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RESEARCH ARTICLE

The Psychosocial Benefits of Biblioguidance Book Clubs

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─────────────── ABSTRACT ───────────────

BACKGROUND: Pedagogical approaches that support young people's well-being and maximize their potential are among the *Journal of School Health* research priorities. A unique form of observational learning called biblioguidance could be a pedagogical approach.

METHODS: We, a team of researchers and teachers, implemented biblioguidance book clubs with 10th-grade health education students. While the initial focus was health literacy skills, we also aimed to generate psychosocial benefits. Those benefits are the focus of the current descriptive phenomenological research. A final book club reflection captured the benefits students received and documented their transformation. We randomly selected 42 reflections from the sample pool (n = 168) and coded them via descriptive document analysis.

RESULTS: The results indicate that the book clubs provided psychosocial benefits. Students identified with the stories and characters, gained insight into others' perspectives, lived experiences, and "ways of the world," and were, in many ways, transformed. Some students even experienced catharsis, citing hope, validation, and feeling less alone.

IMPLICATIONS FOR SCHOOL HEALTH POLICY, PRACTICE, AND EQUITY: Biblioguidance book clubs could offer an innovative pedagogical approach to advance students' psychosocial well-being and engage them as active participants in their own learning and health.

Keywords: biblioguidance and bibliotherapy; young adults and adolescents; curriculum and instruction; young adult literature; National Health Education Standards; social cognitive theory.

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Schools should foster hope, inclusivity, and optimism, advance the well-being of their students, and support them in realizing their personal and academic potential. Curricular approaches that nurture and sustain these outcomes are among the *Journal of School Health* 2022-2024 research priorities.[1,2] Committed to these ideals, we, a team of health education teachers and academic researchers, sought to engage 10th-grade students in developing health literacy skills while also receiving psychosocial benefits.

Attending to young people's psychosocial well-being is woven throughout the Whole School, Whole Child, Whole Community model. The model also promotes engaging them as active participants in their own health and learning.[1] This article depicts how we

implemented a unique form of observational learning called biblioguidance as a forum to generate these outcomes. Biblioguidance book clubs were the primary intervention, and a descriptive phenomenological research approach was used to study the benefits that students received and any transformation that occurred. So that others may expand our work, we share a hyperlink to an instructor's guide we created for this purpose.

Biblioguidance

The basic premise of biblioguidance, also called bibliotherapy, is that information, guidance, and solace can be found through reading.[2] Per Shrodes,

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''founder'' of biblioguidance, and other researchers, these benefits are particularly true with fiction.[3-5] By vicariously living the events in a story, readers pass through 3 psychosocial phases during which they identify with the characters, gain insight, and perhaps experience catharsis.[4,6-8] Those phases include, but are not limited to, the following phenomena:

1. Identification: By comparing and verbalizing emotions and thoughts about the characters and the story, readers might experience or engage in:

   - Connection and affiliation
   - Self-examination and appraisal of beliefs, values, feelings, or experiences

2. Insight: By observation and interpretation, readers might gain insight into:

   - Others' lived experiences, perspectives, values, attitudes, and beliefs
   - Information, skills, and behaviors
   - Cause and effect relationships and ''ways of the world.''

3. Catharsis: By connecting to characters and the story, readers might experience:

   - Feelings of solace, hope, or relief
   - Dispelled feelings of isolation
   - Reduction of anxiety
   - Freedom to discuss fears or problems
   - Validation of self and others

One could liken biblioguidance to observational learning. Per social cognitive theory, observational learning is the process whereby people learn through the experiences of credible others.[9] In the case of reading fiction, the reader witnesses characters performing acts they otherwise might not have thought themselves capable of or gain insight into others' ''worlds'' and ways of thinking. These new understandings could shift readers' attitudes and beliefs and alter behaviors.[10]

Biblioguidance and Youth

With youth, biblioguidance has been built into the classroom curriculum, extracurricular book clubs, and support groups. In those settings, students read fiction literature to observe how fictional characters find support for their social and emotional needs and transcend challenges.[11,12] Fictional characters represent real-life experiences that are both credible and removed, thus allowing for a range of reader responses. When coupled with reflective journaling and discussion, young people can explore their feelings and attitudes, discuss characters' situations, connect to their lived experiences and perspectives, and

deconstruct otherwise complex societal expectations and social issues.[13-15]

The recorded benefits of fiction-based biblioguidance with youth include insight into personal dilemmas and one's identity, a new appreciation for one's own and other's cultures, improved coping and interpersonal skills, increased self-esteem, new hope, a sense of agency, empathy, and feelings of empowerment.[12,16-19] Other benefits include improved social-emotional competency and self-efficacy to advocate for health.[20-23] These psychosocial benefits can be particularly beneficial for youth who experience discrimination, marginalization, and oppression, as they can find affirmation in shared experiences. Readers who do not experience hostile social forces gain a broader worldview. While not all experiences and benefits qualify as cathartic, they can be psycho-socially transformational.

Biblioguidance and Reader Response Theory

The transformation that occurs when reading fiction aligns with a literacy sciences theory called transactional reader response. According to this theory, reading is a transaction between the reader, the author, and the text.[24,25] Readers' personal experiences influence their interpretation of the text, and the author's words (ie, the text) influence readers. Per Wilhelm, this transaction consists of the following 10 dimensions:

Evocative

1. Entering the story world.
2. Showing interest in the story.
3. Relating to characters.
4. Seeing the story world.

Connective

5. Elaborating on the story world.
6. Connecting literature to life.

Reflective

7. Considering significance.
8. Recognizing literary conventions.
9. Recognizing reading as a transaction.
10. Evaluating an author and the self as the reader.

In passing through these dimensions, readers become aware of other realities and are reshaped and empowered.[24,25] This transformation is not unlike the phenomena proposed to occur in bibliotherapy.

The caveat to transactional reader response theory is that only expert readers experience transformation.[25] In multi-academic-level courses like health education, low-level readers who cannot evoke the story world or connect with characters and events could be

disadvantaged. In the context of biblioguidance, that could produce disparities in the way students receive its psychosocial benefits. However, Wilhelm contended educators can conjure transformation via strategically guided reading prompts that push all readers through the 10 dimensions.[25] Our project included guided reading prompts rooted in these dimensions.

Project Aims

Because using novels might not be commonplace in the health education classroom, our primary aim was to advocate for their use in advancing students' psychosocial well-being while also teaching content area skills. We also aimed to study whether students experienced a transformation and what that transformation was. This latter aim is particularly relevant to classroom settings where catharsis may not be the goal. To that end, our research questions were:

1. What are the psychosocial benefits of fiction-based biblioguidance book clubs in the health education classroom?
2. Does evidence suggest that students experienced psychosocial transformation? Of what does that transformation consist?

METHODS

Participants

Our study occurred during the 2021-2022 academic year in a required 10th-grade health education course at a suburban school in Illinois. The researchers chose this school and this course based on an existing research partnership with the teachers. Illinois Report Card showed this school's enrollment to be ~1500 students, of which 86% identify as white, 6% as Hispanic, 4% as Asian, and <1% each as black, American Indian, or Pacific Islander. Economically, the majority of the school's community is middle or upper-class.[26] Per IRB's guidelines, students obtained written parental consent and assented to participate in the study. Of 215 students, 168 met this requirement. All students participated in the intervention as part of regular instruction. For research, we only reviewed the study participants' data. Students did not know which classmates participated, and we de-identified all data.

Procedure

The project centerpiece was a biblioguidance book club to enhance health literacy instruction and provide psychosocial benefits. Specifically, we wanted to generate a common observational learning experience that would allow them to see the National Health Education Standards (NHES) performed in

real-world contexts and provide a common point of reference for content area discussions throughout the semester. These book clubs consisted of students choosing and reading young adult novels, responding to guided reading prompts in electronic journals, and sharing responses in group discussions. This section describes those activities and provides a timeline for implementation. Readers seeking detailed descriptions of the activities are encouraged to view our implementation guide @authors' website and other publication.[27]

Novel selection and book club timeline. To select the novels, we assembled a list of ''maybes'' from health-themed reading lists compiled by international (eg, the International Literacy Association) and national organizations (eg, Teaching for Change). The latter organization aimed to include novels with diverse characters from underrepresented populations. We also reviewed contemporary books identified in the biblioguidance literature. With the school librarian, we narrowed our list based on reading level, ratings, and availability. The texts used in the current study and their health-related topics appear in Table 1. From our final list, students chose a preferred book. Then, students choosing the same book formed ''clubs'' of 3-4 students. The book clubs took place over 6 weeks to allow students time to read their books, respond to the guided reading prompts, and participate in discussions. This timespan also allowed for other instructional units to take place. Figure 1 depicts the pacing guide.

Guided reading prompts. Students responded to guided reading prompts in electronic journals and then again in their book club groups. We rooted the prompts and their sequence in Wilhelm's 10 dimensions of reader response. In *You Gotta BE the Book*, he lists prompts for each dimension with the understanding that educators select those best fit for the audience and modify them to fit the context and book content.[25] Further, educators are invited to supplement the prompts with content area questions. With our project, we wanted to allow students to vicariously observe the NHES in a real-world context.

To select the reader response prompts, the research team reviewed and discussed those that best attended to psychosocial outcomes and best fit the book club implementation. The prompts we chose appear in Table 2. Also in Table 2 are the NHES-related prompts we wrote to supplement Wilhelm's reader response prompts. Those prompts are based on the NHES grade-level indicators addressed in the content area instruction that took place simultaneously (refer to Figure 1). Those NHES were:

- #1: Comprehend health promotion and disease prevention concepts to enhance health.

Table 1. **Books Used and Their Predominant Health-Related Topics and Skills**

	All American Boys; Jason Reynolds	Boy 21; Matthew Quick	Firekeeper's Daughter; Angeline Boulley	Gabi, a Girl in Pieces; Isabel Quintero	Pumpkin; Julie Murphy
Health advocacy	X	X	X	X	X
Social inequities, prejudice, discrimination	X	X	X	X	X
Relationships (family, friends, partners)	X	X	X	X	X
Communication	X		X	X	X
Conflict management	X		X		
Self-management		X	X	X	X
Mental health		X	X		
Substance use and abuse			X	X	
Violence, bullying, and rape	X	X	X	X	X
Gender, sexual identity				X	X
Sexual health			X	X	

Figure 1. **Biblioguidance Weekly Pacing Guide**

	Day 1	Days 2-4	Day 5
Week 1	Project Introduction Homework: Journal #1	Content area instruction	Book Club Discussion #1 Homework: Journal #2
Week 2	Content area instruction	Content area instruction	Book Club Discussion #2 Homework: Journal #3
Week 3	Content area instruction	Content area instruction	Book Club Discussion #3 Homework: Journal #4
Week 4	Content area instruction	Content area instruction	Book Club Discussion #4 Homework: Journal #5
Week 5	Content area instruction	Content area instruction	Book Club Discussion #5 Homework: Final Reflection

- #2: Analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.
- #4: Use interpersonal communication skills to enhance health and avoid or reduce health risks.
- #5: Use decision-making skills to enhance health.
- #8: Students will demonstrate the ability to advocate for personal, family, and community health.[22]

When writing the NHES-related prompts, we aimed to keep them generic enough so that they would apply to any of the selected books, and we organized them into 5 sets to keep the work manageable for students. While these NHES were the content area focus for our project, other educators should choose learning standards related to their curricular goals.

Project implementation. As indicated above, students responded to the guided prompts in electronic journals and group discussions. Teachers distributed and received the journal entries via Google Docs. Students responded to the reading prompts in preparation for the group discussions. Like book clubs, these were relationship-building safe spaces where students could identify with others, share perspectives, and gain insight into the most recent journal entries. Because this was the first time most students had participated in a book club, the teachers also modeled what conversations might look like. The *Read Across America* website has suggestions for doing this and other tips for teachers seeking to host book clubs.[28]

Table 2. **Guided Reading Prompts and Suggested Timeline**

Prompt Set	When
Set #1—Evocative dimension	Week 2: ∼10%-20% of book completed

Entering the story world. Reader stimulates their prior knowledge.

1. When you first saw the book, what did you think the book was going to be about?

Showing interest in the story. Reader understands, makes predictions, and forms expectations about the story's plot.

2. What may the main character(s) be dealing with?

NHES 1—Comprehend concepts

3. What health-related topics and behaviors do you think the book might address? What is the relationship between those topics, behaviors, and someone's health?

Set #2—Evocative dimension	Week 3: ∼20%-30% of book completed

Relating to characters. Reader becomes a presence in the story and forms opinions about the characters.

1. Describe the main character's personality using examples. (If more than one main character, choose).
2. What personal experiences have you had that help you better understand these characters?

Seeing the story world. Reader constructs mental images of characters, settings, and situations of the story.

3. Describe where the story takes place. Could the story also take place here?

NHES 2—Analyze influences

4. What is an influence?
5. What or who do you think influences your health beliefs and behaviors?
6. Why is it important to be aware of influences on your beliefs and behaviors?

Set #3—Connective dimension	Week 4: ∼50%-60% of book completed

Elaborating on the story world. Reader's role is a detective and generates meaning beyond the text's surface.

1. Change out one of the characters, the setting, a situation, or the event's timing that would make the story different. Identify the change and describe what would be different.

Connecting literature to life. Reader makes connections between their personal experience and the characters' experience.

2. What has happened in your life that is similar to things happening to characters in the story?
3. Do any of the characters remind you of people you know? Does the story help you better understand the people you know with similar qualities or situations? Explain.

NHES 4—Interpersonal communication

Decide whether to focus on communication techniques, conflict management, or refusal skills, and boundary setting. Then, select the appropriate pair of prompts below:

Communication techniques

4. Select a character from the story. Evaluate their communication skills in terms of the way they analyzed the context or situation, listened to others, and spoke. Use examples.
5. What could you learn from this character about how to or how not to communicate

Conflict management

4. Think about a situation in which there was a conflict between characters. What was the conflict? Was the conflict managed well? What did the character do well or not do well when it came to recognizing/owning that there was a conflict, allowing for the explanation of perspectives, and finding a compromise? Explain how so.
5. What could you learn from this situation or others in the story about addressing conflict?

Refusal skills and boundary-setting

4. When was a time in the story that a character used or did not use boundary-setting or refusal skills to stand by a healthy decision? Describe that situation. What did that character do well or not do well when honoring their feelings, stating their boundary, and defending them?
5. What could you learn from this situation or others in the story about setting boundaries or using refusal skills?

Prompt Set	When
Set #4 — Reflective dimension	Week 5: ~60%-80% of book completed
Considering significance. Reader questions which character(s) and event(s) contributed to the importance of the text.	
1. Tell me about the parts of the story you like most or least and why.	
Recognizing literary conventions. Reader detects conventional moves made by the author and uses their schema to establish meaning.	
2. Select a character that is not the main character. If that character told the story, how would it be different?	
Recognizing reading as a transaction. Reader acknowledges that the meaning lies within the author, the text, and the reader.	
3. What would you say if the author asked you how to improve the story?	
NHES 5 — Decision-making	
4. Identify one impulsive and one responsible decision made by characters in the story. Describe those decisions and explain what made them impulsive and responsible. What strategies did they use or not use?	
5. Thinking about those characters' decisions, what do you want to remember the next time you make a decision like theirs?	
Set #5 — Reflective dimension	Week 6: 100% of book completed
Evaluating an author and the self as reader. Reader assesses the author as an efficient writer and their own reading process and how it affects them as a reader.	
1. Has the story helped you to understand yourself better? Explain.	
2. How have your attitudes, beliefs, knowledge, or behaviors changed because of this story?	
NHES 8 — Advocacy	
2. What does it mean to advocate for health? Define in your own words.	
3. Thinking about the characters in the book, identify and explain how one or more . . .	
a. influenced and/or supported others to make positive health choices.	
b. collaborated with others to advocate for personal, family, or community health.	

Instrumentation

To study the psychosocial impact of the biblioguidance book clubs, we assigned a final set of prompts for students to complete after the last book club discussion. We grounded these prompts in the 3 previously identified biblioguidance phases (insight, identification, and catharsis). We also added a fourth prompt to uncover whether transformation occurred, as per reader response theory. Identifying whether transformation occurred was critical because we wanted to ensure students received the maximum psychosocial benefits regardless of their reading level. The prompts appear below. For each prompt, we note their alignment in brackets.

1. What insight did you gain by reading this story? What did you learn about yourself? (Insight)
2. What did this story confirm about your experiences, thoughts, or feelings? Explain. (Identification)
3. In what character did you most see yourself? Explain. (Identification)
4. Sometimes, by connecting to characters or a story, readers experience feelings of hope, feeling less alone, relief, or reduced anxiety. Did you experience any of these while reading? If yes, explain. If not, could you imagine someone you know experiencing these things? Explain. (Catharsis)
5. Sometimes, stories change people. By reading this story, have you changed? If yes, explain. If not, could you imagine someone you know changing because of this story? Explain. (Transformation)

Data Analysis

Our study falls into the category of descriptive phenomenological research, which seeks to extract meaning from individuals about their lived experience of a phenomenon.[29] Phenomena may include interactions with other humans, events, news, activities, and media such as books, movies, and art.[30] In our project, that phenomenon was reading, reflecting on, and discussing a shared novel. With their classmates, students experienced the story's events and characters' thoughts as if they, the students, were there or were the characters themselves.

Descriptive phenomenological research analysis aims to reduce individuals' experiences to a composite description that represents the experience's essence.[31] Typically, data collection would include 3-10 interviews with those who experienced the event. Our data set consisted of 168 responses to our prompts. Those responses captured students' experiences and served as those ''interviews.'' We randomly selected 42 response sets of these to include in our analysis.

We began our analysis with pre-set major and axial codes, namely the 3 biblioguidance phases and their associated phenomena, as listed in the Background section. To assure coding reliability, we used a multi-phased triangulation of analysis.[32] In the first phase, the researchers reviewed and coded 3 final reflections with Dedoose data analysis software. After checking our inter-rater reliability, we discussed differences, removed and added codes as needed, and continued to test until we achieved a ≥80 kappa level. Once we reached that level, we divided and coded the remaining 39 reflections.

In the final steps of our analysis, we used Dedoose to conduct descriptive statistics and to extract excerpts representing the 3 major and agreed-upon axial codes. We sought to know the extent to which students experienced the anticipated psychosocial benefits, the benefits most often received, evidence that transformation took place, and what transformation looked like. This analysis method closely aligns with descriptive phenomenology, which seeks to identify the essence of an experience by investigating its underlying structures and searching for commonalities.[33,34]

RESULTS

What Are the Psychosocial Benefits of Biblioguidance Book Clubs in the Health Education Classroom?

Reading, coding, and analyzing a random selection of students' final reflections showed that most students experienced psychosocial benefits aligned with one or more of the 3 biblioguidance phases. Table 3 reveals the percentage of students from the sample pool who experienced benefits aligned with each phase and associated phenomena. Over 90% of students experience identification, and more than 85% gain insight. Some, 33.3%, experienced catharsis in the form of dispelled feelings of isolation; feelings of solace, hope, or relief; and validation of self and others. Having fewer students experience catharsis was expected, as not all students had circumstances that would elicit such a response.[5]

In Table 3, we also present sample responses epitomizing each phase. To select responses, we used Dedoose software to extract all coded excerpts for each axial code. Next, we divided those excerpts between 2 researchers, who selected 3 representative examples from each code. Then, the third author reviewed these examples and chose 2 for each.

In addition to showing that students received psychosocial benefits, Table 3 also shows that the phases and their phenomena are intertwined. For example, the following catharsis response reflects both a dispelled sense of isolation and feelings of solace, hope, or relief:

I do feel less alone reading about Quinn's internal battles. This is a stage I am currently going through as I am growing up and thinking about my future. It makes me hopeful that by the end, Quinn had seemingly found his path and was happy. I hope the same happens to me.

The response also reflects the insight and identification phases. We do not regard this as an anomaly or error in analysis but rather as representative of the complexity of transformation. We elaborate on that idea in the next section.

Does Evidence Suggest that Students Experienced Psychosocial Transformation? Of What Does that Transformation Consist?

The final reflection's last prompt posed the following: Sometimes, stories change people. By reading this story, have you changed? If yes, explain. If not, could you imagine someone you know changing because of this story? Explain. In asking these questions, we sought to uncover whether students experienced transformation proposed in transactional reader response theory and what transformation looked like. In describing their transformation, students tended to hone in on the 3 biblioguidance phases but in broader and more profound ways, as evidenced in these 2 examples.

1. I learned that I take my life for granted.
2. This story has provided me with a new awareness of what a black person or any person of color has to go through on a day-to-day basis.

The first response shows that the student moved past basic self-examination (identification) to an expanded awareness of self. In the second example, the student projected the impact of society on others' life experiences. While this could be construed as insight, it goes beyond the general application of that phenomenon.

Sometimes, students indicated multiple biblioguidance phases. In the following response, we see evidence of deep self-examination (identification) and a broader understanding of the role society plays in life experiences (insight):

It has given me a new perspective on life and showed me how different my life can be from someone else who is so similar to me. It has also made me more aware of the world around me and the people in it.

In this following example, we see that in deeply connecting with the character (identification) and reflecting on personal experiences (identification), the student experienced hope (catharsis):

It showed me that there is a way out. No matter how hard it got for Julia at some points, she was still ambitious to pursue her dreams. This inspired me.

Table 3. Psychosocial code presence and excerpts

Code	f	%	Sample Excerpt 1	Sample Excerpt 2
Identification	38	90.5		
Connection and affiliation	18	42.9	I saw myself in Lily. She was a fun-loving spirit who was living her life more for more than just living . . . I'm scared of wasting 'the best years of my life' being sad or scared . . . She was ready to take on whatever the world threw at her and so am I.	I most resonate with Grammy. I absolutely love her and honestly think I'm gonna end up like her when I am an old lady. She is a very eccentric person and I am too. She is really good at showing that side of her, which is an inspiration for me. We both live a little crazy.
Self-examination and appraisal of beliefs, values, feelings, or experiences	22	52.4	I see myself most in Quinn . . . I am aware that I live a very privileged life, but I still constantly struggle with my own internal battles that no one sees.	I see myself mostly in Gabi. [Like her] body image and what I eat have always been a major part of my life. [Also], both me and Gabi care for others more than we care for ourselves.
Insight	36	85.7		
Cause and effect relationships and "ways of the world"	23	54.8	This book taught me how there is so much more to police brutality and racism than just the actual event, like the aftermath and how it affected the whole community. This was something I was not expecting and it was very eye-opening for me.	I learned about white privilege and how it's more prevalent in my life than I had previously thought. I also learned how brutal stereotypes and assumptions . . . can destroy your life.
Information, skills, and behaviors	11	26.2	I learned that my differences in experiences are important to my identity and how I conduct myself, and these differences shouldn't be masked or hidden.	I learned a lot about bias and stereotyping . . . how they play a role in social situations and can negatively impact people. These things are very hurtful and we need to learn about them so we can better control them.
Others' lived experiences, perspectives, values, attitudes, and beliefs	26	61.9	I learned a lot about what it is like to have two different cultures . . . I never realized that it is a struggle to have your home life be a different culture then your school and social life.	I got to look at Native [American] culture through another teenager's perspective . . . I got to see how while our cultures are super different, we have some of the same problems.
Catharsis	14	33.3		
Dispelled feelings of isolation	6	14.3	I felt less alone when I was reading and after finishing the story. I realized that everyone has stuff going on even if you can't see it. Sometimes I feel like everyone else's life is perfect and mine is the only one that has stuff going on. This story helped me realize everyone has bad things in their lives.	It definitely helped me feel not as alone as there are kids out there whose parents expect a lot from them. It made me relieved to see that other kids were having similar relationships.
Feelings of solace, hope, or relief	7	16.7	. . . reading about Quinn's internal battles . . . this is a stage I am currently going through as I am . . . thinking about my future. It made me hopeful that by the end, Quinn had found his own path and was happy with it. I hope the same happens to me.	After reading this story, I felt hope for the future . . . that people will realize that skin color does not determine how someone really is and everyone should treat everyone equally.
Validation of self and others	8	19.0	Instead of changing me as a person [the book] strengthened what I already believed. I have been a big supporter of BLM, and this story really just brought home a lot of the things I believe in.	It described how I feel about myself in my community. I feel like I'm not truly a part of [it], but seeing other characters feel the same way and see how they're supported and hearing their thoughts helped me to feel better about myself.

In addition to more profound and broader experiences associated with the 3 biblioguidance phases, we also saw new phenomena, including new beliefs, value systems, and commitments. We see that in the following example:

Overall, this book and its characters were very influential and taught the important lesson of social injustice. This book has pushed me to become more of an upstander and advocate for others dealing with these experiences.

The student is indicating new beliefs and values and committing to new behaviors. The next example shows a new behavioral commitment and a more profound comprehension of society.

After reading this book, I have definitely become more aware of certain problems in our society, such as racism, mental illness, trauma, and social injustice. In the future, I feel like I will try to help and stop these problems.

We see that same pattern in the following example:

By reading this story, I learned that it is essential to listen to the whole story before jumping to conclusions or judging a person because you never know what is really going on.

Looking at these sample excerpts and the others, we determined that many students had experienced a psychosocial transformation. We also found that the axial codes associated with the 3 biblioguidance

phases did not fully represent what occurred. We re-examined the final reflections and found 3 primary manifestations of transformation:

1. Expanded awareness of self and others
2. More profound comprehension of society and its impact on others
3. New beliefs, value systems, and commitments

We re-coded responses to the final prompt based on these new axial codes. In Table 4, we provide examples for each new code and the frequency in which they occurred; 86.0% of students (n = 38) experienced some psychosocial transformation, with the most common types being deep comprehension of society and its impact on others (n = 27; 64.3%), new beliefs, value systems, and commitments (n = 24; 51.1%), and expanded awareness of self and others (n = 18; 42.9%). Next, in the Discussion, we explore what these findings mean.

DISCUSSION

Our research sought to uncover the psychosocial benefits of biblioguidance book clubs in the health education classroom and whether the experience was transformative for students. Regarding the psychosocial benefits, our findings are similar to others. For example, Byrd et al., in working with adolescent black boys, found evidence of identification in the form of increased self-awareness and insight into societal barriers by reading and discussing stories with characters who looked like them and shared a similar background.[17] Nwachukwu found that reading, discussing, and role-playing helped students gain insight into the experiences of classmates with special needs.[35] Ryan and Hurst observed that fiction book clubs helped students gain insight into the nuances of bullying and how to navigate it in their own lives.[13] Betzalel and Shechtman and Stewart and Ames discovered that fiction books, coupled with reflection and discussion, provided role models, validated young students' experiences, helped them feel less alone, and instilled hope for the future.[16,36] In other words, they identified with characters, gained insight, and experienced catharsis.

What is happening in these contemporary studies and ours adds to the foundational work conducted by Bishop.[37] She contended that fiction, particularly those featuring characters like the reader, can act as a mirror. The readers see themselves and their lives within the text (ie, identification) and are self-affirmed (ie, catharsis). In contrast, fiction featuring diverse characters and settings, particularly those unlike one's own, can act as windows to new worlds and ways of thinking (ie, insight). These mirrors and windows can

be beneficial in the health education classroom. Per Olson and O'Neil, a carefully curated book selection, coupled with reflection and discussion, allows students to identify a conflict or problem in a story, reflect on the characters' actions, and consider alternative scenarios, decisions, and outcomes.[38] We found this true in our previous research into using fiction books to support teaching NHES-related content and skills and social-emotional learning competencies.[39,40]

Bishop also stated that "windows" can be sliding glass doors. In reading, reflecting on, and discussing fiction, readers walk through and experience the story world. In this process, they are transformed.[34] This process and outcome are much like those proposed by Wilhelm.[22] In his research, for students who passed through all 10 dimensions of reader response, there was a clear "before" and "after," with students indicating that they felt like someone "new." The readers not only connected with the story and gained new understandings, but also they experienced a metamorphosis.

In our project, metamorphosis included an expanded awareness of self and others, a more profound comprehension of society, and new beliefs, value systems, and commitments. Some aspects of these phenomena are similar to what others have called a fourth biblioguidance phase, universalization.[8] During this phase, the reader generalizes what they have learned to new situations. They are also similar to what other researchers have identified as a fifth biblioguidance phase, integration.[36] During this phase, the reader applies what they have learned to their lives. Missing from these descriptions, though, is the more profound psychosocial change captured in the word transformation. When people are transformed, they adopt beliefs, values, and commitments, something we saw in over half of the student reflections.

Evidence of new beliefs, value systems, and commitment can also be found in the contemporary biblioguidance literature. Flores found this to be true with young Latina girls. Not only did the girls participating in an extracurricular book club identify with story characters and come to understand themselves in the context of broader society (universalization), but also they were motivated to take action toward a new future.[37] Similarly, Ryan and Hurst found that reading about and discussing stories about bullying in the classroom was not only a source of new insight for students but also that they came to express empathy for bullies and bystanders, as well as victims. They also indicated that they would take action against bullying in the future.[13] In a longitudinal study, Hayik found that 18 months after classroom-based biblioguidance, students continued to hold new beliefs and treat others differently.[38] While we are not proposing transformation as a new biblioguidance phase, we suggest it as

Table 4. Transformation Axial Code Presence and Excerpts

Code	f	%	Sample Excerpt 1	Sample Excerpt 2	Sample Excerpt 3
Transformation code presence	37	86.0	90.5		
Expanded awareness of self and others	18	42.9	It has given me a new perspective on life and showed me how different my life can be from someone else that is so similar to me. It has also made me more aware of the world around me and the people in it	This . . . experience opened my eyes to cultural differences in childhood, adolescence, and adulthood. I learned that my experiences can heavily differ from any one of my peers, and I should take this into consideration while interacting with another person.	I learned that I take my life for granted.
Deeper comprehension of society and its impact on others	27	64.3	I understand what it's like to have loved ones suffer from addiction but I've never lost anyone due to an addiction. I could have never learned that meth can destroy entire communities but with this book, I saw it through the eyes of someone who was close to my age and I had shared experiences with.	This story has provided me with a new awareness of what a black person or any person of color has to go through on a day-to-day basis, meaning that they always have to be cautious not to look, do, or say a certain thing because they have the risk of getting a worse consequence than a White person would.	After reading Gabi, A Girl in Pieces, I realized that people have social injustice issues in their lives frequently. I am grateful that I am not faced with these constant problems in my life and I live in a safe neighborhood. I am fortunate enough I am able to stand up for myself and others if I were to see it, while others have trouble taking action.
New beliefs, value systems, and commitments		57.1%	Seeing other cultures was very beneficial in expanding my understanding and perspective on diversity. From this, I will try to recognize that each person has a different home than me and different values.	After reading this book I have definitely become more aware of certain problems in our society such as racism, mental illness, trauma, and social injustice. In the future I feel like I will try to help and stop these problems.	By reading this story I learned that it is essential to listen to the whole story before jumping to conclusions or judging a person because you never know what is really going on.

a marker of students receiving optimal biblioguidance psychosocial benefits.

IMPLICATIONS FOR SCHOOL HEALTH POLICY, PRACTICE, AND EQUITY

When considering practices that promote safe, supportive, and healthy learning spaces, engage learners, and challenge them to grow, pedagogical interventions like biblioguidance are worth considering. Although biblioguidance originated in clinical settings, research suggests there is a place for it in schools.[10] School settings could include the classroom, including but not limited to health education, and extracurricular activities such as library book clubs, peer leadership groups, and even as a component of staff training. Carefully crafted biblioguidance curricula featuring diverse characters and settings engage participants in self-reflection, expose them to people like and unlike themselves, and challenge them to examine and consider new ways of thinking.[34] Even when catharsis is not a goal, biblioguidance provides psychosocial benefits associated with supporting young people in realizing their academic and personal potential.[41]

Limitations

The limitations of our study are expected among researchers using a phenomenological research approach.[30,31] While this approach allows researchers to study another's experiences and gain insight into their thoughts and actions, there is always the potential for bias. For example, when we selected representative excerpts for each biblioguidance phase, our biases may have impacted our choices. Another limitation is the variation in participants' capacity to describe their experiences in writing. Reviewing the final reflections, we observed that some students could better articulate their feelings and beliefs than others. This means we may not fully understand the breadth of students' experiences. Two additional limitations include the lack of a control group and representation. Phenomenology can involve a streamlined data collection form with only single or multiple participant interviews.[28] While we reviewed over 40 randomly selected final reflections, they do not reflect the complete student experience. Also, our student population was predominantly White. The results could have been different in another setting. Further, we do not know the impact of the content area instruction or global events. Based on these limitations, we advocate for future research into the benefits of biblioguidance in different settings and with varied student populations.

Conclusions

As the world becomes a more complex and smaller place, it seems that self-understanding and

the willingness and ability to understand others will become more important.—Wilhelm[22]

It is a school health research priority to improve the well-being of students and support them in reaching their potential.[42] Our study reflects attention to this priority and contributes to the existing body of literature pointing to the psychosocial benefits of biblioguidance.

Using a phenomenological research approach, we captured students' biblioguidance experiences in a post-curriculum final reflection. We organized, coded, and analyzed responses to these, resulting in a qualitatively rich understanding. We also presented a case with evidence that the experience transformed most students. Finally, we provided a link to an implementation guide to support readers in replicating and extending our research.

Human Subjects Approval Statement

IRB approval was obtained. The parents of participants provided consent, and participants assented.

Conflict of Interest

The authors have no conflicts of interest to disclose.

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