoric.

The reading process thus opens a space for parallel activations of various brain regions, which underpin diverse modes of experience. A special case involves emotional words, which create unique stimuli that activate the limbic system, including the amygdala and cingulate cortex, in both brain hemispheres. Lionel Naccache et al. (2005) demonstrate that the reception of subliminal emotional words, particularly those associated with fear, processed in the amygdala, influences activations in this area much earlier than the classic language-processing areas (Wernicke, Broca) are activated. According to some data (Nakamura, Inomata, and Uno, 2020), this activation is concurrent with the VWFA activation; according to others (Naccache et al., 2005), it follows with a minimal delay (50–150 milliseconds). This suggests that the amygdala can process the emotional value of words simultaneously with orthographic and prior to syntactic and lexical-semantic processing.

Equally important are studies on the role of the motor system during reading and, specifically, research on the connection between motor representations and linguistic processing. Based on the theory of embodied simulation, semantic processing at lexical and sentence levels is associated with the operation of mirror mechanisms in the motor and sensory cortex. In short, when we read about an action or a perception of a literary character, mirror mechanisms simulate the feeling of that action or perception in the real world, even if we have never experienced or performed it ourselves. These processes may even be intentionally sensitive, meaning that individual neurons are activated only if the movement action is purposeful, not when it is accidental (Armstrong, 2013, 179, 181).

Cognitive processes, occurring in this order and the interconnected temporal relationships, are also recursive – interactions between individual regions are not unidirectional but can occur bidirectionally. Thus, later cognitive processes can influence earlier ones. For example, attention may return to an earlier part of a text if a reader encounters an incomprehensible or unknown word, prompting a rereading process, which may involve spelling out the word or more precise phonetic or motoric processing, such as vocalizing the word aloud. More complex examples include rare cases when, due to a negative memory or severe trauma, a reader subconsciously skips a word that could provoke extreme negative emotions and threaten their well-being. This is only possible if emotional processing occurs concurrently with semantic processing, albeit separately and long before conscious awareness of the meaning of what is read.

If reading were a simple cognitive or even purely mental process, identical for all individuals and executed in exactly the same way every time, such influences would not exist. Thus, the

reader's intention, which is critical in bibliotherapy, as well as the text's intention (e.g., addressing a specific psychological issue), can evoke impressions and experiences that differ significantly from other readings of the same text. From this, I infer that in bibliotherapy, the effect does not stem solely from "meaning," though it is important, nor does it stem solely from the reader's intention, such as the desire to change a behavioral pattern, though this too is crucial. Instead, the effect arises from the combination of these factors within the broader context of reading, particularly at the level of preconscious and embodied experience. The process of therapeutic reading then builds on this experience, using guided discussions and questions to foster the reader's reflection and self-reflection, awareness of the problem, and its resolution.

The neurobiological foundations of reading processes, as briefly explained here, show that reading literary fiction affects the psyche of the individual reader. The experiences evoked during the reading of literary texts activate the same cognitive processes and occur in the same brain areas as they would if similar events were actually experienced. Conversely, literary fiction allows for a diversity of experiences in the "safety" of fictionality, something not possible in everyday real-life – and this is also not achievable by reading self-help books.

The Function of Literary Fiction in Therapeutic Reading

Considering the fundamental psychonarratological premise that reading literary fiction is embodied and occurs through the same cognitive mechanisms as any other reading, we can also explain certain peculiarities of reading literary fiction compared to reading non-literary factual texts, such as self-help manuals.

The first and most important characteristic of literary fiction is its *fictiveness*. Literary studies recognize several definitions of fiction: semantic, syntactic, and pragmatic. For bibliotherapy, the pragmatic definition is perhaps the most relevant. This means that the stories, poems, or dramas we read do not depict real people or events, but imaginary characters and perhaps even entirely impossible situations disconnected from the reader's real world and without direct influence upon it (Schaeffer, 2013). This allows for the establishment of a distance or distinction between the world of reading and the world of the story. The result is not alienation from the text but rather the opposite. A study by Pallaniappan et al. (2016) demonstrates that literary texts can be more effective for achieving long-term changes through bibliotherapy. However, the study does not specify which elements of literary texts contribute to these positive effects. On the other hand, certain cognitive studies (Altman et al., 2014) show that the effects of reading differ depending on whether readers believe they are engaging with fiction or factual material. Koopman and Hakemulder (2015) describe the effect of fictiveness in the reading process as "*stillness*", which they define as an "empty space or time created as a result of reading processes [...] a pause, a break, a moment of quietness, enabling readers to contemplate, for instance, a new way of perceiving the (over)familiar or to consider several narrative perspectives simultaneously" (Koopman and Hakemulder, 2015, 108). In this sense, fictiveness can be understood as a catalyst for achieving and emphasizing the effects of other textual characteristics, especially narrativity and literariness. If this is correct,

literary texts play a key role in the bibliotherapeutic process precisely because they are fictional. They need not be taken entirely seriously, and it is possible to establish a distance between the story's events and the reader's real life. This distance ensures a safe space where diverse experiences can develop, amplified through the content of literary texts, and their multilayered nature.

The second aspect of therapeutic reading, associated with fictiveness, is the mimetic nature (*mimesis*) of literary texts. Unlike self-help manuals, which are also commonly used in bibliotherapy, literary texts approximate reality by imitating it, as Aristotle observed. They create imagined worlds, events, and characters that live and act in a world similar to that of the reader – particularly from the perspective of the problem domain relevant to the reader's intent – yet not identical to it. This difference does not initially enable readers to recognize the problem developed in the literary text as their own but can serve as a catalyst for such recognition. Suzanne Keen, a proponent of ethical literary studies, considers this a fundamental characteristic of reading fiction, providing the reader with the freedom to either identify with or distance themselves from the problem. "For a novel reader who experiences either empathy or personal distress, there can be no expectancy of reciprocation involved in the aesthetic response. The very nature of fictionality renders social contracts between people and person-like characters null and void" (Keen, 2006, 212).

For the bibliotherapeutic process, this implies that literary texts, compared to non-literary ones, allow for a form of reading that can draw attention to textual elements that may not initially appear central but hold significant importance within the bibliotherapeutic context because they relate to the addressed problem. Literary narratives cover a wide range of themes, describing numerous places, characters, and actions, forming a more or less complete representation of the world. Within this, what literary theory calls *possible worlds*, literary texts incorporate themes embedded in convincing and comprehensive complexes of motifs and topics that are relevant to bibliotherapeutic intervention. What matters is that literary fiction constructs (*mimesis*) a coherent representation of a world where a problem – such as for example loneliness – can be addressed in a more convincing and complex way, situated within a network of other relationships and dynamics, e.g. working environment, school, family relationships etc.

This approach empowers the reader to take steps in the transfer relationship autonomously, according to their capacity and will. In the light of motivation for change, which is crucial in bibliotherapy, this therapeutic element is most significant. From the standpoint of literary axiology, such empowerment of the reader, enabling multilayered reading and multiple perspectives, points to qualities that suggest a higher value of the texts. This supports the claim – which is by no means self-evident – that higher-quality texts are more suitable for therapeutic reading than lower-quality, more transparent, and one-dimensional texts.

The third unique aspect of reading literary fiction in the therapeutic process is related to *narrativity*. The effects of reading narrative texts appear to differ from those of reading non-narrative texts, not only due to potential differences in content but also due to the narrativity itself. While many factual texts, such as self-help manuals written in the first-person singular, are narrative, many thematic and problem-based manuals lack narrativity. An interesting study

by Peter Dixon et al. (2020) suggests that “a paucity of mental access leads readers to make their own inferences about the character’s mental state, while the use of third-person narration leads readers to draw on their personal experience in order to appreciate the circumstances of the character” (Dixon et al., 2020, 177). The use of diverse narrative techniques can thus influence the potential effects of texts, particularly in the domain of empathetic engagement.

Research further shows that the narrative structure of literary texts enables specific reading modes and effects, such as immersion, identification, empathy, and compassion (Kidd and Castano, 2013), all of which play crucial roles in the bibliotherapeutic process. Narratives about characters, their actions, and their motivations allow readers to immerse themselves in the perspective of the narrated character or narrator, fostering empathetic engagement and connection.

Conclusion

The use of literary fiction in therapeutic processes, both as bibliotherapy and literary bibliotherapy, holds immense potential. Literary texts, more than other types of texts, enable the elicitation of specific emotions, beliefs, values, and feelings, which can serve as the focus of bibliotherapeutic interventions. In an era where societal mental health is under strain encouraging reading, especially therapeutic reading of literature, represents a meaningful method of addressing and bridging numerous mental health challenges faced by individuals and society as a whole. Affirming reading as a tool for fostering stronger mental health is not merely an act of personal conviction among therapists but is grounded in scientific findings from literary studies, the characteristics of literary texts, and the cognitive mechanisms involved in reading. For over two millennia, literary studies have known that reading literature works; today, we also understand why and how it can be used positively.

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