

## An Empirical Study on Bibliotherapy for Anxiety: A Case Study of Parenting Anxiety Among Female University Staff (Postprint)

**Authors:** Jiayu Lin

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### Abstract

[Purpose/Significance] Female university staff constitute a subset of working women. For working women who simultaneously assume maternal roles, this implies that the majority of female staff bear occupational responsibilities while also shouldering the missions of childbearing and child-rearing, endure greater parenting responsibilities and pressure, and must confront and manage various emotional disturbances, among which anxiety and parenting anxiety are particularly salient.

[Method/Process] Taking parenting anxiety as the entry point, we preliminarily selected female university staff experiencing parenting anxiety, utilized the Eysenck Emotional Stability Test as an assessment method for pre-intervention emotional status among candidates, thereby determining the experimental subjects for bibliotherapy. Through designing targeted reading programs, bibliotherapy was implemented in three progressively deepening stages, supplemented with various media and modalities to provide comprehensive guidance and intervention to subjects throughout the entire process. Finally, the therapeutic efficacy of reading was re-evaluated through questionnaires and the Eysenck Emotional Stability Test.

[Results/Conclusion] Test results demonstrated that this bibliotherapy achieved favorable therapeutic efficacy. For bibliotherapy targeting anxiety, it is essential to identify the appropriate entry point, prescribe books according to symptoms, combine symptomatic and fundamental treatment, ensure coordinated book selection with primary and supplementary elements, and progressively deepen the bibliotherapy process.

## Full Text

# An Empirical Study of Reading Therapy for Anxiety: A Case Study of Child-Rearing Anxiety Among Female University Staff

Lin Jiayu

Library of Guangdong University of Technology, Guangzhou 510006

## Abstract

**[Purpose/Significance]** Female university staff represent a subset of working women who, in their dual roles as professionals and mothers, bear the dual responsibilities of career demands and child-rearing. This places them under considerable pressure related to parenting, requiring them to confront and manage various emotional disturbances, particularly anxiety and child-rearing anxiety. **[Method/Process]** This study targeted child-rearing anxiety as its entry point, initially selecting female university staff experiencing such anxiety. The Eysenck Emotional Stability Test was administered to assess participants' pre-intervention emotional states and determine the final sample for reading therapy. A targeted reading program was designed and implemented in three progressively intensive stages, supplemented by diverse media and methods for continuous guidance and intervention throughout the process. Post-intervention assessments were conducted using both a survey questionnaire and the Eysenck Emotional Stability Test to evaluate therapeutic outcomes. **[Result/Conclusion]** The results demonstrate that this reading therapy intervention was effective. Reading therapy for anxiety requires identifying an appropriate entry point, prescribing suitable books for specific symptoms, combining symptomatic and fundamental treatment, using complementary book combinations with primary and secondary texts, and gradually deepening the therapeutic process.

## 1. Introduction

Domestic empirical research on bibliotherapy has primarily focused on university students and adolescents, with limited studies on other populations such as young, middle-aged, or elderly university staff. To date, no published studies have examined reading therapy for child-rearing anxiety among female university staff in China. Female university staff epitomize the challenges faced by working mothers, who must simultaneously pursue their careers while bearing the responsibilities of nurturing and educating their children. This dual burden exposes them to heightened parenting pressures and various emotional disturbances, with anxiety and child-rearing anxiety being particularly prominent.

Several domestic surveys underscore this issue. In May 2017, UC Big Data released China's first "Anxiety Index Report for Chinese Mothers," revealing that the top ten most anxious cities were all first- or second-tier metropolitan

areas. Among age groups, post-80s mothers exhibited the highest anxiety levels, followed by post-90s and post-70s mothers. The three primary sources of maternal anxiety were children's education, children's health, and marital-family relationships. In December 2017, the Mental Health Center of Zhejiang University School of Medicine (Hangzhou Seventh People's Hospital) distributed 50,000 questionnaires to urban populations regarding stress sources, with big data analysis indicating that children's education was a major trigger for female anxiety. That same year, the hospital's anxiety disorder clinic treated 30,000-40,000 patients, many of whom sought treatment for insomnia rooted in anxiety.

Additionally, a 2017 white paper titled "Health Status of Working Women," based on a survey of 20,000 working women in Beijing, Shanghai, Guangzhou, and Shenzhen, found that 75% of working women experienced suboptimal health. Nine sub-health conditions had become commonplace among professionals, including memory decline, poor sleep, chronic fatigue, and cervical pain. Middle-aged working women, in particular, face greater psychological strain due to physiological changes, age-related concerns, childcare responsibilities, family obligations, and career pressures, making their emotional sub-health issues an urgent concern for both individuals and society.

Motivated by these external findings and drawing upon domestic and international bibliotherapy research, and with guidance from psychological counselors, this study attempts to extend anxiety-relieving reading interventions to more parents. Anxiety manifests in various forms, necessitating targeted treatment through carefully selected "prescriptions" to achieve optimal therapeutic effects. This research specifically selected female university staff with child-rearing anxiety as participants, using parenting anxiety as an entry point to explore treatments for alleviating anxiety among middle-aged women. The study aims to promote bibliotherapy for the general public and assist more women suffering from emotional sub-health.

## 2. Research Approach and Methods

To effectively implement this reading therapy program, the research team conducted extensive preparatory work, establishing a project group that reviewed domestic and international bibliotherapy research and protocols. With recommendations from psychological counselors and experts, the following overall research design was developed:

1. A survey questionnaire on "Child-Rearing Anxiety Among Female University Staff" was designed and administered to staff at selected universities in Guangdong Province to initially identify participants experiencing parenting anxiety. The Eysenck Emotional Stability Test was then used to assess pre-intervention emotional conditions and finalize the research sample.
2. Given that participants were middle-aged working women caring for both

children and elderly parents, and considering geographical and time constraints, all reading therapy guidance and interventions were conducted online. QQ and WeChat groups were established for material distribution, supplemented by individual case interviews, voice calls, emails, and phone communications. Video, music, and images were also employed to provide continuous guidance throughout the process, with participants evaluated at each stage.

3. The reading therapy consisted of three stages with distinct requirements for each (see Section 4). During stages two and three, participants were required to not only read and write reflections but also complete various exercises as guided by the texts, documenting their practical outcomes. They were instructed to apply the books' guidance in communicating with their children and others, and to reinforce their speech, behavior, and thinking patterns through consistent practice. For participants with unstable reading schedules or visual fatigue, audio recordings prepared by the research team or audiobook apps were provided as supplements.
4. Post-intervention assessments were conducted using the “Child-Rearing Anxiety Among Female University Staff” questionnaire and the Eysenck Emotional Stability Test to evaluate outcomes. Pre- and post-intervention scores were compared using a single-group pretest-posttest design without a control group to determine treatment effectiveness.

It is worth explaining why the Eysenck Emotional Stability Test was chosen over anxiety scales. Initial exploration by the researcher through personal experience and case studies revealed that child-rearing anxiety often represents only the surface manifestation; the underlying cause frequently lies in cognitive perspectives or thinking patterns regarding problem perception and management. Consultations with psychological counselors also confirmed that anxiety emotions do not necessarily indicate an anxiety disorder, while anxiety scales are primarily designed for diagnosing anxiety disorders and grading their severity. For self-reported anxious participants, such scales cannot detect other psychological conditions. The Eysenck test, however, can identify other interfering emotions accompanying anxiety, enabling more comprehensive treatment and better therapeutic outcomes. Developed by Professor Eysenck of the University of London, this test comprehensively assesses current mental health status across seven dimensions: inferiority feelings, depression, anxiety, obsessive-compulsive tendencies, dependency, suspiciousness, and guilt—making it suitable for evaluating the psychological conditions of middle-aged women in this study.

### 3. Selection of Experimental Subjects

**3.1 Screening Questionnaire and Results** With input from psychological counselors and education experts, the research team designed the “Child-Rearing Anxiety Among Female University Staff” questionnaire for initial participant selection. The evaluation method excluded questions 1, 2, and 24;

participants selecting “yes” for more than seven of the remaining items were considered to be experiencing child-rearing anxiety.

The questionnaire was distributed both online and offline, yielding 128 valid responses. Participants who agreed to question 24 (“Willing to participate in bibliotherapy to alleviate parenting anxiety”) proceeded to additional questions about time availability, process requirements, and other logistics; those who declined concluded their participation. The results identified 47 participants experiencing parenting anxiety, of whom 41 expressed willingness to participate in bibliotherapy. However, in the subsequent survey regarding available time, energy, physical condition, and environment, only 22 of these 41 candidates met the study’s requirements. The remaining candidates were temporarily unsuitable due to various constraints. Partial survey results are shown in .

**3.2 Eysenck Emotional Stability Test Results** The 22 preliminarily selected participants completed the Eysenck Emotional Stability Test, with results shown in . The test revealed that 15 participants exhibited explicit anxiety symptoms: 3 mild, 9 moderate, and 3 severe cases. Additionally, 7 participants did not show explicit anxiety but manifested other emotions such as depression, inferiority, obsession, dependency, guilt, and suspiciousness. This finding indicates that self-reported parenting anxiety may mask underlying conditions like inferiority, depression, or obsessive-compulsive tendencies, necessitating targeted treatment for these accompanying symptoms.

Since this reading therapy specifically targeted explicit anxiety, participants without manifest anxiety in the Eysenck test were not selected. As anticipated, the 15 anxious participants also presented with additional emotional sub-health issues, ranging from 2 to 4 concurrent symptoms, many at moderate or severe levels (see ). None of the 15 participants exhibited guilt or suspiciousness symptoms, so these were excluded from . To protect privacy and facilitate data tracking, English letters were used to identify participants.

## 4. Implementation Process of Reading Therapy

**4.1 Book Selection and Rationale** Book selections were based on numerous educational and psychological texts, combined with recommendations from reading networks such as Douban. After review by the researcher and team members, the following “prescription” was developed (see ):

**Stage One (“Guide”):** *Personal Experiences with Educational Anxiety* (internal material compiled by the research team)

**Stage Two (“Symptomatic Treatment”):** *Positive Discipline; How to Talk So Kids Will Listen & Listen So Kids Will Talk*

**Stage Three (“Fundamental Treatment”):** *The Drama of the Gifted Child* (required); *You Can Heal Your Life* (required); *Feeling Good: The New Mood Therapy* (required); *Overcoming Inferiority* (supplementary); *Overcoming OCD: Reclaiming Your Beautiful Life* (supplementary)

Due to privacy concerns and wariness of outsiders, most female staff do not easily open up to the research team. Moreover, they have established perspectives on society and life that require time to shift. Finding time to read after work and childcare responsibilities, while building confidence in bibliotherapy and completing intensive exercises, presents significant challenges. Therefore, the first hurdle was establishing emotional trust and confidence in the therapy. This required a “guide” to enhance the efficacy of subsequent “primary medicines” by serving as a catalyst. The guide was *Personal Experiences with Educational Anxiety*, compiled by the research team based on the researcher’s personal journey through anxiety and recovery via reading therapy, supplemented by other successful cases, recent examples of Chinese parental anxiety and their consequences, and expert opinions. This material used authentic personal and research experiences to build participants’ confidence, evoke empathy, and prompt reflection on their own educational views and behaviors, thereby establishing an emotional connection between the research team and participants. This “guide” was to be consumed quickly—read in a short timeframe. Given participants’ time and geographical constraints, the material was distributed electronically for rapid reading, reflection on their current educational situations, and written reflections.

Stages two and three comprised the “primary medicines,” combining symptomatic and fundamental treatment. Stage two books provided concrete solutions and methods following participants’ resonance and reflection, emphasizing changes in language and action to alleviate parenting anxiety. The two required texts—*Positive Discipline* and *How to Talk So Kids Will Listen & Listen So Kids Will Talk*—were to be read carefully, with participants identifying their common parenting mistakes, posting them in prominent locations at home, and inviting children and family members to monitor their progress through repeated practice.

While these books offered practical methods for anxious parents, they addressed only symptoms. Even if participants found specific solutions to their parenting anxiety, various anxieties would persist once the theme shifted. Therefore, a “fundamental” approach was needed—this was the purpose of stage three books.

Stage three books addressed the root causes of anxiety, emphasizing changes in thinking patterns and life attitudes from a cognitive perspective to resolve emotional disturbances and establish positive cyclical thinking modes. This stage helped participants recognize flaws in their thinking, identify anxiety sources, and train to resolve various anxiety interferences. Based on Eysenck test results, the following books were selected: *The Drama of the Gifted Child* (required), *You Can Heal Your Life* (required), *Feeling Good: The New Mood Therapy* (required), with *Overcoming Inferiority* and *Overcoming OCD* as supplementary readings for those with corresponding symptoms. Participants were required to repeatedly practice and reinforce their speech, behavior, and thinking patterns according to book guidance.

#### 4.2 Practice at Each Stage 4.2.1 Stage One (“Guide”) Effects:

Through rapid reading of *Personal Experiences with Educational Anxiety*, all 15 participants experienced resonance and reflection, writing profound reflections on their educational views and behaviors. Many noted that the material told “their own story,” with one stating: “My anger gradually disappeared while reading, replaced by deep guilt toward my child.” Participants expressed eagerness to proceed to stage two, hoping to find solutions. This guide successfully established emotional connections and trust, laying a foundation for subsequent therapy (see ).

**4.2.2 Stage Two (“Symptomatic”) Effects:** Stage two books provided concrete methods requiring simultaneous reading and practice, with continuous reinforcement of communication skills. Fourteen participants (participant L withdrew due to health, work, and child’s illness) consistently wrote reading notes and documented their improvement process, achieving positive results from both required books. Participants reported improved communication with children, more positive learning and life attitudes, reduced anxiety, and greater confidence in parent-child relationships. However, several noted that changing ingrained patterns of expressing anger was challenging—“easier said than done.” They experienced repeated adjustments and training, posting book excerpts on walls, bedside tables, and dining areas, with family members participating in monitoring and scoring. Many learned the “kind and firm” parenting approach, recognizing that “spanking only produces short-term effects with negative long-term consequences.” When angry, they practiced “positive time-outs” before communicating using “I feel... because... I hope...” frameworks, progressing from awkwardness to proficiency and receiving positive feedback from families and the research team. Results are shown in .

**4.2.3 Stage Three (“Fundamental”) Effects:** After completing stage three, 12 participants (participants D and N withdrew due to health and family issues) described the experience as “transformative and growth-inducing.” They reported that “people and events became clearer rather than chaotic,” and that “deep reading brought liberation, releasing past burdens and bringing physical relief, with tears shed through self-re-discovery.” *Feeling Good: The New Mood Therapy*, widely used for depression and anxiety, addresses various emotions including guilt, tension, shame, inferiority, melancholy, sadness, loneliness, and frustration, providing practical methods requiring written exercises and adjustments during reading. Some participants found its academic language challenging, so combined reading and audiobook listening was recommended, with note-taking of impactful words to engage auditory, visual, and tactile senses. This book was to be completed within four weeks, with reports on exercise frequency and effectiveness.

*The Drama of the Gifted Child* and *You Can Heal Your Life* served as psychological primers. These relatively short, accessible books with vivid case studies penetrated participants’ hearts, initiating cognitive adjustments. *The Drama of the Gifted Child* guided reflection on childhood experiences and potential

trauma affecting adult thinking, while *You Can Heal Your Life* helped identify psychological patterns behind emotions and diseases for self-adjustment. Both were to be completed within three weeks for intensive cognitive restructuring. Supplementary books targeted specific symptoms identified in initial testing. Results are shown in .

## 5. Final Assessment Results

After completing all three stages, participants were reassessed using the “Child-Rearing Anxiety Among Female University Staff” questionnaire (excluding items 1, 2, and 24) and the Eysenck Emotional Stability Test. Three participants (D, L, N) withdrew during stages two and three due to health, work, or family reasons, leaving 12 participants who completed the full program.

**5.1 Post-Intervention Survey Results** All selected participants had initially tested positive for child-rearing anxiety. Post-intervention results showed only two participants (G and O) remained in the anxiety range, yielding an effective treatment rate of 83.3%.

**5.2 Eysenck Emotional Stability Test Results** To further validate results, the Eysenck test was readministered. Post-intervention results (see ) showed significant changes from baseline (see ). Only three participants exhibited anxiety symptoms post-treatment, representing a 75% effective treatment rate. Symptom severity decreased from moderate/severe to mild/moderate. Concurrently, accompanying symptoms of depression, inferiority, obsession, and dependency also diminished.

To visualize changes, pre- and post-test results for the 12 participants were compiled in [Figure 1: see original paper], clearly demonstrating reduced anxiety and accompanying symptoms. Statistical analysis using SPSS paired-samples t-test yielded  $P = 0.007298$ . With  $0.01 \geq P \geq 0.001$  indicating high statistical significance, these results confirm the therapy’s significant effectiveness.

## 6. Conclusion

This empirical study of reading therapy for female university staff, conducted with reference to domestic and international research and under professional guidance, overcame numerous practical challenges to achieve positive outcomes. Key conclusions include:

1. Reading therapy for anxiety requires thorough assessment and classification of anxiety-related problems to identify an appropriate entry point, prescribe suitable books, and gradually deepen treatment while addressing accompanying emotional disturbances with complementary texts for optimal results.
2. Establishing trust and confidence through introductory materials (“guides”) enhances the efficacy of primary texts. Interventions should be

adjusted based on participants' time and physical conditions, combining visual reading with audio formats and requiring consistent practice of behaviors and thinking patterns.

3. Combining symptomatic and fundamental treatment through complementary book combinations—primary and secondary texts that progressively induce deeper reflection—can transform thinking patterns and attitudes from a cognitive perspective, establishing positive cyclical thinking modes as a fundamental solution to anxiety.

Limitations include sample size constraints and the need for continued research integrating more psychological and interdisciplinary perspectives. Future work should further explore how to deeply assess and classify anxiety, understand interactions between anxiety and other emotions in bibliotherapy, and address challenges including participants' limited reading time, comprehensive evaluation methods, and design of intensive reading protocols with appropriate media for different populations.

## References

- [1] Wang Bo. Reading Therapy [M]. Beijing: Ocean Press, 2014.
- [2] Qiu Hongzhong. Theory and Practice of Art Psychotherapy [M]. Guangzhou: Jinan University Press, 2010.
- [3] Gong Meiling, Xu Haijun, Lei Juxia, et al. Bibliotherapy Prescription Analysis and Compatibility for Depression Caused by Childhood Trauma [J]. *Journal of Academic Libraries*, 2016, 34(2): 80-88.
- [4] Gong Meiling, Yu Xuemei, Ji Baoping, et al. Bibliotherapy Prescription Analysis and Compatibility for College Student Depression Caused by Romantic Breakup [J]. *Journal of Academic Libraries*, 2017, 35(3): 36-43.
- [5] Yang Hao. Intervention Study on Academic Emotions of High School Students [D]. Nanchang: Nanchang University, 2013.
- [6] Wang Bing. The Influence of Inspirational Reading on Emotional Intelligence of High School Students from the Perspective of Bibliotherapy [D]. Tianjin: Tianjin Normal University, 2017.
- [7] Liu Binzhi. On the Application of Bibliotherapy in Post-Earthquake Psychological Reconstruction of Adolescents in Disaster Areas [J]. *Library*, 2014(5): 102-106.
- [8] People's Daily Online. Chinese Mothers "Anxiety Index" Report: Post-80s Mothers Become the Most Anxious Group [EB/OL]. [2018-10-14]. <http://bj.people.com.cn/n2/2017/0514/c82840-30178380.html>.
- [9] Sohu.com. Are You Tired? 50,000 Surveys, 16 Conclusions, How Many Apply to You? [EB/OL]. [2018-10-28]. [http://www.sohu.com/a/213297295\\_456096](http://www.sohu.com/a/213297295_456096).
- [10] NetEase News. White Paper on Occupational Women's Health Released: 75% in Sub-Health Condition [EB/OL]. [2018-10-25]. <http://news.163.com/17/0425/15/CISJ7Q2300018AOP.h>
- [11] HAZLETT-STEVENSON S H, OREN Y. Effectiveness of mindfulness-based stress reduction bibliotherapy: a preliminary randomized controlled trial [J]. *Journal of clinical psychology*, 2017, 73(6): 626-637.

- [12] SHARMA V, SOOD A, PRASAD K. Bibliotherapy to decrease stress and anxiety and increase resilience and mindfulness: a pilot trial [J]. *Explore the journal of science and healing*, 2014, 10(4): 248-252.
- [13] REEVES T. A controlled study of assisted bibliotherapy: an assisted self-help treatment for mild to moderate stress and anxiety [J]. *Journal of psychiatric & mental health nursing*, 2010, 17(2): 184-190.
- [14] Che Wenbo. *Encyclopedia of Psychological Counseling* [M]. Hangzhou: Zhejiang Science and Technology Press, 2001.
- [15] 525 Psychology Network. Eysenck Emotional Stability Test [EB/OL]. [2018-10-08]. <https://www.psy525.cn/ceshi/84361.html>.
- [16] Zhang Lipin. Research on Bibliotherapy Intervention for Police Occupational Stress [J]. *Library and Information Service*, 2014, 58(S2): 133-135.

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## An Empirical Study of Anxiety in Reading Therapy

Lin Jiayu

Guangdong University of Technology Library, Guangzhou 510006

**Abstract:** [Purpose/Significance] Female workers in colleges and universities are part of the epitome of women in the workplace. Women in the workplace are also mothers, which means that most female workers bear the mission of nurturing life and educating children while undertaking their jobs, bearing more parenting responsibilities and pressures, and needing to face and deal with various emotional distresses, among which anxiety and parenting anxiety are particularly prominent. [Method/Process] This topic took parenting anxiety as the starting point, preliminarily selected female workers in colleges and universities with parenting anxiety, used the Eysenck emotional stability test as an evaluation method for the emotional state before intervention, and then selected and determined the experimental objects of reading therapy. Through the targeted design of reading programs, three stages of in-depth reading therapy were carried out, supplemented by a variety of media and means to guide and intervene in the whole process. [Result/Conclusion] The test results showed that the reading therapy had a significant effect. Reading therapy for anxiety needs to find out the starting point of symptoms and prescribe the right medicine for the symptoms. Combining the treatment of symptoms with the treatment of root causes, books are compatible with each other, and gradually go deep into reading therapy.

**Keywords:** anxiety; female college workers; parenting anxiety; reading therapy (bibliotherapy); Eysenck emotional stability test

*Note: Figure translations are in progress. See original paper for figures.*

*Source: ChinaXiv — Machine translation. Verify with original.*