The Therapeutic Benefits of Children’s Literature: Responding Through Making Art and Writing Stories

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The Therapeutic Benefits of Children’s Literature: Responding Through Making Art and Writing Stories

By

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Abstract

This study explores the use of a children's book followed by the application of the Draw A Story (DAS) art therapy assessment tool by Rawley Silver (1988). The study takes place in three elementary school classrooms located in the greater Bay Area region. Previous literature addresses the historical uses of children’s books and their potential to offer therapeutic benefit to young readers. Through a quasi-experimental, one-group posttest only design, eighteen second to third grade level students were asked to reflect on a children’s book by writing a story of their own. Participants were between the ages of seven and nine, and all attended the same school. After choosing two DAS provided stimulus cards, participants drew images including the two cards and explained their images through a story with them in it as the main character.

Quantitative data was collected and scored based on the three DAS scoring scales: Scale for Assessing Emotional Content, Scale for Assessing Self-Image, and Scale for Assessing Use of Humor. Results were categorized as expressing more positively themed, neutral themed or negatively themed content in the artwork and description of the story. Themes were compared to the themes presented in the children's book to assess for similarities. It was concluded that 64% of participants appeared to identify with a drawn subject who had a positive or aggressive self-image, with 28% presenting more negative or dark humor in emotional content. No significant findings were made in the similarities of the participants’ artwork and story to the themes in the children's book. Future research should inquire for direct examination of students’ art and stories made in response to a children's book without any additional stimulus card or assessment.

Keywords: Draw A Story, Rawley Silver, school art activity, children's book, responding through art, self-image, emotional content in drawings, narrative theory, bibliotherapy, art therapy
Dedication

To my parents, Steve and Darlene Dueck. Thank you for always being there for me and for supporting me every step of the way. Your relentless love and encouragement while I completed my master's and thesis kept me going.
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Chapter I: Introduction

Problem Statement and Defining Self-Image in its Earliest Phases

Self-image is a collection of beliefs, characteristics and perceptions a person has about themselves. Magdalena (2015) defined self-image as a “reference point” for how a person regulates their own behaviors and emotions (p.619). The author sees self-image contributing to a consistency of behaviors making up an individual’s personality. If a person has a low self-image, they might behave with more negative behaviors. This may make others perceive them as a person who is moody. On the other hand, a person with a high self-image might behave with more positive behaviors. People may describe this person as being more outgoing or optimistic.

In this understanding of self-image, the words “I” and “mine” function as building blocks to self-concept in its earliest developmental phases (p. 621). These constructs are largely influenced by the child’s social environment and how they interact with people in proximity. Magdalena revealed that a young child will describe themselves with the words ‘I’ and ‘mine’ to reveal beliefs about their own appearances. They will also use these words to represent their own abilities and accomplishments. This vocabulary starts to develop a physical awareness and cognitive awareness to the self.

A child’s vocabulary can also reflect what they have internalized by their own experiences. Magdalena termed the first signs of introspection as self-analysis. It is when a child’s observations of their own mental processes develop while interacting with others. A child’s caregiver can have significant influence on their developing perceptions of the self. Especially during the child’s earliest years, their caregiver can largely contribute to their self-image. This contribution can happen in both positive and negative ways. As a child receives praises and punishments for their efforts, they will begin to identify with their abilities or lack
thereof. Magdalena noted that children will do this by using words ‘mine’ or ‘I’ to define their experiences. Are they a bystander or a key contributor to an experience? Overtime, a child will construct an internal belief system of values. This internal belief system can be representative of both positive and negative qualities.

Since a system is crafted so early-on, values can be changed or supported based on another's opinion. A child’s value system can even reflect the values of someone else who they want to be more like. Scaffolding is a term used to describe Vygotsky’s sociocultural theory where early-middle aged children learn new levels of competency by example of authority (McLeod, 2019). When a child watches an adult perform a certain way, their first instinct is to respond and repeat the same act. The psychosocial stages formerly created by Erik Erikson, defines this common behavior occurring between ages six to 11 as the “Industry vs Inferiority” stage (Clay, 2021, p. 3). It is a stage when a child gains confidence through interaction with their peers and social groups. Erikson saw failure to find satisfaction in one’s abilities as precursors to feelings of ‘inferiority’ and incompetence (Clay, 2021). If a child is unable to do something worth praising, they may become upset by a perceived lack of ability. Their sense of self is then thwarted, and their internal belief system can be negatively altered. This negative alteration is due to their internalized feelings of inadequacy.

A child is tasked with the responsibility to grow into an individual as they near their teenage years. There is some research on self-image in these earlier ages, but there is a lack of integration of the topic in the average elementary school classroom. School is often a familiar social context for children to engage with their peers. It is an environment where self-analysis can be quickened due to comparing to others. There have been few incentives for promoting a positive self-image in early to middle-aged children. Some current incentives have included the
integration of self-awareness in students through meditation during class time or through other class-led reflective activities such as the expressive arts (Roeser and Peck, 2009).

The current research seeks to affirm these current efforts while presenting a new approach for addressing self-image in classrooms. It would include utilizing children’s books to address mental health topics and apply the book's content through drawing. To achieve greater self-awareness in early to middle aged elementary students, meaningful class discussion and integration of the creative arts should be had. Reading a children’s book and making art in response to its main topic can encourage children to seek more positive values. The intention is for elementary students to recognize their own abilities and establish a more secure sense of self despite their social environment. This constructed internal belief system is resilient to personal limitations, catastrophic life events and identity transformations that can come with age.

It is important to note the construction of the self in its earliest phases is largely dependent on a child’s cultural upbringing and family history. Being in a school system where there is a diverse group of individuals, cultural humility must be present within a classroom for the topic of self-image to be discussed. Acknowledging these injustices, hierarchies and traumas held within a family's cultural group is crucial for ensuring advocacy, restoration and a felt need for justice in a child’s sense of self. Addressing the topic of self-image from a macro-level such as a school campus must be done whilst acknowledging these family histories. That way, the image of the self is reflective of the child's true realities as it relates to their cultural upbringing.

Advocacy for mental health in elementary schools should be sought with the intent to cultivate meaningful conversations with other students. Teachers have a unique advantage of modeling value systems to their students in order to help youth acquire a positive self-image. Most of the research about self-image focuses primarily on the adolescent years. For example,
when a teen is struggling to find a positive self-image during a life crisis. It is critical that the focus be brought back to these earlier and more formative years in elementary school.

The current study seeks to identify themes related to self-image that can be displayed through art and self-written stories. Elementary students are asked to respond through art and writing after reading a book depicting a character who finds a positive self-image. The children's book titled *Where Oliver Fits* that is used in this study shows readers the highs and lows of wanting to feel like one belongs (Atkinson, 2017; Goodreads, 2021). It includes themes relating to self-image, esteem and having self-confidence with other peers.

Magdalena (2015) finds that how a child views themselves in their earlier years can be groundwork for what will become a more consistent personality overtime. As discussed earlier, a child’s vocabulary of the words ‘I’ and ‘mine’ can be used to promote creative expression by writing themselves into their own story. A child's internal belief system has a potential to develop by learning values presented in a children’s book. A fictional narrative written in first-person can have the potential to relate to a child’s own personal triumphs and life struggles. Engaging an elementary student in the narrative process of self-analysis by reading a children’s book can prompt students to apply the book's content to their own life. The combination of reading a children’s book and making art in response to its' content can further strengthen a child's developing sense of self. Thus, this current research aims to inquire about new interventions within the school system where self-image is explored through children’s literature and the application of the arts.

**Influences to Self-Concept**

In adolescence, Di Blasi et al. (2015) described self-image in teens as having some relation to family relationships and their ability to set personal goals. The authors noted that
teens commonly express having a low self-image through symptoms displayed in social anxiety. Early childhood can be seen as a framework for adolescent behavior. Stone et al. (2013) noted much of child psychopathology is as a result of children internalizing situational problems as their own. This process of internalization can make the child feel highly self-critical, leading them to a negative self-image. A child with a negative self-image can express themselves through destructive or socially unacceptable behavior. The authors claimed children will often engage in ‘homophily’, a term used to describe someone socializing with peers who are also experiencing similar self-criticism or destructive behaviors. When this type of socialization occurs, a child may compensate for their negative self-image with values representative of their own struggling peers. Their internal belief system may be based off of these experiences. If children identify with peers that are only reinforcing their negative attributes, progress for a positive self-image can be stumped.

Morality is a learned instinct that is acquired over years of maturity and growth. It helps children decipher right from wrong. As early as ages four and five, children view unconformity to social norms as abnormal and wrong (Foster-Hanson & Rhodes, 2019). Behaviors that are acceptable to the community are often based on expectations made by social norms. Contextual norms are continuously displayed through new platforms such as social media and what ‘beauty or success’ might look like. The exceptional growth of online platforms in the 21st century has created a new framework for an individual's moral code. Platforms such as these have influenced a child’s knowledge of what is perceived as right or wrong. In a meta-analysis by Richards et al. (2015) for the *Journal of Paediatrics and Child Health*, the authors note the significant impact of social media on young children’s self-esteem in relation to the body. When a child views themselves behaving differently than others, their self-image can be perceived as strange, wrong
or lacking. These strong variations in self-image present a major issue in child psychology. A child who displays a low self-image can be indicating an inner turmoil of ‘felt inadequacy’ to meet societal norms. Since they are passively taught their identification is based on whether they live up to these external pressures presented online, their sense of self will always be changing.

There is a belief that unconformity signals a sense of ‘wrongness’ to a child and can lead to the internalization of inadequacies and future child psychopathologies (Stone et al., 2013). Over time, if a child’s own abilities do not meet the standards presented by society, they will feel inadequate or “inferior” which can then defeat their evolving self-esteem (Clay, 2021, p. 3).

Providing a multitude of perspectives within the classroom setting of what a positive self-image can look like can give youth a stronger sense of stability.

**Narrative Therapy, Bibliotherapy and Responding Through Art**

Children have a unique opportunity when engaging in the arts. In the presence of an art therapist, a child can engage in sublimation through the art-making process turning socially unacceptable urges into more acceptable behaviors (Klorer, 2001). Klorer noted in these creative moments, a therapist will offer meaningful insights to what a child creates. Asking a child to create art in response to a book is a new phenomenon. When an art therapist combines both techniques of art therapy and narrative therapy to a reading activity, they can explore meaningful narratives expressed by the client. The sub-category known as bibliotherapy is introduced where books are used to achieve therapeutic benefit. The concept of sublimation can happen through multiple methods of expression either by means of storytelling or art, or both. The joining of children’s literature and artmaking can provide new knowledge of the more specific usages of bibliotherapy in educational and therapeutic settings.
Narrative therapy is a process where the interpretation of one’s own lived experiences is discussed through storytelling and the sequencing of life events (Etchison & Kleist, 2000). Bibliotherapy includes a verbal narrative or written story, where the discussion of a book is facilitated by a therapist and is read with the intent for the client to identify with its' character(s) (Mendel et al., 2016). Mendel et al. further described bibliotherapy as validating difficult emotions and feelings while the client engages in “displacement” or a relinquishing of their feelings through this character (p. 535).

Fictional stories have had a unique ability to motivate a reader to achieve similar results. A recent Ted Talk by Fennelly (2020), an American poet and professor at University of Mississippi, discussed how literature induces brain activity in language processing, empathy and body sensation. While the exploration of one’s own lived experiences through a narrative story is supported by narrative therapy, bibliotherapy can be a helping hand with the integration of books. Rozalski et al. (2010) describes bibliotherapy as a theoretical process involving three key stages: identification, catharsis or the releasing of strong emotion and insight. Each stage comes as a result of the reader’s own self-analysis and reflection of a book in the context of their own life experiences.

There is little school-based research highlighting the psychological effects relating to self-concept from a book in a classroom setting. The present study seeks to explore this three-part process in bibliotherapy while also examining a student’s artwork made in response to its' content. The study asks the question as to whether children can express images of the self through creative means. Additionally, it seeks to uncover the insight that a client can give by writing themselves into their own fictional story. It is anticipated that by applying these three stages to the bibliotherapy process in a classroom setting, students can engage in self-reflection.
Most importantly, the art expression will be a strong source for catharsis and personal identification when relating to the characters and content of a book.

Etchison and Kleist (2000) differentiated narrative therapy from other therapies by explaining its goal-orientated process. The authors explain fictional narratives helping clients to externalize their problem(s) instead of internalizing them. Some of the underlying causes of child psychopathology are explained by the child internalizing life’s problems as their own (Stone et al., 2013). Etchison and Kliest highlighted narrative therapy to build on the client’s strengths and resilient attributes when imagining an alternative story to their own life. The story of a children’s book can elicit elements of narrative therapy when creating one's own alternate experience or life story. The reader is given the opportunity to externalize their own problems by identifying with the main character and then integrating the character's values into their own thought processes. This rewriting of an alternate story can be less intimidating and more preferred for sharing actual life events. The reader can apply a book’s message through responding with art and to assist in a relinquishing of their internalized problems. For younger readers, if this self-expression when reading a children’s book is verbalized with a clinician or art therapist, bibliotherapy proves significantly more beneficial (Mendel et al., 2016).

Children’s narratives should be relevant to the cultural and social values of the reader. Grove and Lancy (2015) identified the many cultural variations when acknowledging developmental accomplishments and milestones within a child’s many life phases. For books, language represents half of the book’s form of communication; the other half being the book’s pictorial illustrations. Therefore, it is crucial that the present narrative reflects the values and virtues of the general community for every reader to identify. Mendel et al. (2016) noted a recent study of 44 child psychiatrists where under half of them recommended children’s books to their
clients in their own therapy sessions. Many of these psychiatrists advocated for a “bibliotherapy database of books” so they could feel more confident when recommending emotionally intelligent books that are representative of their diverse communities (p. 535). The authors hinted at a deeper need for culturally relevant books and databases that tend to the needs of their unique communities. The authors saw public libraries as an asset to local communities, allowing for more applications of bibliotherapy and providing a cost-effective therapeutic resource for families. This accessibility to community libraries can be a strong and motivating factor for the continuation of applying books with therapeutic value.

**Children’s Literature and Mental Health**

Classic literature, such as *The Adventures of Pinocchio* (Collodi & Lorenzini, 2016), have had a unique ability to offer new life skills for parents to teach in the home. The Italian story of a wooden puppet named Pinocchio teaches children not to lie or else they will grow a nose. The fictional idea of Pinocchio prefaces the concept of morality and discipline. Collodi’s story first appeared in 1881 in a children’s magazine called the *Giornale Dei Bambini*. The narrative was later published as an actual book in 1883 due to its evolving success. Families found the story of Pinocchio a meaningful way to teach their children how to discern right from wrong and how to act responsibly when approached by authority (Bauer & Lowne, 2018). The character of Pinocchio proved a source of compassion when mistakes were made. This somewhat dark yet comedic fictional narrative of a wooden boy is one of many examples where a main character from a children’s story influences child behavior.

Not every book has the capacity to be used in a therapeutic way. Lea (2015) found that teachers in school settings appreciated books with a “good story” (p.54). A ‘good story’ meant that the book’s content met a psychological, moral and aesthetic criteria. For instance, the
children’s book titled *Shelley the Hyperactive Turtle* (Moss, 2006; Schwartz, 2006) was successful in that students with attention-deficit hyperactivity disorder (ADHD) were able to identify with the main character who also had ADHD. Lea found that by integrating this fictional book into classrooms, teachers noticed the main character having a positive effect on their students who had dealt with these symptoms. They reported that students identified with the main character named Shelley and were able to gain a new perspective of how to cope with ADHD. They also learned better methods for openly talking about their disorder with others.

Reading a children’s book when introducing a topic about a disorder or symptom can strengthen the client-therapist relationship. The inclusion of a fictional character who might represent a client’s experience can cultivate vulnerability and honesty in the therapeutic space. The resource of a children’s book like *Shelley the Hyperactive Turtle* proved helpful for cultivating honest conversations with those who could also relate to its story.

Contemplative education includes the intervention of literary resources for academic learning, freedom of thought, creativity and personal renewal in students (Roeser & Peck, 2009). The term means to give attention to social-emotional needs in students while also meeting their academic goals. Completive education applied to children’s books can foster classroom discussion that cover topics in mental health. When combined with artmaking, books such as *Shelley the Hyperactive Turtle* have potential for continued self-reflection by a child. The combination of a book that distinctively meets the criteria defined by Lea (2015) and creating art, can all-together offer school’s a new way of ensuring contemplative education in large groups.

Not only has children’s literature been used to explore child psychopathology, but it has also been a method of instruction for medical procedures. In addition, books have been used to describe a new physical diagnosis to a patient. The Association of Child Life Professionals
explains the main role of child life specialist in a medical setting. They are certified professionals who intervene on behalf of a child to improve patient and family care (2021). The integration of therapeutic children’s books in these practices can become a supplementary tool for professionals in medical settings. In a recent longitudinal study by Mendelson et al. (2017), the authors examined a popular comic series called Medikidz for showing increased disease-related knowledge in children and teens facing a difficult diagnosis or injury. In a study of 61 patients who all have some form of juvenile idiopathic arthritis (JIA), ages eight to 18, the authors found that the specific comic titled Neta and the Medikidz Explain JIA (Chilman-Blair & deLoache, 2014) increased knowledge of the disease in readers. The authors reported that this knowledge was tested and retained one year later. While present research has indicated a retention of knowledge from using educational books to teach, there is a current lack of quantitative data showing results of children’s books and their mental health benefits in classrooms long-term.

Most research highlighting the effectiveness of books is purely qualitative and exemplified through case studies or direct client testimonials of how they impact their readers. For instance, the teen novel titled Speak (Anderson, 2011) had a significant impact on victims of rape, providing them with solace and emotional support when remembering a difficult life event (Ahmed & Mohammed, 2020). While the reviews for the book Speak were substantial for understanding the book’s influence on its readers and its longevity with teens, little is known about the effects of books written for younger audiences. Data revealing how children might internalize or express a lesson taught from a children’s book is scarce. This present study hopes to integrate more quantitative data relating to the application of books through art and story.
An Assessment Tool for Measuring Emotional Content in Drawings

This study connects to the research and clinical work of art therapy by using the Draw A Story (DAS) assessment tool created by Rawley Silver (1988). It has been a widely used drawing tool for assessing children and adolescents who may be at risk for clinical depression and aggressive behavior (Earwood et al., 2004). Using the assessment tool for understanding the influences of children’s literature would likely add to existing DAS discussions. It would offer new insights to therapists and school-based counselors when using books in treatment. In addition, the intervention of children’s literature meeting the ‘good story’ criteria as previously described by Lea (2015) can provide a new focus in narrative therapy for how the DAS can be applied in young clients.

The scoring of the client’s drawings is based on a 1–5-point rating scale and reveals how much the content is positive, negative or neutral. Earwood et al. found that children who behave more aggressively are shown to have lower ratings in emotional content in their art, (i.e., Receiving a score of 1 or 2) and higher ratings in self-image (i.e., Receiving a score of 4 or 5). This suggests the child may identify themselves as drawn subjects possessing strongly aggressive behavior that is superior to others. This is scored as the client having a positive self-image. In the context of the DAS scoring criteria, self-image can be expressed through a drawing that depicts assaultive and intimidating subjects holding power. The meaning of having a 'high self-image' does not necessarily mean an optimistic or kind depiction of the self.

Earwood et al. also noted the drawn subjects for an aggressive person often showcase destructive or lethal behavior. Jue and Kim (2014) used the DAS with North Korean defectors living in South Korea, ages 15-17, whose drawings depicted a more ambivalent self-image with low emotional content. These participants displayed a lack of self-image with drawn subjects
appearing depressed, absent-minded and powerless. The participants of these drawings reported feelings of inferiority and insignificance. They reflected more clinical symptoms of depression to support their drawn images. So, to reinforce, the concept of self-image when utilizing the DAS means having an identification to *some* image whether that image is positive, negative or absent.

**Operational Definitions**

Understanding the self as it relates to a person’s values and perceptions can be a complex task. Magdalena (2015) uses the term self-image to represent a person’s ability to engage in autonomous behavior and an independence of thought. To distinguish self-image from a similar term known as self-concept, self-concept is based on how someone perceives themselves in a specific event. The term can be best understood as a more fluid and interchanging view of the self.

Magdalena also explained self-image as encompassing a person’s values, beliefs and goals. These parts of the self become more stable overtime. The author noted that self-image could include idealizations of the self. This means a person bases their beliefs and values on someone else that they wish to be more like. Whether self-image is idealized or personal, it will influence a person’s behavior and thought. When their behavior is repeated, it has the potential to make a person’s values more definite overtime. Thus, Magdalena claimed self-image as a larger part of the entire “personality structure” (p. 620).

There are key differences of self-perception in the earlier stages. Magdalena pointed out that younger children can have several images of the self. This often leads to an inconsistent personality where a child might express themselves in simpler forms such as “I like to paint”, “I like animals”, or “I am obedient” (pg. 622). A child will identify themself as having separate entities because their internal values have not yet become concrete and stable overtime. It is
important that they explore these arising identities. A child's personality will start to become more consistent as they begin to seek independence and autonomy.

The terms ‘I’ and ‘mine’ discussed earlier are building blocks in early language development and can be powerful constructs to self-image. Roeser and Peck (2009) defined the word ‘me’ or ‘mine’ as reflecting one’s material and social self. The word ‘I’ indicated a more personal experience or remembrance of a memory. An interesting study done by Hoff (2005) looked at how kids who have imaginary companions, a common behavior of seven- and eight-year-olds, can be expressing a way of “perceiving their own self” (pg. 169). This finding suggests that even at an early age, self-image is already manifesting to some degree. It also suggests that self-image can be expressed in creative means such as through imagination.

Children use the words ‘I’ and ‘me’ interchangeably to identify with different parts of their selves. Hoff examined 35 fourth graders with imaginative companions and assessed their self-image with an inventory called ‘How I Think I Am’. He found that the majority of the fourth graders with imaginary friends had lower scores of negative self-reflections. They revealed that they felt different and inferior to others. It is pivotal that younger children are provided with new creative methods for expressing self-image so therapists can gauge where they are at.

Art and stories can be alternative methods for supporting a positive self-image in young children. A child can identify with a book’s character if the character reveals strong values that are attractable to them. For example, the popular children’s book The Adventures of Beekle: The Unimaginary Friend (Santat, 2014) delivers a message to its readers that it is okay to have imaginary friends. Instead of a child feeling inferior to others because of this behavior, they can feel proud of it. Reading a children’s book where positive values are presented by a character can promote a positive self-image in young readers. Even though a traditional picture book is non-
clinical in its construction, the narrative of a story can offer new clinical and therapeutic benefits. The character named Beekle in *The Adventures of Beekle: The Unimaginary Friend* can bring feelings of pride and satisfaction for children or parents of children who have imaginary friends.

**Purpose of the Study**

The present study will investigate the intervention of a children’s book titled *Where Oliver Fits* (Atkinson, 2017) in a classroom setting to see its therapeutic effect on young readers. It will examine how the book's content can be applied through the Draw A Story (DAS) assessment tool (Silver, 1988). The hope is for readers to apply the main character’s experiences in the book to their own experiences. This internalization through a book would be expressed through their own art and self-written story. The DAS included a modified written prompt where the child was asked to describe their drawing by writing a story with them in it as the main character. The intention was for participants to incorporate these keywords ‘I’ and ‘mine’, constructs to self-image, when identifying with their own work.

The research explored the potential for the main character to influence the self-image of the reader, and for the art made thereafter reading the book to reflect similar themes. The study asked the question, “Can a main character in a children’s book with a strong positive self-image influence second and third graders to see themselves in a more positive way?” It also asked, “Will this positivity be expressed in student drawings and student writings?” Participants were between the ages of seven and nine in either the second or third grade level. This is an age where self-concept is quickly developing, and a child's personality is becoming more consistent and stable overtime (Harms, 2010). It is also an age when children will often apply meaning to their drawings through the exaggeration of subjects in order to emphasize their own life experiences.
(Malchiodi, 1998). A study examining the effect of children’s literature on self-image needs to be within this age range because of the child’s altering sense of self.

Along with reading the children’s book in a classroom, the analysis portion of the student’s artwork and story was scored based on the three DAS scales: Scale for Assessing Self-Image, Scale for Assessing Use of Humor, and Scale for Assessing Emotional Content (Silver, 1988). Participant responses were reviewed and scored by three raters who are masters-level graduate student art therapists. The three topics were measured by looking at the child’s drawing and reading their story and recording expressed themes. It is hypothesized that after reading the children’s book, participants will have higher scores in all three topics.

Additionally, the researcher hypothesized the drawings and stories having similar themes to those presented in the children’s book. For the self-image scale, these higher scores would reflect positive representations of the self similarly to how the main character expresses themselves in the book. Statistical analyses of the participants' scores are compared for generalizable results of students. The participant’s preference and frequency for reading children’s books and doing art are also noted. The purpose for the current study was to better understand the therapeutic value of children’s books in the elementary classroom. It also explored how students applied topics in a book through their own art and writing. The additional creative experience invited students with the opportunity to internalize what they learned from a book and incorporate this new knowledge through an original drawing and story.
Chapter II: Literature Review

Self-image is commonly understood alongside the term self-concept. It is a way a person views their own capabilities. The term is most often explored in focused groups where a speculation of low self-image is already detected. A person under some medical treatment or with a physical limitation may view themselves differently than when they were healthy. A friend or family member may perceive someone as being at-risk for developing a low self-image due to a pressing situation. A student with some learning disability may cause a teacher to question their self-efficacy. These differences in self-concept are more felt in places where a person's ability to perform is more closely examined. The present research seeks to look at self-image in the average child or elementary student by the way they portray themselves in a fictional story or drawing.

Arts-Based Projective Tests for Assessment

Projective arts-based measures can surpass anxieties often associated with test-taking and other traditional assessment procedures. Cipolletta et al. (2017) examined perceptions of the self in sixty children, ages six to 17 years old with neurofibromatosis type 1 (NF1) through the art therapy tool called Human Drawing Test (HDT). The researchers used the Pediatric Quality of Life inventory for making the assessment specific to patients in the hospital. NF1 is a progressive and genetic condition that is diagnosed in early childhood and can cause benign tumors causing mobility issues, visible changes to the body and physical pain (AstraZeneca, 2020). The HDT assessment tool is a projective drawing test that prompts a child to draw a picture of a person on a white sheet of paper. The authors found that the children with NF1 showed drawings with more distortions and deletions of body parts than those who did not have NF1. In fact, 35% of the children with NF1 drew human figures with malformations that matched their own bodily
locations affected by the NF1 disease. The authors concluded the bodily distortions in these drawings can be an inclination for low self-esteem. Many of the human drawings matched that of the gender of the participant. This is a common trend in children’s drawings. The study is one of many cases where perceptions of the self are explored through artistic means. It reflects a common theme of assessments looking at self-image where clients already appearing to see themselves in a negative way are singled out for research.

The Human Drawing Test (HDT) is very similar to another arts-based projective test known as the Draw A Story (DAS) assessment tool (Silver, 1988). While the HDT prompts the child to draw a person, the DAS asks for a selection of two images and for the child to draw what they imagine happening between those two images. The child then writes a short story describing their drawing. The artwork made in both assessments are looked at by professionals for emotional content and whether subjects are exaggerated or negatively expressed. These results may indicate how the child is feeling. The DAS is yet another projective drawing test that is qualitative in nature but relies on quantitative scoring through a thorough coding system.

According to art therapists and clinicians, projective testing is often a way of understanding the unconscious by avoiding the ego censor, so that internal realities can be expressed (J. Nyland, 2021). As with any projective assessment, the client’s level of anxiety and coherency to the test is a component clinicians consider when understanding the mental and emotional status of their clients (Groth-Marnat & Wright, 2016). When making art, it is important to take note of their behaviors, attitude and impressions towards the creative experience. This detailed analysis will allow for a more fuller and accurate understanding of the client (Betts, 2006).

Projective measures have the potential to provide the therapist with information about the client that can be reflective of the client's emotional state. Due to inconsistencies that come with
using arts-based projective measures, it is advised to rely on multiple approaches when assessing a client for their emotional wellbeing (J. Nyland, 2021). Other commonly used measures for assessment are the House-Tree-Person (HTP) and the Kinetic Family Drawing (KFD) tools. Both assessments have been used to explore relationships between drawn subjects. The HTP is sequential and prompts the child to draw a picture of a house, a tree and a person in that consecutive order. The KFD differs in that it instructs the child to draw their family engaging in an activity, outing or family affair.

Another commonly used projective assessment tool is the Bird’s Nest Drawing (BND). This tool asks clients to draw a representation of a nest and to include what is in it and around it. Past research has shown this measurement as indicative of attachment styles in clients, and the depiction of the nest reflecting current relationships of the client (Kaiser & Deaver, 2009). Betts (2006) noted the pros and cons of art-based assessments tools when they include a coding system. The drawn content is initially evaluated for certain indicators of what could reflect the client’s need to engage in potentially harmful behaviors. The benefits of highly effective arts-based assessments include easy administration, repeatable measures and user-friendly applications for the client. The artwork can become a tangible resource in therapy settings for observing frequent behavioral patterns across time. The repetition of the same assessment can gauge a client’s improvement in treatment. Their drawn content can be compared to previous drawings to show client progress.

There are multiple limitations when interpreting images using art-based assessment tools. According to Betts (2006), arts-based projective tests can have the potential to be a subjective experience for the person assessing the art. For this reason, they can pose a large threat to the validity and reliability of the measure. While the artwork can be rich in qualitative data, the
content is rarely quantified due to these significant issues with objectivity. Art therapists must be hyper-vigilant when using these measures in their work due to the reality of their client’s interchanging experiences; these inconsistencies showing up in the art. The assessment of one drawing is limited to a vague understanding of the client in one moment in time. To increase the validity of assessing an image, researchers should discuss the art with the client. They should prompt for explanation of the artwork to understand the client’s true experiences. It is with this extra notion that scorers of the artwork may find more accurate meanings to what is actually created.

Many art-based projective tests have coding systems consisting of “interval or ratio-type scales” that show a range of answers from ‘having more to having less’ of some element (Betts, 2006, p. 424). For example, Betts describes the Formal Elements Art Therapy Scale (FEATS) category #3 where it identifies a picture having “no energy to excessive energy” on a 5-point scale (p. 425). The 5-point scale system can pose a threat to reliability as multiple raters might score differently based on their own subjective experiences. Betts writes the increased number of options for scoring can lead to more variation in scores. On the contrary, using a scale can be helpful as it points the art therapist in a clear direction for therapy.

Betts (2006) reminds clinicians that arts-based assessments should align with the construct that they wish to measure. She advises art therapists to weigh the pros and cons of projective tests when deciphering whether to use them with their client. Acknowledging these significant limitations to the scoring procedure helps clinicians weed out unnecessary or inaccurate information so that they can better focus on the areas proving helpful to the client. If a measure is reliable and produces the same results over time, but not valid in measuring what it intends to measure, then the result loses its meaning entirely (Betts, 2006). Betts highlights an
increased need for both valid and reliable arts-based assessment tools. The author emphasizes a need for evaluating self-concept in clients because how a person views themselves can heavily impact their future behaviors.

Projective drawing assessments have been used for many years. Neale and Rosal (1993) write that the Human-Figure-Drawing (HFD) remains the strongest of them all. The authors explain it is “free of cultural biases” and is most valid for gauging clinical understanding as it is up to the client’s representation of how he or she envisions the human form (p. 48). For children, the authors find arts-based assessments an accurate portrayal of the self when anxieties for verbalizing are great. They also credit projective tests for accurately measuring personality and individual characteristics. In this present study, the focus on the participant’s artwork and story will be examined for similar themes inspired by the book. It is the researcher’s strongest intention to refrain from pathologizing the participant’s artwork and story, but rather to seek honest descriptions about the artwork from the participant themselves. Betts (2012) states “practitioners generally agree that some form of assessment is necessary” and that despite the flaws to arts-based tools, any information can be helpful (p. 203).

In conclusion, Betts (2012) introduces the need for working from a positive psychology framework when doing art-based assessments. This perspective means the reviewer learns to acknowledge the strengths of the art in order to emphasize the strengths of the client. Betts concludes that focusing on these strengths in clinical reports can keep clinicians from examining a client’s art for merely a diagnostic review. Approaching the artwork with the incentive to diagnose or to point out wrong behaviors in a client can be problematic. Instead, projective measures should focus on the present narrative being brought forth by the client through their own explanation of their art. A prompt to describe one's artwork in words can be a first step for a
therapist to get a fuller picture of the client. The strengths or positive aspects in a story that the client expresses can display how they face struggle and obstacles in life. In addition, combining both subjective responses to the therapist’s objective observations in a client’s work will make a more accurate arts-based assessment. Art therapists and those alike should be aware of their personal biases and subjective experiences when choosing to assess in this way.

**History of the Draw A Story Assessment Tool**

The DAS consists of three scales for scoring: Scale for Assessing Self-image, Scale for Assessing Emotional Content and Scale for Assessing Use of Humor (Silver, 1988). The measure has been used cross-culturally in the United States and in other countries as a subtest to the Silver Drawing Test (SDT) (Silver, 2003). Silver finds that through the DAS, depressed children will often have a negative view of themselves and that fantasies of depressed children will sometimes convey “violence, explosions, annihilation, and death” in their drawings (Silver, 1988, p.120). Silver also writes that these clients will explain their own personal experiences more negatively. In a large study of 254 participants, ages eight to 21, with some participants reporting normal while others clinically depressed (i.e., having a learning disability or emotionally disturbed), 11% of the normal subjects versus 21%-56% of the other groups responded with strongly negative content. According to Silver, this demonstrated a common trend in drawings of depressed individuals where the subjects in the drawings are both low in emotion and affect.

Haag (2018) noted the origins of the DAS, having been used by Silver with children who had hearing impairments, learning disabilities and with “people who had experienced strokes” (p. 118). It is evident the assessment has the potential to transcend both language and thought client examination. Since these foundational years of using the assessment, practitioners have modified
the DAS prompt to be more relevant to their own client’s experiences. For instance, the prompt
to draw what the client imagines happening between two stimulus cards is altered to be more
relevant for those who have undergone loss (Haag, 2018). Haag specified the prompt to his
participants by asking them to draw their picture with these two subjects so that it depicted a
story expressing their emotions of grief. Silver (2001) wrote that storytelling allows clients to
express symbolic language through metaphors. Clients can convey personal strengths, current
emotions and internal conflicts by creative means. In addition, clients can use stimulus cards to
make connections of different subjects. The component of the DAS stimulus cards ensures
emotional safety for the client as they share what comes to mind after picking the cards.

While the DAS is an assessment tool, it is also used as a method in therapy (Dunn-Snow, 1994). Common themes and relationships between drawn subjects are discussed by the therapist
to understand their meanings (Sandburg et al., 1984). Many clinicians who have used the DAS in
therapy contexts report using a follow up written or verbal prompt. Sandburg et al. reported the
DAS stimulus cards providing children with a less intimidating approach for expressing
themselves without having to come up with something purely on their own. Stimulus cards can
help initiate creativity in clients while also inviting them to engage therapeutically.

Schools and medical offices where assessments are frequently given can cause fear in
clients due to the unknowns. Fortunately, the DAS has been reported to take away anxiety and
psychological barriers that can come when asked to draw something from scratch. The use of
stimulus cards gives a prompt for the child to work from. It enables a child to find inspiration in
what they see instead of coming up with something solely on their own (Dunn-Snow, 1994).

The DAS scoring system has been shown to include criteria addressing what it intends to
address in humor, emotional content and self-image. The sliding scales in the DAS of which
include the option for content having more positive themes or more negative themes gives the scores more validity. It is through the 5-point system where the intensity or level of the negative and positive themes gives a therapist a better picture of the client’s own experiences. Past studies have found DAS results contradictory to findings when considering the self-image scale. Earwood et al. (2004) identifies a key element to the self-image scoring criteria where a score of a 4 or 5 can mean the client embodies strong aggression or a destructive persona. A high score for self-image is not always indicative of the client having a positive or optimistic sense of self. If the client is truly aggressive, the client would most likely have a low score in emotional content indicating their negative experience. They would also have a high score in self-image indicating their aggressive-like behavior is superior to others. Thus, self-image according to the DAS Scale is a person that identifies with a subject appearing strong, powerful or assaultive.

The DAS has primarily been used to assess clinical depression and aggression in children and adolescents. Clinicians have been more interested in reviewing these self-image scores in comparison to the emotional content scores when determining the positive or negative experiences of the client (Earwood et al., 2004). The Scale for Assessing Use of Humor was the third measurement that was added by Silver to examine if a client uses ambivalent or lethal humor. This would be seen through the type of humor displayed or expressed in their drawing. Silver’s reasoning for the scale was to uncover defense mechanisms for depression and aggression in children that are often shown through dark or morbid humor (Silver, 2001).

**Artistic Development in the Early-Middle Childhood Years**

Anytime artwork is examined, whether it be in a clinical or informal context, it is important to know the stages of maturation in a child’s artistic development. The expectations of
what a child’s drawing looks like versus what an adult’s drawing looks like should be clearly understood by art therapists.

Oster and Gould (1987) referenced the Human Figure Drawing (HFD) as an indicator of “intellectual maturity” because of how a person draws or portrays a human form (p.16). For example, a child doing the HFD activity may use more simple forms to represent a human body whereas a teen may exaggerate the features of their face (Lowenfeld & Brittain, 1987). Due to these differences in artistic ability, Oster and Gould acknowledged the need to know the client’s age and artistic capabilities before clinical treatment to ensure no false misinterpretations are made of a client's art.

Viktor Lowenfeld, an art educator and the author of *Creative & Mental Growth* (Lowenfeld & Brittain, 1987), described six major stages of artistic development from toddler through adolescence. In line with Piaget’s theories of cognitive development ranging from infancy through adulthood, Lowenfeld identified the scribble stage from age two through age four. In this stage, the child will draw in a more disorderly fashion based on movement. They may reveal first signs of identifying with their art by giving drawn subjects titles. Next, the pre-schematic stage is for four- to six-year-olds who represent ideas through simple shapes and symbols. These drawings will often be of human figures. Malchiodi (1998) added that around this age in early childhood, children will be more inclined to express their own feelings by drawing people and objects in the environment. The author gives an example of a child’s first indicator for having self-concept through personification. If an object falls and breaks, the child will often perceive the broken item as “hurt”—a similar reflection to how the child would feel if they were hurt themselves (p. 81).
In the schematic stage, ranging from age seven to age nine, Lowenfeld described the child beginning to categorize objects in their drawings. This categorization is based on the child’s own pre-existing cognitive schemas. These schemas were originally theorized by Piaget enabling the child to sort out different figures, forms, compositions and items based on color (Mossler & Ziegler, 2016). The stage is significant because children will exaggerate their drawn subjects to give more meaning or attention to things (Malchiodi, 1998). Malchiodi notes that they will also “create time sequences” showcasing multiple events happening from beginning to end or all at once (p. 91). The stage is a major step in a child's maturity and artistic development.

The dawning realism stage, from age nine through age 11, is another big shift in cognitive development where there is an increased level of self-awareness followed by self-criticism of the artwork (Lowenfeld & Brittain, 1987). At this stage, a child will care less about the kinesthetics of the art-making process or the sequencing of events and more about the end product. From ages 11 through 13, the child will transition to a teen and will slowly become more conscious about their art. This inward examination of the self can start to reveal the external pressures felt from a child’s environment. Opinions from peers and other outside influences can start to have a significant effect on the artmaking process and whether the child continues to draw or not. Lowenfeld coined this transition as the pseudo-realistic stage. It is where the artist becomes increasingly rigid and may even exaggerate only features or parts of subjects that feel most comfortable to them. For example, early-teens will frequently draw caricature-like forms such as large and detailed eyes. It is a common theme in late childhood and early teenage drawings due to their exaggeration of facial features.

After this, the decision stage consists of adolescents ages 14 and up where the late teen will choose to forgo artmaking as a hobby or profession. They may also give it up completely.
Lowenfeld explained only a few teens continue to make art while most relinquish the process of artmaking at around 13 years of age to pursue other interests. For those who continue to make art, the decision stage and the years thereafter will consist of more sophisticated and detailed drawings. Most of which will be made with an intention for improvement of skill.

Lowenfeld & Brittain (1987) supported the need for clinicians to be made aware of this maturation of artistic development when viewing client's artwork. The viewer can be mindful of these stages in order to distinguish between normal versus abnormal cognitive milestones that are representative through the art. The clinician can make a more accurate assessment on a client's mental health based on the context of age and artistic ability. Signs could show up in the art when a child fails to develop according to Piaget’s cognitive stages. The stages of artistic development presented by Lowenfeld offers art therapists a chance to make more accurate understandings of the artwork they assess. It is important to keep age differences and cognitive and artistic milestones in mind when making inferences.

Social and Emotional Benefits to Literature

There have been multiple case studies of literary works that have shown to have significant social-emotional benefits for readers (Ahmed & Mohammed, 2020). One of these novels is a trauma fiction called *Speak*, originally published in 1999 (Anderson, 2011). It includes conversations around topics dealing with trauma and self-image when coping with the aftermath of a sexual assault. Now a graphic novel and motion picture film, Anderson’s book has largely influenced adolescents who have been sexually assaulted and are struggling to process emotions following an assault (Block, 2019). The main character in the book is named Melinda Sordino and is a high school freshman who used art in the classroom to express her feelings and struggles with self-image.
The low self-image expressed by Melinda is exemplified through a sobering dialogue to herself that reads, “I have no friends. I say nothing. I am nothing—I wash my face in the sink until there is nothing left of it, no eye, no nose, no mouth. A slick nothing” (Ahmed and Mohammed, 2020, p. 83). Melinda expresses her “painful narrative” after enduring a sexual assault at a party (Ahmed and Mohammed, 2020, p. 81). Ahmed and Mohammed stated the book has had clinical applications for processing trauma in silence and through art. The authors noted the difference from other traditional theories where silence from trauma is viewed as amnesic or a symptom of another condition. The book proves to be a new way of looking at silence in a positive light when coping with trauma.

The authors also introduce contemporary trauma theory where a person’s silence pertaining to a traumatic event becomes a choice for coping. They further explained that when someone cannot recall a traumatic event, it is not always a sign of inability or “forgetfulness” but a willful choice of personal resistance in order to “pull themselves together” (Ahmed and Mohammed, 2020, p.83). Being silent yet speaking through art is largely exemplified in Melinda’s behavior throughout the book. Ahmed and Mohammed described Melinda as a girl who created a sense of safety within herself following her traumatic experience. The book has been a resource for adolescent readers providing clinicians a powerful example of how to create a sense of safety by being creative. Melinda’s character as portrayed in Anderson’s book provides a strong example of how a trauma narrative can have a lasting socioemotional effect on youth readers. The authors concluded the young adult novel being a story for those seeking empowerment, resiliency and reconciliation after having gone through a traumatic assault.

For young readers, picture books are common household objects but are often read without an in-depth understanding of how the narrative affects the child. An author will write a
picture book to teach a lesson, introduce a concept or to tell an interesting story to the child. While picture books are frequently chosen for their fantasy and whimsical appearances, it is also important to select a book for its therapeutic value. Understanding the cultural relevance of a book is equally as important. For young readers, the current research of books having any emotional and social benefits is mostly testimonial. For students in elementary school settings where picture books are often used, there is an absence of quantitative data measuring the effect of these in-class activities. In addition, there are no established best practices in the literature around applying the content of children’s books through art-based interventions.

Notable case studies of picture books that have had significant impact on young readers include *Shelley the Hyperactive Turtle* (Moss, 2006; Schwartz, 2006) and *Neta and the Medikidz Explain JIA* from the MediKidz Comic Series (Chilman-Blair & deLoache, 2014). Both books have been used to address relevant issues that the reader can identify with and potentially receive emotional support. The *Neta and the Medikidz Explain JIA* comic book was used in a quantitative study where results of test scores were collected for retaining knowledge after reading a picture book about a disease. The comic was specifically chosen to educate and provide therapeutic value to the participant’s knowledge of juvenile idiopathic arthritis (JIA), a disease that each participant had when reading the book (Mendelson et al., 2017). The research demonstrated the therapeutic benefit of educating readers through literature when learning about a new medical topic that can be difficult to explain. The comic book can be a supplemental resource for wellbeing when receiving medical treatment for a disease like JIA.

Children’s stories have promoted friendship, compassion, kindness and good behavior in classrooms on the topics of bullying and school safety (Morris et al., 2000). To reduce violence in schools, Morris et al. reported literature being used in a kindergarten class to address bullying.
By selecting books that emphasized what it looks like to ‘have a peaceful environment’, the kindergarteners were able to conceptualize safety on their own campus. Morris et al. noted the value of enforcing both intervention and prevention plans in the school system using children’s books. Picture books can help explain concepts that students may have trouble grasping on their own. The authors also noted picture books being used in comprehensive educational programs specifically to address violence. They acknowledged the efforts of the teachers and how books can assist their responsibilities for addressing key topics for ensuring safety in schools.

Not only has literature been a resource for discussing topics in school, but it has been a tool used by parents to teach morality and other topics in the home (Deitcher, 2013). Deitcher discussed Jewish children’s stories and their narratives as expressing moral dilemmas that help children come to their own convictions. The authors claimed that storytelling can prompt a child to examine their own ways and teach them how to execute their personal beliefs. According to Deitcher, the definition of a ‘good story’ is one presenting a purpose and overall theme of principles that a child can apply to their life. The authors noted how a child’s life can feel lost or undermined when they compare themselves to others. They concluded that when the child’s own life story is brought forth through a collective narrative that is presented in a book, the child can feel a greater connection with others. The authors described this shift in perspective from a book as the ‘reader-response theory’ where they can respond to a narrative personally. The reader can apply the narrative through a concept known as “imaginative engagement” where they are challenged to imagine their own life like the narrative expressed in the book (p. 249).

*Hansel and Gretel* is a classic children's book that differentiates between feelings of safety and fear with two characters who find themselves enticed by an old witch’s house of bread and sweets (American Literature, 2021). Although, these themes are never clearly explained. The
fictional story of *Hansel and Gretel* is created with ambiguity to enhance a child’s own ‘imaginative engagement’ in the hopes that a child will reach some moral understanding on their own. For this book specifically, follow up questions related to ‘imaginative engagement’ alongside the ‘reader-response theory’ could include, “Is the old witch *good* for offering the breads and sweets to the children?” or “Are Hansel and Gretel *bad* for going into a stranger’s home?” These thought-provoking questions require the intellect of the child to make decisions based on their own convictions and moral reasoning. The author of the book sees ‘imaginative engagement’ at work when deciphering good from evil as presented in the narrative.

**Self-Image in Early Childhood**

An easy temperament in infancy and early childhood is seen to contribute to a higher self-image in later years (Harms, 2010). There is a strong correlation to having a higher self-image when forming positive relationships with family members and peer groups. Harms revealed that the key developmental areas in a child’s temperament can be indicative of a greater capacity for developing self-efficacy. A child's adaptiveness to their environment can largely influence how they view themselves in relation to others and their ability to perform. This behavior also heavily depends on what attachment the child had with their caregiver and how much ‘trust’ was built (Angjelkoska et al., 2015).

Most topics, including a person’s psychosexual development, is focused on the adolescent years where pathological issues begin to surface. Due to this attention to older years, much has gone unnoticed regarding a child’s perceptions of the self before they transition to being a teen. Harms (2010) explained the significance of these earlier years in attaining autonomous behavior. He claimed the independence in a child is encouraged through active participation in their surrounding environments. As a child becomes more autonomous, it is
suggested that their self-concept is also constructed based on how they see themselves (Cherry, 2020). Cherry defines Erikson’s industry vs. inferiority stage of emotional development in early-middle aged children, ages five to 12, where children begin to identify with what they produce. A belief system slowly begins to develop based on the affirmations and consequences of their actions. They also begin to develop a sense of industry and self-efficacy.

Harms further defined Erikson’s term ‘industry’ in middle childhood as a child’s sense of competency. A child will experience inferiority or a sense of ”inadequacy” when their competency is jeopardized (Cherry, 2020, p. 152). To illustrate this, they may associate their image with negativity they receive from others. This can then affect their internal belief system and may even contribute to a lower self-image later in life. Future actions of the child may now be determined based on the level of competency the child feels they have. It minimizes their capacity to do more. Harms defined ‘self-worth’ as a feeling of belonging within the developing child and how a child’s sense of worth can be a key motivator in Erikson’s stages of psychosocial development. The author noted that the child’s family, peer group and cultural influence can shape their internal belief system and sense of competency.

When understanding self-image in early childhood, one must first recognize the five domains in childhood development. These domains include social, emotional, physical, cognitive and language development; each of which are part of the human experience and are areas that develop from infancy through adulthood (Fraser-Thill, 2020). As the child grows and enters puberty, so do their perceptions of the self in relation to their developing body. For language, a child may learn whatever is the primary language spoken in the home. Their image of the self may include their linguistic capability and how well they can communicate in their language. Paralleling the growth of self-image in children with the five developmental domains is a new
phenomenon. If a child fails to accomplish skills in one domain, their self-concept relating to those skills can be stumped. Research should consider exploring these formative years while also understanding self-image and how it develops across time.

Magdalena (2015) found there is a difference between the cognitive self at ages eight and nine as compared to the cognitive self at ages 10 and 11. When explaining this difference, she revealed a child at a younger age will be more self-focused and will identify by their level of competency. This competency for achieving certain things is primarily based on praise received by others. The transaction of consequences and rewards in school, with peers, and on social media, can cause a child to construct their own perception of the self. They will associate themselves with what they feel best as or how they feel the least. Magdalena described statements such as “I am smart” or “I am pretty” or “I run fast” will show this association. It can also be exemplified through critical statements such as “I am dumb” or “I am ugly” or “I am slow” (p.622). When a child begins to see themselves in relation to their peers, while placing these identifications on themselves, new self-made statements are made. The cognitive self when comparing with others will be exemplified through statements such as “I am the smartest” or “I am the prettiest” (p. 622).

As previously reviewed, the new framework in education can be best known as ‘contemplative education’ where conscious awareness of internal values is sought whilst learning new educational material (Roeser and Peck, 2009). Contemplative education allows for the specific uses of children’s literature to evoke self-awareness in students when teaching a lesson. In school settings, research has investigated providing teachers with a variety of tools and inventories measuring self-concept, in terms of student achievement (Hamachek, 1995). The search for addressing self-concept in students is still a topic of discussion.
According to Angjelkoska et al. (2015), self-concept relating to self-image is developed across the lifespan. In childhood years, self-concept is heavily influenced by the parents or primary caregiver. Even more influential is the child’s family environment and how positive or safe the interactions between family members in the home feel to the child. This can give the child a strong sense of self. The authors claimed self-concept is relative to the “inner capacities” of each person and is based on their social context and interactions (p. 59). As a child enters adulthood, their social contexts change and their beliefs about who they are in relation to others will change. This understanding can be based on two principles, Vygotsky’s sociocultural approach of cognitive development and Albert Bandura’s social learning theory based on contexts (Koutselini & Valanidou, 2014).

In a study of 1,305 high-school students, ages 14 to 19 years old, Di Blasi et al. (2015) found those reporting symptoms of social anxiety disorder (SAD) were more likely to have a low self-image based on their answers on the Offer Self-Image Questionnaire (OSIQ). The authors noted an alarming number of “25.9% participants scoring above the clinical threshold on the SIAS” when this study was done with a randomized group of teens (p.76). Self-image was assessed through questions that addressed how the adolescent viewed themselves with regards to their peers. The OSIQ consisted of topics having to do with moral standards, how to make decisions in different scenarios and how the student envisioned their future. The research showed that when someone reported dealing with anxiety in the classroom, they also lacked a stronger self-image. The need for addressing self-image pertaining to these topics presented in the questionnaires shows a strong correlation to mental health. As anxiety-related problems become more frequent in adolescent years, self-image can also be affected. Early childhood may prove to
be a crucial time for self-image to be discussed in the hopes of a strong self-image becoming a preventive measure for future anxieties.

**Self-Image in Relation to the Body**

In a study by Halliwell et al. (2016), the authors found body image as a relevant topic for kids ages six through 12 with almost half of them reporting dissatisfaction for the way they looked. The *Body Image in Primary School* curricula (Hutchinson & Calland, 2019) is a widely used school workbook focusing on the external pressures that influence body image in early childhood. It is exceedingly important to address a child’s value and belief system, and to address this system in terms of body image. Harms (2010) found that children and adults will often treat people having a more attractive physical appearance with favor and positivity. Although the author acknowledges this behavior as a problematic stereotype people try to avoid, favoritism is still clearly present. Harms pointed out the consequences and issues related to societal-constructed stereotypes around body image for children. Family members, peer groups and social media can intensify and even cause a child to internalize stereotypes related to their body. Some might favor a child based on their stereotypical attribute or characteristic, instilling a subliminal message of the child’s self-worth and image.

Harms (2010) revealed that appearances should be kept separate from how a child will view their own capabilities. Society puts emphasis on physical appearances and sends subliminal messages of what defines beauty and attractiveness. By first understanding problems in self-image with children, the lessons related to body image might be better explained. Research points to a need for the deconstruction of unhealthy values and beliefs that children have received from social cues (e.g., on social media, television, with other peers). This will lead to a reconstruction of a more positive image of the self. Addressing topics related to body-image is simply assessing
the perception of the self that involves a person’s physical appearance. The internal belief system is formulated based on the appraisals and consequences received by others. In the past, research has primarily focused on body-image in the context of a child’s physical characteristics. This research proposes a shift in attention towards the child’s collection of internal values reflecting self-image as it then relates to the body.

How Social and Environmental Pressures Can Change Perceptions of the Self

Cultural influences within the family, socioeconomic status, geography and location, individual differences and family structure, are all factors that can influence self-image. Harms (2010) explained worrying caused by societal and family expectations can be connected to a child’s “emerging sense of self” and their innate desire to feel like they belong (p. 150). Noting the home environment and parent-child interaction is key for gathering a clear understanding of self-image. Karwowski (2015) introduced a new term known as ‘creative self-concept’ that represents perceptions of the self regarding one's ability to think creatively. The author found that increased creativity in social contexts can lead to a positive self-perception. By learning to come up with their original ideas, a child can positively identify with the ability to create. It is important for them not to base this idea solely on what is produced but rather on the process of being able to produce. A child's self-concept is more dependent on interchanging scenarios when they must achieve something in order to feel a sense of competency. The idea that Karwowski presented is focused on creativity as providing a stable sense of belonging where the person creating enjoys its process. It does not matter how good or bad the quality of what they produce turns out to be.

Social media and popular culture are two significant sources to consider when exploring pressures that can avert self-image. Lee (2009) researched the effects of Disney movies on self-
concept and found that for young girls, they saw portrayals of the female bodies and their sexuality based on how the protagonists are portrayed. The author noted that self-concept can be so intertwined with societal norms and portrayals of beauty and perfection. Lee examined the classic Disney films, *The Little Mermaid* (Clements & Muster, 1989) and *Aladdin* (Clements & Muster, 1992), by conducting group interviews with 10 Korean girls. The author found themes relating to facial beauty and the female protagonist’s body shape. The participants saw the main character in both films as representative of Korean women, slim and skinny, rather than how they saw American women. Lee (2009) pointed out this social-cultural factor in understanding self-image by stating, “an image in American popular culture can be understood differently, depending on the socio-cultural reality of the viewer” (p. 369). She acknowledged the importance of approaching a person's image based on different social contexts. Social media sites are now a more easily accessed method for comparing one’s image to others. It does not care which social context the viewer comes from but rather pushes idealistic values of the perfect image onto the child. It is crucial for a child to make conclusions of the self based on their own social context and cultural upbringing, rather than dismiss these social-cultural factors altogether.

Another term introduced by Phillipson and Phillipson (2017) known as academic self-concept describes the sense of achievement felt when a student receives praise for their educational goals. In a longitudinal study looking at parental representations predicting behavioral problems in five and six-year-olds, 153 kindergarteners engaged in play narratives when describing their experiences at home (Stadelmann et al., 2007). The authors found that negatively represented parents in role playing indicated conduct issues of the child, while positive representations of parental figures predicted more prosocial behaviors. The study used
the MacArthur Story Stem Battery (MSSB), an assessment tool for children ages three through seven, that measured responses through role play when considering a variety of social-emotional scenarios. The tool was deemed effective when understanding a sense of parental influence on a child and how their perceptions of parents can be expressed through role play.

Traumas in Early Childhood

Testa and McCarthy (2004) shed light onto the increasing need for addressing cumulative trauma. The concept is defined as distressful events causing a continued disturbance in the child’s ego development. These disturbances can lead to alterations of self and cause behaviors of emotional withdrawal. Testa and McCarthy described acute trauma as a singular traumatic event that can lead to irritability, a lack of focus, depression, anxiety and anger. The authors explain that childhood traumas can be both cumulative or acute, primary or secondary. They may also include early neglect, physical abuse, sexual abuse, parental abandonment or absence from a caregiver.

Another form of cumulative trauma in childhood years includes gaslighting—a term used to describe psychological distress where a person feels manipulated to think or feel a certain way (E. Partridge, 2020). This type of psychological abuse will often lead to self-doubt and profuse apologies made by the child to the adult. Testa and McCarthy (2004) added that physical and sexual abuse can cause symptoms of dissociation. The lost sense of touch or connection to reality can largely skew self-concept. Testa and McCarthy highlighted the therapeutic model of involving preadolescents in painting group murals for resolving feelings related to secondary traumas. When responding to the sorrowful event of September 11, 2001, the authors reported the creative arts being a safe method for expressing difficult emotions. The use of storytelling through images and symbols of the specific day helped teens cope with the trauma. By painting a
mural, it helped organize “narratives about the trauma and its representation in a child’s internal world” (p.40). The mural involved an entire group who witnessed the disastrous event so they could gain new feelings of unity and strength.

**Using a Picture Book to Address Self-Image in the Classroom**

Many interventions for addressing self-image in early childhood are focused on having a positive body image with a specific focus on girls. Halliwell et al. (2015) noted that the school population is a unique place to hold interventions for it includes large and inclusive groups of students. The school campus presents educators with an opportunity to interweave social and emotional skills into their teachings in order to address self-image in their students. These topics can be added into their curriculum more frequently as preventative measures to low self-esteem and future anxieties. The classroom environment can provide a new space for group discussions of shared life experiences between students as well as applications for acquiring a positive self-image.

The reading of a storybook is a feasible intervention for promoting a positive self-image and stable sense of self in students. The inclusion of artmaking after reading a picture book can be a method for cultivating deeper group discussion of the book’s content. The curricula and workbook titled *Body Image in Primary School* (Hutchinson & Calland, 2019) displays an urgency for discussing topics of self-image and body image in childhood years. In the workbook, the authors addressed the teenage years as a period where pathology issues begin to arise. These problems can be linked to poor perceptions of the self in younger years. In Chapter 2 of the book, the authors highlighted the reason for the prevalence of having low body image in earlier years and correlated this frequency with the rise of subliminal messaging about the body on social networks. Hutchinson and Calland write that a child’s level of comprehension increases their
susceptibility for internalizing negative messages. The authors added that young girls will associate happiness with their image and that the only way to achieve this happiness is through an ideal perception of femininity (e.g., thin, attractive, being successful).

Hutchinson and Calland both agreed that gender stereotypes for girls and boys can cause children to construct a belief system that lacks truth. It is a system that moves them away from self-confidence and towards idealization of another’s image. The *Body Image in Primary School* curricula shares this universal topic of concern with schools and educators. It prompts for new ways where individual differences and strengths can be recognized. It is imperative to advocate for a mandatory inclusion of children’s books in classrooms with stories depicting disability, limitations, and overcoming hardship. These meaningful stories can be helpful for students to identify with and discuss in larger groups.

Zhang and Hoosain (2001) examined the essential parts of a children’s narrative as the protagonist’s goal and the outcome of their story. Readers will depict themes of a picture book based on the main character and how they resolve conflict. E-books (e.g., reading books electronically such as on a tablet or smartphone) have been included in research relating to literature having some therapeutic value. Antón et al. (2013) noticed readers of conventional books are sometimes more reluctant to e-books where the “product-user image” fails to match the “consumer’s self-concept” (p. 375). In other words, there is a higher probability that the reader won’t use the e-book to read books if the e-book is hard to use. The authors stated that a product like a picture book can have attributes to it revealing a certain image to the user. This is seen as a form of marketing. The title of a book creates an image of the book and functions as an aid in retention and memory of the product (Zhang & Hoosain, 2001). The reader will choose the book if the title is attractive to the reader. When choosing a picture book to be used in a
classroom setting, the teacher should be mindful of how the title, illustrations of the book and characteristics of the book might appeal to the diverse images representing their students.

**Current Applications of Children’s Literature**

It has been found that children recall stories better through rewriting aspects of the narrative in poetry-form, adding rhythm and pattern to their wording so that themes are deeply ingrained and memorized (Goldman et al., 2006). Storybooks are commonly applied through focusing on the language and the words or phrases that are repeated and reiterated. Goldman et al. stated these repeated words or phrases in a storybook are generally made to emphasize the emotion and feelings that are felt by the characters. The protagonist in a story directs the outcome of how the problem will be resolved. Past research has found that the relationship between literature and psychotherapy are representative of a “symbiotic interdependence” of creativity and health (Segun, 2013, p. 126). The protagonist is a key component in applying constructs learned in a storybook, especially when their characteristics convey positive attributes. The fictional character can serve as a role model to a reader and can teach them how to think when facing a problem like the ones presented in a storybook.

There must be cultural relevance in the character for the reader to better apply the story. The character should reflect different people groups and not have biases or show favoritism towards one group of readers (Wilson & Cottone, 2013). Children’s literature has made tremendous leaps in providing relevant information on topics such as race and cultural injustices. Copenhaver-Johnson et al. (2007) reported self-image becoming a highly discussed topic when learning about racial injustices in books, especially when the reader can identify with these experiences endured by the characters. Educators and parents have used literature around issues pertaining to race and misuses of power for prompting discussion of key historic events. Richter
et al. (2014) stressed the importance of discussing gender roles in books and how female and male attributes of a character may influence that of the reader. It is crucial that the educator or parent chooses a children’s book whilst being mindful of these influences on race, culture, sex and age.

Among some of the already known mental health benefits to literature, parents have broadened the use of storytelling to help their children fall asleep. The soothing tone of the reader and the narrative that is presented to a child late at night often helps them fall asleep. Clinicians have now applied storytelling in medical settings to ensure better health and to lower anxiety in hospitalized patients before bedtime (Anggerainy et al., 2019). Anggerainy et al. applaud these storytelling techniques as cheap and convenient interventions for ensuring comfortability and to reduce sleep disturbances. Even if the literature is used for bettering sleep habits, the parent or clinician can notice the type of book that is read so that the child receives emotional benefits as well.

Frei (1999) claimed children find meaning through stories and visuals within a storybook. The author noted that this experience can expedite their learning of metaphors in life. Frei also found that in the school setting, students’ applications of a storybook can be constrained due to the teacher’s expectations of what they think is acceptable on campus. The author shared how making art is unique in that it provides the child with an unconstrained invitation to construct their own meaning of what they have read.

Traditional childhood fairytales have been used in drama therapy to explore personal life events through role play in which the person learns to become their own heroes overcoming adversity (Silverman, 2004). Barnes and Bloom (2014) called attention to some of these preferred stories based on age. The authors shared these preferred stories beginning at ages four
to five and including characters with strong emotion. Characters such as animated protagonists or personified objects. It is important to note these preferences along with what defines a ‘good story’ according to Deitcher (2013) to ensure a book has potential for offering maximum therapeutic benefit.
Chapter III: Methodology

The current study investigated the intervention of utilizing the children’s book titled *Where Oliver Fits* (Atkinson, 2017) in a classroom setting to explore its therapeutic benefit with elementary students. It included the application of the book’s content through the process of artmaking and prompting students to write an original story. It inquired about the potential for the character in the children’s book to influence the self-image of the reader and student, and for the content in the book to be internalized artistically. The study incorporated a modified version of the art therapy assessment tool called Draw A Story (DAS) by Rawley Silver (1988). The tool measures self-image, emotional content, and use of humor in drawn subjects and themes presented in the story. The assessment included a prompt for students to describe their drawing through a self-written story and write themselves in it as the main character. According to Silver, the DAS has been widely used by clinicians to assess negative self-image, aggression and depressive-like behaviors in children and adolescents. By giving 14 stimulus cards to a child before drawing, the child could then come up with their own metaphors between those two subjects in the cards. Both the reading of the children’s book and the modified version of the DAS were facilitated by a teacher during one hour of class time.

Narrative therapy was the primary framework for discussing the relation of the book’s content and students’ drawings. The results were explored through the sub-category therapeutic model known as bibliotherapy where a book becomes a key component used in therapy. Today, reading children’s literature is often considered a leisure and family activity. Acknowledging these potential therapeutic benefits to children’s books can allow for greater advocacy for the application of picture books in young clients.
Hypothesis and Exploratory Questions

Like with all arts-based assessment tools, it is important for the artwork to be followed up with explanation from the child (Betts, 2006). With the evaluation of the artwork and story, the researcher hypothesized that the participant’s drawings from doing a modified version of the DAS and reading Where Oliver Fits (Atkinson, 2017) would reveal more positivity in the participant’s scores of all three scales. The content in the artwork and story would also show similar themes to the children’s book. Three exploratory questions were considered throughout the research:

1. Do children’s books have the potential to offer therapeutic benefits to students in a classroom setting?
2. Can a fictional character in a children’s book influence the self-image of a reader? Will this influence be seen through Draw A Story (DAS) results?
3. Does a reader’s art and story made after reading a children’s book reveal similar themes to the book’s story or protagonist? If so, what are the themes?

Participants and Research Design

The research design for this study was a quasi-experimental, one-group posttest only research design that was completed in a classroom setting at limited capacity and with virtual instruction. Mendelson et al. (2017) conducted a similar study where participants were tested for knowledge retention related to a medical disease after reading the children’s Medikidz comic series titled, Neta and the Medikidz Explain JIA. Due to COVID-19 restrictions that began in the Spring term of 2020, some students participated in school instruction in the safety of their home.

The selection of participants for this study was done through convenience sampling with a small snowball effect beginning with a first contact to an elementary school teacher located in
the greater Bay Area. This second and third grade schoolteacher began discussion of the research with the school principal for permission to conduct study (See Appendix B). The principal agreed to do the study, and the teacher became the main point of contact for the researcher throughout the duration and conclusion of the study. This teacher also agreed to inform other second and third grade teachers employed at the same school about the opportunity to participate in the study. A brief description of the study was provided to the teachers and parents of the students to recruit for participants (See Appendix F). All students and teachers who ended up participating in the study were from the same school.

Due to the depth of qualitative data analysis required, the researcher limited the study to the potential for five classrooms to participate with 12 students in each class. Participants for the study ranged from seven to nine-year-old’s and in the second or third grade levels. This age range is a key time for addressing self-image in children due to perceptions of the 'self' beginning early on (Halliwell, 2015) and potentially being a precursor for one’s self-concept as a teen (Hutchinson & Calland, 2019).

The researcher had no direct contact with any of the participants, the participant’s parent(s) who gave consent for their child to participate or the two teachers following the first teacher who was contacted. The researcher remained only in touch with the first teacher who initially agreed to participate in the study and relay information to the other staff members.

Each teacher who participated in the study made all necessary communications to the student’s parent(s) on behalf of the researcher. This included giving a debriefing form to each parent for closure of the study (See Appendix E). When a second or third grade teacher decided to have their class participate in the study, a parental consent form, an assent form for the minor, and a demographic form for the student was delivered to the child’s parent(s) to complete (See
Appendix A, C, D). Both the parental consent form and assent form were collected by the teacher before a student did any portion of the study. Demographic forms were collected before and after the day of the study.

If some students did not receive consent to participate in the study, it was up to the discretion of the teacher as to how to conduct the research despite some students not doing the in-class activities. If this were the case, the researcher advised each teacher to engage the students who were not doing the study in an activity like the one in the study. This ensured these students did not feel left out from not engaging in the in-class drawing and writing activities presented in the study.

Once all consent forms were received by the teacher, they could participate in the study and receive the research instructions. The instructions included a modified version of the Draw A Story (DAS) prompt (Silver, 1988), the provided 14 DAS stimulus cards and the recorded reading of the book for showing to their class (See Appendix G, I). The entirety of the study required an hour of class time. The teacher was also given a summary and review sheet of the children’s book Where Oliver Fits (Atkinson, 2017) before showing the book to their class (See Appendix J). The teacher could inform the students to submit their drawings later in the day online through Google Classroom if participants did not finish their artwork in the one hour of class time.

All artwork and paperwork received by the students for the study were submitted onto the teacher’s Google Classroom. The folder for their art and story was kept confidential and only shared by the teacher with the researcher once all the data was collected. Upon finishing the artwork and story for the study, a debriefing statement was sent out to each participant and their parent(s) (See Appendix E).
Noted Risks and Benefits

Since this study included online instructions for those participating virtually, parents were given instructions in the consent form on what to do if technology malfunctioned. Options such as troubleshooting or emailing the researcher were provided to each parent so that the student could finish and still submit their artwork if this occurred.

Sensitivity to students regarding a lack of art supplies in the home were also noted in the parental consent form and included a list of alternative supplies. In addition, the children’s book Where Oliver Fits (Atkinson, 2017) conveyed topics of self-image in early-middle childhood and the highs and lows of finding belonging. These topics around self-image could have elicited unwanted feelings in the child. Thus, the debriefing form included other resources for the parent to access if these socioemotional topics were disturbing to young participants.

The present study offered benefits to the youth participants, as well as to the teachers who chose to do the study with their class. Some of these benefits for the students included the opportunity to draw, enjoying the in-class study activities and connecting with other students. The participants may have experienced a sense of accomplishment with their own artwork and may have felt fulfilled from contributing to art therapy research. The teachers may have felt satisfied for contributing to art therapy research with their class. In addition, teachers may have felt more inspired to use children’s books in their lessons and school curriculums.

Measurements

Participants were instructed by the teacher to follow modified instructions of the Draw A Story (DAS) art therapy assessment tool. The measurement asked participants to draw an image using two cards and write a story about their image. The drawings and their descriptions were then collected by the researcher and scored by three graduate student level art therapists.
attending Dominican University. Evaluations of the art and story were made based on the three DAS scales: Scales for Assessing Emotional Content, Scale for Assessing Self-Image, and Scale for Assessing Use of Humor (Silver, 1988) where each participant was given a score from 1 through 5 (See Appendix H). The researcher chose to add a fourth component for scoring to assess similarities of the themes in the drawings to that in the book *Where Oliver Fits* (Atkinson, 2017).

**Modifications**

Although projective tests can give guidance to a therapist, it is important to not make any definite conclusions based solely on the artwork. To alleviate validity issues to results, it is necessary to ask clients to describe their artwork for gathering a deeper understanding. In response to the common criticism arts-based assessments have received in the past, both in their reliability and validity, Betts stressed the need for more adequate research on these measures (Betts, personal communication, March 17, 2021). It is the researcher’s strongest intention to refrain from assessing participants based on their artwork and story but rather to explore themes in the drawings in a school setting. The modification of the tool allowed for more direct responses in terms of relating to clients when using the DAS assessment with individuals who had lost a loved one (Haag, 2018).

The prompt for the current research was modified to be more directly related to responding to a children’s book in a school context. The first step included the teacher showing all fourteen stimulus cards from the assessment to the class on the screen. The next step included the teacher reading the following to the class, “Look over the pictures you see and choose two.” Following the task of choosing cards, participants were asked to, “Imagine something happening between the two pictures, and then draw a picture of your own of what you’ve imagined.”
addition to this step, students were prompted to, “Make your picture tell a story and draw yourself in it as the main character! Are you like the main character that was in the book? Are you different?” This modified version of the DAS assessment prompt gave participants the opportunity to relate themselves to the children’s book by envisioning themselves as their own character. The last step included participants writing a few sentences about what was happening in their drawing and to give their story a title. Each of the participant’s stories were written on the back of their drawings or submitted along with the artwork on a separate sheet of paper.

Data Collection

All data for this school-based study was collected on each of the teacher’s Google Classroom platforms. The data, including the forms and artwork, was shared through Google Classrooms with the researcher so that results and discussions of the study could be made. Artwork of the participants was then shared in private folders with other art therapists and graduate level students for scoring. All the artwork remained anonymous throughout the process and publication of the study. All research information will be kept by the researcher for three years (seven years if published) and used only for research purposes. Unless published, all artwork and testing information will be destroyed after the three-year period. This will mean for the researcher to permanently erase all collected artwork and digital photos of the participant’s as well as their demographic, consent and assent forms.

Analysis of Data

For inter-ratability, the researcher decided to include two additional student art therapists including herself for scoring the participant’s drawings. The researcher then averaged the scores of all three raters for each participant covering the three topics. The scoring of the drawings was based on Rawley Silver’s (1988) original three scales measuring self-image, emotional content
and use of humor. The modification to the scoring procedure included the addition of scoring comparisons of themes in the book to that of the themes in the participant’s drawings.

Silver’s scales included a 1-to-5 point rating system where the score of 1 represented a drawing with low self-image or negative emotional content. The score of 5 represented a drawing with high self-image or positive emotional content. The fourth component asked raters to circle “Very Similar”, “Similar”, “Neutral”, or “Not Similar At All” when relating the participant’s drawn content and themes in their story to the themes in the children’s book (See Appendix H). Each scorer was given a summary of Where Oliver Fits (Atkinson, 2017) and a description of the book’s themes before scoring the participant’s drawings on this topic.

**Required Forms**

A. Informed Parental Consent (See Appendix A). Parent(s) submitted this form to the teacher before the day of study.

B. Permission to Conduct Study (See Appendix B). The Principal at the study’s site gave a signature giving consent to the researcher for doing the study and contacting additional teachers at the school. This form was shown to parents if asked.

C. Assent Form for Minor (See Appendix C). Parent(s) were expected to read this form to their child before the day of study. The student had to complete this form and provide their teacher with a copy before participating.

D. Demographic Form for Student (See Appendix D). Participants filled out this form with the help of their parents and provided a copy to their teacher before or after the day of study.

E. Debriefing Statement for Student and Parent(s) (See Appendix E). Parent(s) were expected to read this form to their child after completing the study and submitting their artwork for scoring.
Review of Research Procedures

Step 1: Teacher(s) sent the Parent Consent Form, Assent Form, and Demographic Form to each of their student’s parents.

Step 2: Teacher collected the signed Parent Consent Forms, Assent Forms, and completed Demographic Forms by those who would participate.

Step 3: Teacher received the study materials by the researcher (i.e., Summary and Book Review, Video URL of Where Oliver Fits (Atkinson, 2017), Modified DAS Instructions and the 14 Draw A Story Stimulus Cards (Silver, 1988).

Step 4: Teacher conducted the study of which required 1 hour of class time.

Step 5: Teacher collected all participant’s drawings and stories on their individual Google Classroom, in a designated “For Research Purposes-Only” folder. This folder remained confidential and was only looked at by the teacher and researcher.

Total Class Time Required

Each participant was permitted to finish their artwork outside the hour of class time whether they attended class in person or online. In an unexpected event where the student received consent to participate but was absent from the day of the study, the participant was able to still do the study on another date during class. It was up to the discretion of the teacher to decide when to give this student their one hour of class time to do the study. The teacher was not permitted to share any of the test materials with parents to do in the home.

Materials

Supplies for the study included an online Vimeo/URL recording of the reading of Where Oliver Fits, a modified version of the Draw A Story (DAS) assessment tool by Silver, 14 DAS stimulus cards, coloring utensils, 8 1/2 x 11-inch white printer paper, a pencil and a pen.
Protection and Privacy of Minors

Each youth participant’s artwork, demographic form, assent form and signed parent consent form were kept on file by the researcher in a confidential folder stored on a Google Drive after being collected from the teacher’s Google Classroom.

All artwork, tests, questionnaires and transcribed material were coded with a number that matched the participant and their corresponding consent and permission to use artwork forms. All forms and number keys were stored separately from all artworks, test, questionnaires and transcribed material and was only accessible to the primary researcher on this Google Drive.

Each youth participant will continue to be anonymous throughout the Thesis and thereafter its publication. Only pooled analyses of the participants and collection of the artwork’s themes have been documented.
Chapter IV: Results

This study looked at the potential for a children’s book to lead to more positive scores from the Draw A Story (DAS) assessment tool (Silver, 2001). These scores showcasing either more positivity, neutrality or negativity in the participant’s drawings and story based on their content, use of humor and identification to the drawn subject(s).

The participants were 18 second and third grade level students attending the same private elementary school located in the greater Bay Area region. Though the students were the participants, their teachers were also key collaborators in the research. Each classroom was a mix of 12 second and third grade level students. The teacher’s obligations in the study were to collect all required consent forms, present the book’s recording to the class, deliver the DAS assessment and gather each of the participant’s data on a Google Classroom forum. The study was a five-part process designed by the researcher. The participants watched a four minute and 45 second video of a recording of Where Oliver Fits (Atkinson, 2017) on YouTube before doing the in-class activity. The teacher then showed 14 DAS stimulus cards to their class while reading the modified DAS prompt before allowing participants to draw and write their story.

Classroom Participation Due to End of School and COVID-19

Out of the 18 participants, four did not submit any artwork or story to their teacher’s Google Classroom. When asked by the researcher a potential reason for this, the participant’s teacher noted the study taking place during the second to last week of school where many other assignments were due.

A total of nine participants identified as male, six identified as female and one preferred not to identify. Two of the 18 participants did not complete a demographic form, so no gender identification was recorded. Regarding ages of the participants, two participants were seven and
seven and a half years old. Six participants were aged eight. Eight participants were nine and nine and a half years old. Gender identification, the participant’s age and preferences for reading children’s books were collected by direct response of the participant in the demographic forms (See Table 1).

Due to the COVID-19 restrictions for limited classroom capacity, three of the 14 students completed the study online from the comfort of their home. These three students listened to both the reading of the book and the prompt of the Draw A Story (DAS) assessment online (Silver, 1988). The remaining fifteen students participated in the book reading and assessment in person by instruction of their teacher.

Table 1 Gender Demographics of Participants

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<th>Participant Quantity</th>
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<tr>
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Table 2 Age of Participants

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<th>Age of Participants</th>
<th>Participant Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>7-7.5 Years</td>
<td>2</td>
</tr>
<tr>
<td>8 Years</td>
<td>6</td>
</tr>
<tr>
<td>9-9.5 Years</td>
<td>8</td>
</tr>
</tbody>
</table>
Table 3 In-Person vs Virtual Instruction

<table>
<thead>
<tr>
<th>In-Person Instruction vs. Virtual Per Classroom</th>
<th>Participant Quantity in All</th>
<th>Of Those, Participants Attending Online</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom 1</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Classroom 2</td>
<td>14</td>
<td>3</td>
</tr>
<tr>
<td>Classroom 3</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

Note. The tables above show the total number of participants, their age groups and gender identifications. This information was collected from self-reported questionnaire demographic forms completed by the participant.

Results of the Artwork and Stories

The research activities were originally limited to an hour of class time. Due to some participants needing more time to finish their artwork and story, teachers reported extending the time to finish their artwork for submission on a second day. Teachers also reported not having the full hour of class time to do the study in one-sitting. Thus, the original hour instruction was not met by all participants.

The data collected was both quantitative and qualitative as it included Draw A Story (DAS) scores as well as a deeper look at the themes in the artwork (Silver, 1988). The quantitative scoring was based on the DAS assessment scoring criteria that examined the emotional content, self-image and use of humor in each drawing and story. The qualitative data included a comparison of themes in the participant’s artwork and story to that presented in the children’s book titled *Where Oliver Fits* (Atkinson, 2017). In addition to these analyses, three exploratory questions were asked:

*Exploratory Question One.*
The research investigated if children’s books could offer therapeutic benefit to young readers in an elementary school classroom. The demographic form asked the participants whether they felt differently after reading children’s books. Results from question four (Q4) covering this topic can be viewed in Figure 1.

*Figure 1 Participant's Own Emotional Response After Reading a Children's Book*

*Note.* This picture illustrates the participant's self-reported answers from question four on the demographic form. It asked participants what feelings they had after reading a children's book. Choices ranged from 1 to 5. A score of 1 read, "I Feel Less Happy" and a score of 5 read, "I Feel More Happy". The score of 3 read, "I Feel the Same". The score of 2 and 4 indicated feeling more or less in either direction.

Questions one (Q1) through three (Q3) from the self-reported demographic form asked participants their familiarity and preference for art and children's books. Results from these three questions are displayed in Figure 2, with most participants reporting a high interest in art and reading children's books. The results also indicated that at least 63% of the participants read children's books "A lot!" and that 100% of them reported liking reading traditional picture books.
Figure 2 Participant’s Familiarity and Preference for Making Art, and Reading Children's Books

**Q3: Do you like to do art?**
- 75% YES
- 25% KIND OF
- 0% NO

**Q2: How often do you read children's books?**
- 63% A LOT
- 0% NEVER
- 37% NOT MUCH

**Q1: Do you like to read children's books?**
- 56% YES
- 44% KIND OF
- 0% NO

*Note:* The top figure shows participant's preference for making art with 12 reporting a high preference, four reporting somewhat of a preference, and zero reporting having no preference. The middle figure shows how frequent a participant reads children's books with 10 reporting reading a lot, six reporting reading not much, and zero reporting reading never. The below figure shows participant's preferences for whether they like to read children's books with nine reporting liking to read, seven reporting somewhat liking it, and zero reporting not liking it at all.

**Exploratory Question Two.**

The research asked the question as to whether a fictional character in a children’s book could influence the self-image of a reader. It inquired whether this influence would be seen through an increase in Draw A Story (DAS) scores. After each participant submitted their
artwork and story, both were scored by three masters level student art therapist raters. Scores were made based on the criteria presented in the three Draw A Story assessment scales created by Rawley Silver (1988). The average of the scores for each scale were rounded to the nearest tenth and recorded in the results below (See Figure 3). The DAS scales ranged from 1 to 5 and included .5 differences +/- . The researcher divided results into three categories: Positively themed content, Negatively themed content, and Neutral themed content (e.g., neither positive nor negative). Scores of 1 or 2 were categorized as Negatively themed content in all three scales. Scores of 3 or 3.5 were categorized as Neutral-themed content in all three scales. Scores of 4 or 5 were categorized as Positively themed content in all three scales.

*Figure 3 Participant Scores from the Draw A Story (DAS) Art Therapy Assessment Tool by Rawley Silver*

*Note.* These three pie charts illustrate the participants' scores from the Draw A Story (DAS) Assessment Tool Scoring Criteria created by Rawley Silver (Silver, 1988). The top left pie chart shows participants' scores based on the Scale for Assessing Emotional Content. The top right pie chart shows participants' scores based on the Scale for Assessing Use of Humor. The bottom-center pie chart shows participants' scores based on the Scale for Assessing Use of Humor. Each pie chart categorized
Identifying Self as the Main Character in Your Story

Results showed that 71% of the participants wrote their story in first person with I/we perspective, gave their character their own name, and/or labeled their character in their artwork with the word ‘Me’ (See Figure 4). This result is in response to the researcher’s modified prompt:

"...Make your picture tell a story and draw yourself in it as the main character! Are you like the main character that was in the book? Are you different?"

Of the 14 participants who submitted artwork, most had the capacity to express themselves through a narrative and character labeling themselves as ‘Me’ or ‘I’. Participants did not refrain from identifying themselves in their own original story even if the story had a negative or destructive ending. More discussion about self-image, theory of mind, and its relation to integrating oneself into a story is discussed in Chapter 5.

*Figure 4 Participant Identifies 'Self' in Story vs. No-Identification or Identification is Too Ambivalent*

*Note.* The figure above shows the participants who identified themselves as the main character in their own story and/or artwork. About one-third of participants did not choose to identify with what they drew or wrote.
**Exploratory Question Three.**

The last question presented in the research investigated whether a young reader’s art made immediately after reading a children’s book would contain similar themes to the book’s story or main protagonist. If so, what would be the themes? Along with ratings based on the Draw A Story (DAS) scoring criteria (Silver, 1988), drawings and stories were assessed for similarities to themes in *Where Oliver Fits* (Atkinson, 2017). Themes in the children’s book that were compared to the participant’s artwork and story included: unique, different, self-care, self-love, high self-esteem, positive self-image, confidence, belonging, finding your own voice, community and friendship.

Raters indicated if the content in the artwork resembled similar content in the book and if their story also suggested these themes. Results showed that only 28% of participants displayed ‘very to somewhat’ similar themes to the book’s content (See Figure 5). These participants that included similar themes to the children’s book portrayed their art with the book's characters, expressions and suggested a closely related plot to that in the book (See Figure 6).
Figure 5 Participant Scores of Similarities in Their Drawing and/or Story to Themes in the Book

Note. Participant's drawings and stories were assessed on their content and similarity to themes in the book, *Where Oliver Fits* (Atkinson, 2017) read prior to the in-class activity. Themes in the book included being unique/different, self-care/self-love, high self-esteem, positive self-image, confidence/belonging, finding your own voice, and community/friendship.

Figure 6 Similar Book-Themed Images and Content from Participant Art

Note. Sections taken from participants art. The drawing on the left shows a sad and happy face, referencing the three parts to a story. The drawing on the right shows six puzzle piece characters with optimistic facial expressions. Both drawings reveal similar themes to the book, *Where Oliver Fits* (Atkinson, 2017).

Upon presenting the participants with 14 DAS stimulus cards, it is important to note which cards were most frequently picked. The card with a picture of an erupting volcano was
picked by five students and was the most picked card used in the participants' stories. The card with an illustrated butterknife was the second most picked card used in these stories. These results displaying the most picked cards are shown in Figure 7.

The participant's story integrated images of the volcano and butterknife in both hopeful and destructive scenarios. Approximately 60% of participants who picked either card ended their story with a problem that was solved. The other 30-40% of participants included destructive, graphic, and often morbid or lethal endings (See right illustration in Figure 7 for the categorization of two types of endings).

Prevalent Themes in Participant's Artwork and Story

The two main themes in the student's artwork and story describing it were physical threat/harm and protection/saving. There were two settings that existed with these themes that
included a threat from a volcano erupting or a threat from another person holding a butter knife. The main character in these types of stories would either escape the threat, be defeated by it, or rescue and fight back often saving others from the threat.

Once the two cards were picked, many of the images told a story. Only a few included no words and just a drawing with labels. These labels indicated who the subjects in the drawing were and their relation to other subjects in the story. Most of the participants' stories also had a beginning, middle, and end, and would range from one page to four pages in length.

Volcanoes.

Of the 14 cards initially presented to the participants, the most picked card was an erupting volcano which led to themes of physical threat/harm by the volcano or protection/saving others from it. The content often included a story where the volcano was erupting and required a quick escape by the main character. The stories that consisted of a volcano would include other members who the main character had to care for at the expense of their own life. The ending of these stories ranged from being victorious, resulting in the main character and those whose lives were endangered being saved, or in destruction. In this case, the main character would appear to have little to no power of control in the situation and act passively. Sections of the participant art that included the volcano card from the stimulus cards are shown in Figure 8.
Figure 8 Five Volcano Images from Participant Art

*Note.* Sections taken from participant art. All artwork included the choice of the volcano card and portrayed themes of physical threat/harm from the volcano erupting or protection/saving others from the destruction it would cause.

**Rescue, Fight or Escape.**

The second most picked card was the butter knife, and would also include themes of physical threat/harm or protection/saving from a character holding a butter knife. These drawings
and stories often displayed violence, escape and combat. The main character of these stories would be threatened by another character introduced as a villain. This person or subject held the butter knife. The color red was frequently used to express violence and suggested negative emotional content. The scribbled linework suggested a chaos scene and a current lack of order. Sections of participant art that include the butter knife and a fight scene or rescue are shown in Figure 9.

*Figure 9 Three Butter Knife Images from Participant Art*

*Note. Sections taken from participant art. All artwork included a butter knife and displayed themes of physical threat/harm from a character holding the knife or protection/saving others from the destruction the character may cause. Participants often labeled*
their characters in their drawings with the word 'Me' to give self-identification in images. Red was commonly used to express violence, and can suggest negative emotional content. The scribble linework suggests a chaotic scene and a current lack of order.

**Materials Used at Home and in the Classroom**

The materials participants used to create their drawing in class and at home were pencils, markers, crayons, color pencils and white paper. These art mediums are common for classroom settings and also accessible in the home environment. It was up to the participant to decide what to use for creating their art.

The teacher reported that some of the students in class were provided with lined paper to help structure their story. This type of worksheet provided some students with more structure by having this narrative layout. It is unclear how many students had access to this worksheet for drawing their picture and writing their story.
Chapter 5: Discussion

Note by the Researcher

This study was done during the COVID-19 pandemic where restrictions were enforced in schools to prevent the spread of the disease. Restrictions included a limited capacity of students to be in class with some attending online. The study occurred in the second to last week of school before summer break. Students may have undergone significant changes to their learning environment due to the mandated masks and policies enforced. Teachers who volunteered their students to participate noted many students showed interest in the art therapy research but did not follow through on all required steps for unknown reasons. Thus, some participants who completed forms such as the demographic form or parent consent form yet did not complete the assent form for minors had to be excluded from the study.

The current study incorporated the Draw A Story (DAS) by Rawley Silver (1988) in an elementary classroom when assessing a student’s artwork and story for emotional content, self-image and use of humor. The scoring criteria of this type of art therapy tool relied heavily on quantitative scoring by a thorough coding system. Although projective tests can offer helpful information to the therapist, it is important to not make any conclusions about the participants based solely on their artwork or story. The researcher intends to integrate positive psychology for discussing results and future research in order to refrain from misinterpreting arts-based data taken from the participants (Betts, 2012).

It is important to also note that the researcher intends to refrain from making any assumptions or individual analyses of the artwork being assessed on all three topics. The scores presented in this research are average scores of all the artwork that was received. Scores were categorized into three categories: more positive, more negative, and neutral. The researcher
hoped to use these categories for estimating a general analysis of themes in the artwork and stories created in an elementary school classroom.

**Review of Hypothesis**

It was hypothesized that the participant's drawings after reading *Where Oliver Fits* (Atkinson, 2017) would lead to higher scores in the Draw A Story (DAS) assessment tool by Rawley Silver (1988). The artwork and stories would also express similar themes that are found in the children’s book.

The first hypothesis proved some accuracy as more than half of the participants scored between 4 and 5 in positively themed content on the Scale for Assessing Self-Image. Only 43% of the participants scored in having positively themed artwork in the Scale for Assessing Emotional Content. Lastly, only 36% of the participants' scores for the Scale for Assessing Use of Humor displayed more positivity. Thus, participants having higher scores in all three scales were not the majority. Although, these results trend towards confirming that a participant will identify with a subject in their drawing in a positive or assaultive (i.e., expressing power) way. This finding suggests that after reading a children’s book with a strong protagonist, a child may express themselves more assertively or optimistically.

The second hypothesis was not met as only 28% of the participant's themes in the artwork and story were ‘somewhat to very similar’ to themes in the children’s book. The reason for this low count could have been due to the additional element of the DAS cards. Although a reliable assessment on its own, it presented the students with additional stimuli where memory of the book's content could have been easily forgotten. In addition, it is unclear if the book prior to completing the DAS assessment influenced the higher scores in the DAS three scales. Both these potential reasons for the results are noted later in the limitation section.
Elements of Narrative Therapy and Bibliotherapy in the Classroom

Books are frequently read in the elementary classroom for building community, learning new skills and initiating classroom discussion. Art and creative writing are often integrated through homework activities, class lessons and school projects. The current study gave participants the opportunity to read a children's book and respond to it through art and creative writing. It inquired for the children's book to influence how the participant would write themselves into their own story after reading the book.

Most of the participant's narratives were unrelated to the children's book's themes. Only 28% of participants’ artwork and story were somewhat related to or strongly related to the themes presented in the book. This may indicate that second and third grade students prefer writing stories of their own and with freedom to express new topics. If a teacher or therapist were to inquire about a direct response from a children’s book, the prompt would need to be more clear and not include any additional stimuli. It would be important to allow the youth to express themselves freely in response to a book they read while keeping the task open-ended.

Two-thirds of the participants wrote their story in first-person, named their fictional character in the story with their own personal name or labeled their art with the word ‘Me’. This suggests that second and third grade level students have the capacity to write narratives that refer to ‘self’ and their own experiences. Giving students this opportunity to write themselves into their own original story can promote elements of narrative therapy. The main character can be a source of resilience and hope, and students can transfer their feelings onto the feelings of the character that they create. The actions and problem-solving solutions most participants wrote for their main character in the study can foster aspects of self-efficacy.
When assessing the artwork based on the Draw A Story (DAS) scale that investigated self-image, most participants expressed a character in their story and/or drawing that displayed some positivity and power (Silver, 1988). This character was often faced with a dilemma, problem or disaster in which they had a responsibility to respond. Some participants wrote about a character expressing a sense of hopelessness to a problem. Others made their character in their story find a resolution that suggested more hopefulness. This is in alignment with a child's social-emotional development and their sense of self-efficacy as described in the 'industry versus inferiority' stage presented by Erik Erikson (Cherry, 2020). These different perspectives in each of the stories showed that elementary students have the capacity to decipher which type of ending they want. It suggested that youths have a strong self-awareness to the many variables that contribute to making a story. In addition, it proposed that they are highly aware of a character expressing hope or lack thereof, due to a presenting problem. If a resolution was not clear in a participant's written story, the main character would take on a more passive approach. In this case, the character would ‘observe’ or ‘escape’ the issue with no written, illustrated or direct action being taken place.

The results presented above suggested that a narrative can be used for helping students learn to problem solve in real life. A key element in narrative therapy is a process known as externalization where the person "see's themselves as separate from problems" (Etchison & Kleist, 2000, p. 61). According to Etchison and Kleist, it is also "goal-directed" and can help "make experiences understandable" to a child (p. 61). The authors add that the theory sees personal issues resulting from social, environmental and cultural contexts.

Similar to the contexts in which the participants gave their fictional characters, students have the opportunity to respond to their own life events in this way. Another concept known as
theory of mind allows young children to decipher their own thoughts and beliefs from another’s thoughts and beliefs (Ruhl, 2020). Ruhl describes a child learning this skill by understanding that someone else's experience is separate from their own experience. The problems presented in these fictional narratives were either solved or avoided by the main character. This shows the child's theory of mind at work where they can observe the thoughts and actions of someone else (i.e., their made-up fictional character). An elementary student can approach problems in their own life through envisioning their problems resolved like a character they would write about. This potential for a fictional story to help a child write their own alternate story in life can bring about new and meaningful insights to faced challenges.

In addition, the words ‘Me’ and ‘Mine’ that were often used to label participant’s drawings can give therapists a deeper understanding of how a child might see themselves in the context of a narrative. This narrative can then be more specifically applied to the child’s own life in which their alternative story leads to more positive outcomes when faced with problems. The child can acquire a theory of mind when separating their own experiences from the experiences of their fictional characters.

**Children's Literature, Responding Through Art and the Therapeutic Benefits**

From the answers gathered in the demographic forms, participants in the study reported children's literature as having some benefit to their own emotional experience. These results are found by 10 participants reporting “I feel more happy” after reading a children’s book while six reported “I feel the same”. This means that 63% of the participants who completed these forms reported feeling differently after reading books and are most often influenced in a positive way. Although it is a small number of youth participants in total, this number points to children’s literature as a therapeutic method that should be considered with young clients. The 63% of
youth reporting it having a positive influence suggests that the content of a children’s book can have the potential for increased wellness. In addition, more than half of the participants also reported reading children's books frequently, which means this method would not be difficult to introduce to a youth client. All participants reported having some interest in reading children's books or making art. This suggests that combining both reading and responding through art can prove to be a preferred activity for youth clients.

The classroom setting presents students and teachers with the opportunity to expand on current efforts for reading books with therapeutic value (Mendel et al., 2016). Books covering topics on mental health and self-image can encourage more student discussion and personal application. Graphic Medicine International Collective explain how comics can be used to address topics in the medical field for helping readers learn more about different illnesses, life events, and medical procedures (2021). Using illustrations to relay information that might be hard to describe otherwise, is tremendously effective for young readers. Comics, such as those of Graphic Medicine, invite youths to talk about difficult topics with other youths and build community in this way. The platform of books becomes a far less intimidating way for presenting information to youths so they can read and digest the content on their own.

The Most Commonly Picked Cards: Volcano and Butter Knife

The 14 Draw A Story (DAS) stimulus cards include images of places, people, objects, and animals (Silver, 2001). The cards were placed side by side and in a random order when presented to the class. Out of all 14 cards, either the image of an erupting volcano or butter knife was picked most frequently by students. Eight out of the fourteen participants chose one of these cards to include in their artwork and story. Many stories with these images included a problem and a need for a solution (i.e., to save the world, defend oneself against a villain, or respond to a
disaster). Since cards were presented by the teacher to the class, it is highly plausible that participants chose cards based on what others were choosing. Since the seating arrangements in a classroom setting are generally close in proximity, it is possible that peers discussed which cards they would choose before beginning their artwork.

Both the volcano erupting, and butter knife are the only two images in the DAS deck of cards that suggested possible destruction and violence. The other twelve cards were neutral and less likely to suggest any form of destruction. In the school context, weapon use or violent behavior is not allowed, even if it is humorized. When assessing the use of humor, 28% of the artwork and stories suggested negative content in relationships and had dark humor. In these drawings, the relationships appeared more hostile and in danger, suggesting unfortunate outcomes and expressing fear, or a sense of hopelessness. Silver (1988) noted humor as a common defense mechanism for internalized depression or aggression. The suppression of innate desires or symptoms can sometimes lead to coping techniques that often include the expression of dark humor and violence.

Reliability and Validity of Numeric Scores

The Draw A Story assessment tool is a subset of Rawley Silver's Silver Drawing Test (SDT) (Silver, 2001). Silver recognized the use of standardized stimulus cards as helpful for continuing the use of the assessment by clinicians and therapists. It presented individuals with the same material, while also encouraging unique responses.

The student population for the DAS is rare but gives therapists an idea of the common themes in art that can be created in a school environment. The purpose of this study was to see if those themes would be more positive, negative, or neutral, and if the themes related to a children’s book. The method for facilitating the DAS is reliable due to each participant receiving
the assessment in the same way. The rating system for the DAS presents meaningful direction of themes presented in the artwork and stories, but risks an overall analysis due to a variety of responses (Betts, 2006). Instead of a simple ‘yes’ or ‘no’ of whether a construct is present or not in a drawing, the scale from least to greatest can cause a wide range of answers. While this test has proven its reliability as a subset assessment to Silver's SDT, the validity of the tool presents some concerns.

The results of this study are the first attempts to use the original prompt of Silver's DAS drawing task along with the researcher’s modified prompt. The modified portion prompted each participant to represent themselves in their original story through a character they can identify with. It provided the current research with a deeper understanding about self-image and how a child might portray their own image through a fictional story. The presenting results may have inconsistencies to that of the results from previous uses of the DAS where the prompt had not been modified or added to.

Another component that interferes with the validity of this research is the objectivity of the participants' artwork and stories. The art and story were assessed for positivity or negativity of content, or lack thereof by three master level art therapist students. Silver (1988) shares three main thought tendencies for those who are depressed including negative interpretation of experiences, low self-image, and a negative perspective for the future. She adds that these "cognitive patterns" can be expressed through fantasies that are hopeless or aggressive, often including explosions, violence and death (p.120).

While participants in the present research did include negative content and dark humor that was lethal or destructive, Betts (2012) warns those who use projective tests to refrain from misinterpreting due to subjectivity. She points out that test scores only represent "one source of
data" and thus, the individual should be encouraged to elaborate on their art to provide more context (p. 207). Due to the researcher’s inability to meet with each participant, it would be an inaccurate analysis to make any conclusions for why this negative content was included in the participants’ drawing and stories. The results from the study only present art therapists, clinicians, child psychologists and other students in the field with potential areas for continued research in the elementary classroom to reach any valid conclusions.

**Limitations**

The classroom setting created the potential for students to choose the same cards based on peer influence. Results in scores may have been different if each participant had completed the study outside the classroom, and away from other classmates. It is unclear how much peer or home influence took place whilst the teacher facilitated the DAS in the classroom and virtually.

Since teachers were also the primary facilitators for the study, the researcher had little control of how the Draw Story (DAS) instructions were given to students. While the teachers were supplied with step-by-step directions for administering the study’s activities, it is unclear to which order these steps were made. The disconnection between the researcher and teacher as each relied solely on digital communication made the transferring of material more difficult. For example, a teacher would inform the research only after the activities had been administered, that some participants finished their artwork and story the second day of class. This extended gap in time for completing the artwork and story could have altered the validity of the scores.

The seating arrangements and access to material for drawing and writing each story also varied. These outside variables were up to the discretion of the teacher or caregiver in the home when administering the test. While the study allowed a full range of art mediums, the worksheet
in-class that provided a narrative layout could have proven to be tremendously helpful to participants who needed more structure to write a story.

The portion for assessing participant's artwork and story in relation to *Where Oliver Fits* (Atkinson, 2017) relied heavily on the book's themes. The researcher chose these themes and then presented them to the other raters before scoring the art. Therefore, the themes when comparing the book to the participant’s artwork and story depended on the researcher’s own judgment. Since the other two raters had not read this book before scoring and had only been informed of these listed themes, it presented a possibility for scores of the book's similarities to the participant’s art to be more biased towards the researcher.

The participants attending school online versus from home, may have had external factors affecting their art process and story. These variables may have included additional distractions from doing the task, extended time to draw or write and pressures or interferences from other family members.

Of the eighteen participants, four students completed all necessary consent forms but did not submit any artwork or written material. The reasons for submitting no artwork could have been because of the study occurring during the second to last week of school. As discussed earlier, since the scheduling of the study happened during a busy time for students and parents, the student or parent may have forgotten about submitting any work. The current study could have interfered with other class assignments that were due at this time. Parents may have been less likely to submit artwork even if the student had completed it.

Lastly, the current economic and environmental stressors felt by COVID-19 have made the results highly dependent on the unique context and experience of the participant. The limited capacity of students in the elementary classrooms, the students attending class online, the
enforcement of masks, and the increased responsibilities of the teachers all influence the results of the study. These interchanging contexts for participants and teachers made it difficult to conduct a controlled study in which every participant was completing tasks in a controlled environment.

**Applications for Educational Settings**

Elementary students frequently make art in the classroom. The current research gives teachers, educators, administrators, school policy makers and even curricula publishing houses direction for integrating art and creative writing into the classroom. Specifically, doing so while being aware of the negative and positive themes that come through in the art and story. While educators are not clinicians and cannot assess the art, it is suggested that teachers become more aware of how a student might express their inner experiences creatively.

The study proposes the idea that making art and writing stories in elementary settings, in response to reading a children’s book, can help students further internalize the content that they read. It suggests the use of children's literature as a resource in classrooms for emotional social development and to build connection with other classmates. By responding to children's books through making art and writing a story, students can adopt a more positive self-image through representing themselves in the form of their own character. When applying the lens of narrative therapy and bibliotherapy to a school classroom, this integration of both a book and responding can help students apply what they learn. A character that problem solves, learns to think positively, and feels empowered, has the potential to translate to the child’s own life experiences. Teachers can now facilitate deeper discussions with their students about tough topics (i.e., bullying, illnesses, anxiety, low self-image) that would otherwise be not discussed in a classroom setting. Students can also compare artwork and stories to acknowledge their own differences in
responding to a variety of make-believe problems and events. This relatedness to one another within a classroom can promote a strong student community while building socioemotional strengths.

One way to expand on reading children's books in the education setting is by encouraging students to draw directly in response to a book or section of a book. This immediate follow up allows for students to respond with initial thoughts about the book's content. As discovered in the study, the additional stimuli or assessment may distract students from reflecting on the actual content of the book. Contrary to the present study, this prompt for making art immediately after reading a children’s book would exclude stimulus cards but rather focus on responding to the themes in the book more directly. Book fairs and book drives that occur school-wide can be followed up with art and creative writing workshops for students to help further their application of a book. Not only is this additional application to reading encouraged for students and teachers but for parents in the home environment when reading books with their family. Parents and primary caregivers can respond to books that are read in the home through art and writing with whatever supplies are available to them.

Following the closure of the study, one of the teachers who had volunteered their class for this research reread *Where Oliver Fits* (Atkinson, 2017) to their second and third graders. The teacher chose to do this for the second time at the start of a new school year. Some of the third graders had participated in the study during the year prior, as second graders. These students were already familiar with the book’s content and character.

This teacher reported "liking the book and character so much in the study" that she wanted to have her new students do a collaborative poster activity with it in the new school year (I. Urban, personal communication, November 20, 2021). The teacher repeated the activity with
her class by reading *Where Oliver Fits*, cutting out blank puzzle piece-sized paper, and instructing students to decorate their individual pieces. They were told to represent themselves on the puzzle piece in the context of their new class community (See Figure 10). Students were encouraged to decorate their pieces with whatever preferred art mediums. Each student located where their piece sat in relation to other classmates after each piece was glued together.

The integration of an art activity allowed for a deeper and more focused discussion of the book’s story and main character. Each student was presented with the opportunity to express themselves through a puzzle piece by sharing ‘a piece of themselves’ in the form of a drawing. For second to third graders, relating to a fictional character can feel less intimidating when discussing topics having to do with self-image. The teacher stated the poster activity created a culture of love, acceptance and belonging for the students. They reflected on the finished puzzle piece by writing feelings and responses onto post-it notes. It was perceived that the inclusion of the book and follow up art activity helped promote individuality and a more positive self-image in students.

This in-class art activity that was inspired from reading *Where Oliver Fits* (Atkinson, 2017) was not part of the study but was included to support the hypotheses that a children’s book can offer therapeutic benefits to young readers. It revealed the power of a story in a classroom setting where students can relate to a book’s content and main character through making art. The teacher additionally encouraged students to respond to the book by writing post-it notes about their experience underneath their finished poster. The impact of a single book on students and educators long-term suggests a need for more art therapists and educator partnerships.
Note. Example of how a teacher expanded on the lessons learned in the children's book, *Where Oliver Fits* (Atkinson, 2017) with their second and third grade classroom. After reading the book for the second time in their class, students were instructed to draw their own puzzle pieces and respond to this collective class project by writing initial thoughts on post-it notes.

**Clinical Recommendations**

The Draw A Story (DAS) assessment tool by Rawley Silver (1988) has been used by art therapists, narrative therapists, child psychologists and other clinicians in diverse areas around the globe. It has helped clinicians find insight to the current mood, affect and cognition of a child or adolescent through the assessment and explanation of their art and stories.

The current study invites clinicians and students in art therapy to use storytelling as a method of understanding more about a young client. It suggests the potential for a story to
uncover aggression and depressive-like behavior in young clients as well as reveal defense mechanisms using dark humor. The use of children's books in a clinical setting can introduce bibliotherapy in treatment planning and to be applied to elementary-aged clients. It is encouraged for clinicians and students in the art therapy field to expand the use of children's literature in their own practices to offer more therapeutic benefits.

As exemplified in the study, making art and writing after reading a children’s book can encourage a child to express themselves through hopeful and humorous stories. Additionally, when a child is asked to write themselves into a story as the main character, it gives the clinician an opportunity to see how the client may solve a problem. The activities allow clinicians to discuss with a youth why they wrote a story with more positive or negative themes. For therapeutic contexts, it is recommended that clients use a narrative layout for assistance in writing their own story as some of the participants did. A worksheet allows for more structure in writing, and could potentially alleviate stressors related to coming up with a story layout on the client’s own. The same recommendation is for writing stories in an educational environment. The worksheet can provide a student with more containment when expressing their personal thoughts and feelings in response to a book.

**Implications**

The current research presents new methods for looking at self-image in elementary-age students and clients. It implies the use of children's literature in therapy and school settings to provide direction for how children view themselves in their own social contexts. Therapy modalities such as art therapy and narrative therapy can be expanded on by utilizing the Draw A Story (DAS) assessment tool. The tool can be used in clinical settings to assess children for depressive-like behavior, aggression, and expression of dark fantasies (Silver, 1988). The
additional prompt created by the researcher to ‘see oneself as the main character in their story’ suggests creative writing and character development as a method for addressing self-image. Writing about a main character who problem solves and thinks optimistically can provide clinicians with a new therapeutic strategy to address self-image in youth.

The study also recommends that children engage in 'response art' immediately after reading a children's story. This should be done with no additional stimuli. The invitation to directly respond to a book allows a child to put imagery and words to their experiences through storytelling. More children's books discussing emotional social topics should be integrated into the elementary setting for this application to be meaningful. Responding to a book in the form of art and writing can promote further classroom discussion as well as provide teachers and clinicians a deeper understanding of a youth's experiences. The current research advises the integration of art therapy, narrative therapy and bibliotherapy for assessing self-image in elementary-aged clients.

**Future Research**

Replication studies should occur in a controlled environment where students can complete the tasks on their own. They should be given in-person guidance from a researcher or trained member of a data collection team. There would be less potential for peer influence to alter the way in which a student picks their two cards. An additional replication of the art and story response methods could be facilitated in a group classroom setting and include simple instructions without any stimulus cards. Elementary students could respond to a children's book by making art and reflecting on it with their classmates. Future research should focus on how teachers can better apply art and writing activities in their classroom to reach maximum therapeutic benefit. Art therapists can serve as partners in developing literature and classroom
activities that bring therapeutic benefit to young readers. Furthermore, these professionals can serve as an important role in the decisions of which books are read in school settings. Art therapists can be key collaborators with educators, librarians and publishing houses for ensuring the content of a book meets therapeutic value. When a school has an annual or semi-annual book fair, an art therapist can be onsite to help cultivate the therapeutic space for meaningful application. This could be achieved by introducing creative writing and artmaking workshops to schools that invite students to respond to books with deep thought and activity. For example, a student who leaves a book fair with a newly purchased or checked-out book can explore the book's content and greater message through creative expression. The time given to apply the content of a book can be during class time or afterschool.

In closing, new and classic children’s literature has the potential to impact young readers for years to come. It is critical that publishing houses and educational settings are aware of these products for bettering student wellness. The content in books should address topics in mental health for children. The introduction of therapeutic books in schools must be incorporated with an incentive to address self-image in children. Since a child’s sense of self is crafted early on, the content of a children’s book should adhere to the development of creating a positive self-image in young readers.
References


Clay, Jennifer. (2021). *Psychosocial (Erikson) handout* [Class handout]. Notre Dame de Namur University, GPY 4205.


Lea, B. (2015). Children’s books about special needs used as a mediating tool, the perceptions of inclusion classroom teachers in mainstream schools. *Higher Education Studies, 5*(1). doi:10.5539/hes.v5n1p51


Partridge, E. (2020). Lecture 2: Domestic Violence: Assessment & Treatment [PowerPoint slides]. Notre Dame De Namur University Masters in Art Therapy:

https://ndnumoodle.remote-learner.net


https://doi.org/10.1111/jpc.13023


Silver, R. (2003). Cultural differences and similarities in responses to the silver drawing test in the USA, Brazil, Russia, Estonia, Thailand, and Australia. *Art Therapy, 20*:1, 16-20, DOI:10.1080/07421656.2003.10129638


Appendix A: Informed Parental Consent
Informed Consent to Participate in a Research Study (for Parents)

Notre Dame de Namur University
1500 Ralston Avenue
Belmont, CA 94002

Project Title: Applying Children’s Literature Through Art: Using a Picture Book to Address Self-image in Middle Childhood [Working]

Student Investigator: Janae L. Dueck, Marriage and Family Therapy, Art Therapy, graduate student at Notre Dame de Namur University

Contact Information for Student Investigator: Removed for privacy

Principal Investigator and Supervisor of Student’s Research Project: NDNU Art Therapy Psychology, Dr. Erin Partridge, Ph.D., ATR-BC

• Purpose and Background

The purpose of the research study is to explore how responding to reading a children’s book through art can evoke similar themes in the drawing from the book. The researcher seeks to understand if a child will apply what they read in a storybook through making art, and if the art will convey characteristics of the child. The types of books the researcher is referring to in this research are books with a strong protagonist displaying positive character qualities (e.g. The character has high self-confidence and a strong self-esteem). The researcher will compare the art to the themes in the book chosen for this study, and assess the self-image or characteristics of the child through a modified version of the Draw A Story (DAS) art therapy tool. She hopes to combine the topics of self-image, artmaking, and children’s literature in this Thesis, while also expanding new topics in the field of art therapy.

The research will be conducted by Janae L. Dueck, a graduate student at Notre Dame de Namur University, under the supervision of Dr. Erin Partridge, Ph.D., ATR-BC, Associate Professor of Art Therapy Psychology at Notre Dame de Namur University.

B. Procedures

In voluntarily consenting to my child's participation in this research study, I understand the following:

1. I, as my child’s guardian/caretaker, will be asked to oversee that the following documents (e.g. Parental Consent Form, Assent Form for Minor, and Demographic Form)
required for my child’s participation in the study will be submitted to the teacher’s Google Classroom before forgoing any research activities.

2. I understand that my child will be required to complete a brief demographic questionnaire (of which I, the guardian/caretaker, can assist my child to complete) will include name, gender/age, questions such as how often my child reads children’s books, their preferences for children’s books, their comfortability for doing art, and how reading a book makes them feel. I understand this information will be used for research purposes only and that my child’s answers/name will remain anonymous.

3. All the documents listed above will only be shared by the teacher with the researcher for Thesis purposes only. The paperwork will be kept on file throughout the Thesis completion.

4. My child will be asked to listen to a reading of the published children’s book, Where Oliver Fits by Cale Atkinson, during regular school hours either on campus or over Zoom (e.g. Virtual instruction).

5. My child will be asked to complete one drawing and write a story using their choice of specific images, and art materials after reading the book.

6. I, as my child’s guardian/caregiver, will be asked to submit a picture of my child’s artwork and story after it is completed onto Google Classroom.

7. The picture of my child’s artwork may be reproduced for use in a research thesis and for possible presentation and/or publication. No identifying information will be on my child’s artwork, and my child will remain completely anonymous if the artwork is included in the Thesis and/or thereafter the study. Should this study be published or presented, only pooled analyses will be documented.

8. The photographic image of the artwork will remain the property of the researcher.

9. The photographic image of the artwork and story will be scored based on a modified version of the Draw A Story (DAS) art therapy assessment tool created by Rawley Silvers (1988). The DAS assesses for self-image, use of humor, and emotional content in drawings and stories written by a person.

10. The photographic image of the artwork will be scored by the researcher, and other art therapist graduate-level students at Notre Dame De Namur University (NDNU).

11. All research information will be kept by the researcher for three years (seven years if published) and used only for research purposes. Unless published, all artwork and testing information will be destroyed after the three-year period.

C. Risks

There are few risks involved in participating in this study. In working with any art materials at home, it is possible to feel discomfort or unfamiliarity with art mediums. However, this study is designed to allow participants to choose the art materials in their own home, and they may withdraw from that portion of the study at any time with no consequence to them. The researcher will be available to help parents process any discomfort that may arise and answer any questions from the parents on behalf of their kid. Her contact can be found at the bottom of this form.

Since the participants will be given instructions from their teacher online, the study has a potential to undergo technology malfunctions when done in class. If this should happen during the study, the parent is advised to troubleshooting the device to help reboot the technology. The
parent may also try logging on/off Wi-Fi to ensure it is strongly connected. Lastly, the parent can contact the teacher for help and to reschedule time to do the 1-hour study. The parent may also reach out to the researcher for any unanswered questions.

The book chosen for the study, *Where Oliver Fits* by Cale Atkinson, addresses themes of self-confidence, and depicts the highs and lows of learning to be yourself. This topic could potentially illicit unwanted feelings in the child when listening to the story. The researcher will provide the parent with a Debriefing form that will include age-appropriate resources for the parent to refer to if these emotions arise.

The researcher’s modified version of the Draw A Story (DAS) art activity presents the child with fourteen originally made stimulus cards of people, places, objects and animals. One of these images is an outline of a butter knife. The child will be instructed to pick two of these cards, imagine something happening between the two pictures, and then draw a picture of what they’ve imagined with them somewhere in the picture. The two cards picked, as well as including the child in the drawing, can have the potential to illicit unwanted feelings when drawing. Again, the researcher will provide the parent with a Debriefing form that will include age-appropriate resources for the parent to refer to if these emotions arise.

**D. Benefits**

The possible benefits of participating in this study are listed below:

1. My child may learn how to draw based on their own preference of art materials.
2. My child may find it fun and relaxing to work with art materials in the home.
3. My child may feel excited about working on artwork during the school day.
4. My child may feel more connected to classmates knowing that they're able to participate in the same study.
6. My child may experience a sense of accomplishment upon completion of the artwork after reading the book.
7. My child may experience a sense of accomplishment upon writing a story about their artwork and then giving their story a title.
8. My child may learn something about their artistic preferences, storytelling abilities, and creativity.
9. My child may experience a sense of fulfillment from contributing to art therapy research.

**E. Confidentiality**

The records from this study will be kept confidential. **No individuals** will be identified in any reports or publications resulting from the study. All artwork, tests, questionnaires, and transcribed material will be coded with a number that matches the corresponding consent and permission to use artwork forms. All forms and number key will be stored separately from all artworks, test, questionnaires, and transcribed material and will be accessible to the primary researcher and student researcher only, and stored in a private folder on a Google Drive and separate hard drive. All research information will be kept by the researcher for three years (seven
years if published) and used only for research purposes. Unless published, all artwork and testing information will be destroyed after the three-year period.

F. Alternatives

My child is free to decline to participate in this research study. If they choose to decline, the teacher will give the student an alternative school-based activity during the hour of class.

G. Costs

There will be no costs to me or my child as a result of participating in this research study.

H. Compensation

There will be no monetary compensation for my child's participation in this research study.

I. Questions

Any questions about my child's participation in this study will be answered by Janae L. Dueck, emailing her. Any specific questions or concerns about this study will include the supervision and advice by the supervisor of Janae’s research project and NDNU’s Art Therapy Psychology professor, Dr. Erin Partridge, Ph.D., ATR-BC. Dr. Partridge will also be available to answer any questions regarding Janae’s qualifications as a master’s level graduate student. She may be reached by phone or email (contact information removed for privacy).

PARTICIPATION IN THIS RESEARCH STUDY IS VOLUNTARY. My consent is given voluntarily without being coerced. My child may refuse to participate in this study or in any part of this study. I understand that my child may withdraw at any time, without penalty from teachers, administration, or Janae L. Dueck, nor any prejudice to my child's future contact with Notre Dame de Namur University.

Print Name ___________________________ Date ____________________
Research Participant

Signature ___________________________ Date ____________________
Parent/Guardian Signature

Signature ___________________________ Date ____________________
Student Investigator
Appendix B: Permission to Conduct Study
Permission to Conduct Study

February 26, 2021

RE: Permission to Conduct Research Study Dear Admin,

I am writing you to request permission to conduct a research study at your school campus. I am currently enrolled in the Master of Arts in Marriage and Family Therapy, Art Therapy, program at Notre Dame de Namur University in Belmont, CA, and am in process of writing my Master’s Thesis. My study is entitled, “Applying Children’s Literature Through Response Art: Assessment of Self-Image Through the Draw A Story (DAS) Art Therapy Tool” [Working Title].

I hope that the school administration will allow me to recruit second and third grade teachers to conduct a study with their students. The study is designed for students ages seven to nine years old. The educators and students will remain anonymous during the study and thereafter when results are discussed. Due to the ages of the students, I hope to recruit their guardian and/or caregivers who will volunteer to have their child participate. Before the class activity, each parent must give the teacher a completed Parent Consent Form (copy enclosed) and a brief demographic form filled out on behalf of the child. These two forms must be collected by the researcher on a Google Drive folder before the class does the activity. Additionally, an age-appropriate Assent Form will be sent to each parent for them to read to the child relaying the purposes of the study.
The study will include a 1 hour in-class art activity known as the Draw A Story assessment tool (copy of instructions enclosed), and a reading of the age-appropriate children's book "Where Oliver Fits" by Cale Atkinson (summary of book enclosed). It will require the teacher to collect each student’s artwork on Google Classroom after doing the activity, and then share this artwork with the researcher in a separate and private Google Drive folder.

If approval is granted, student participants will follow directions given by their teacher to read the book and do art during an hour of class. The teacher will take photos of the student's artwork at the end of the hour, or collect the artwork by the student submitting a picture of it onto Google Classroom (similar to submitting a homework assignment). The pictures of the student's drawings will be kept confidential, and all results or themes from the artwork will remain completely anonymous when writing the Thesis. The scoring will be based on the three DAS assessment scales (e.g. Self-Image, Use of Humor, and Emotional Content) and scored by the researcher, other art therapist grad students, and/or ATR-BC professionals. Should this study be published or presented, only pooled analyses will be documented. No costs will be incurred by either your school or the individual participants.

Your approval to conduct this study will be greatly appreciated. It will require the researcher to be in touch with the teachers whom are willing to participate. I will follow up with a telephone call and would be happy to answer any questions or concerns you may have at this time. You may contact me at or at my telephone:

If you agree, kindly sign below and return the signed form to the email above. Alternatively, kindly submit a signed letter of permission on your institution’s letterhead acknowledging your consent and permission for me to conduct this study with educators and students at your school.

Sincerely yours,

Janae L. Dueck (Current NDNU Graduate Student)

Cc: 

Approved by:

(Dr. Erin Partridge, PhD, ATR-BC, Supervisor of Student’s Research Project)
Appendix C: Assent Form for Minor
Hi there! My name is Janae. I am so happy to hear you’re interested in my study. I am studying children’s books, and how they can make people feel. I am curious what people can learn from children’s books, and how art can help them learn better. Here’s what I’m doing:

Students in my study will be asked to watch a video with their schoolteacher and class, of the children’s book *Where Oliver Fits* by Cale Atkinson. After reading this book, students will draw a picture, and write a story. Before drawing, the teacher will show students pictures to choose from, and the student will be asked to pick two. They will draw a picture using these two pictures they chose. At the end of the class time, students can give their picture a title. It should all take only an hour to do. Students will then give me what they drew and wrote!

This hour in class may feel short, so it is okay to finish the picture outside of class. Students can use whatever supplies they have with them to draw and write. This can be paper, a pencil, pens, crayons, markers, color pencils, or highlighters.

The student’s picture and story will be shared with some of my other classmates, too. I will not include your name on the artwork or the story. Your name will be kept hidden!

My classmates and I will look at your drawing and will read your story on our own. We will mark things we notice in the picture, and will talk about the story’s main idea. No one will know who did the drawing or wrote the story except for your teacher, and me. I will only know your name because I have never met you before!

Students in my study may find out they like to draw after doing these pictures. They may also find out that they like to write stories! Being in my study may make them feel excited.
At the end, I will write a report telling others what my classmates and I learned from all the drawings. This report may show some of the drawings, but it will not include any names, or say who did them.

Not all students have to be in my study if they don’t want to be. Telling your teacher or parent that you don’t want to be part of a study is very important!

Parents and teachers also know about this study, and want students to make their own choice for doing it or not.

If you want to ask me any questions, you can email me at janaedueck@sbcglobal.net. I’d love to answer them!

…

If you’ve decided you want to be part of my study, please sign your name below:

I, ________________________________, want to be part of this study.

(Write your name here)

______________________________  (Sign your name here)

(Date)

Parent/Guardian Signature ______________________________  Date __________________________
Appendix D: Demographic Form for Student
Directions for the parent: Please have your child read each question below, and answer each question as best as they can. You may assist your child if need be.

Name You Use: _______________________________

Your age:_____________

Gender: ________________________________ Prefer not to answer: ________

Do you like to read children’s books? (Circle one)

Yes! Kind of No

How often do you read children’s books? (Circle one)

A lot! Not much Never

Do you like to do art?

Yes! Kind of No

On a scale from 1-5, rate how you feel after reading a children’s book (Circle the number):

1 2 3 4 5
(I feel less happy) (I feel the same) (I feel more happy)
Appendix E: Debriefing Form For Student and Parent(s)
Project Title: Applying Children’s Literature Through Art: Using a Picture Book to Address Self-image in Middle Childhood [Working]

Student Investigator: Janae L. Dueck

Thank you for your participating in my research project! The purpose of this research project was to observe how a children’s book like Where Oliver Fits by Cale Atkinson can influence a child in their drawings and stories. This study was also designed to increase a child’s self-image to be more positive, and for the child to learn from the main character in the book. Your child’s participation was a valuable contribution to the field of art therapy and to the study of children’s literature having a positive effect on younger readers.

Following the completion of your involvement in the study, I, as the student investigator, will be available to answer any questions concerning your child’s involvement in the research project, and can be reached by email: janaedueck@sbcglobal.net. Dr. Erin Partridge, my research supervisor, will also be available to answer any questions regarding my qualifications as a master’s level graduate student. Dr. Erin Partridge may be reached by phone or by email.

For extended resources, Janae would like to recommend these must-have children’s books to learn more about social-emotional skills:

- Little Leaders: Bold Women in Black History by Vashti Harrison
- We Are Water Protectors by Carole Lindstrom, Illustrated by Michaela Goade
- Ruby Finds a Worry by Tom Percival
- Stand Tall, Molly Lou Melon by Patty Lovell, illustrated by David Catrow
- The Feelings Book by Todd Parr
- When Sadness Comes to Call by Eva Eland
- When I Feel Angry by Cornelia Spelman
- The Rabbit Listened by Cori Doerrfeld
- Have You Filled a Bucket Today? by Carol McCloud, Illustrated by David Messing
- The Happy Field by Bethany Clemons, Illustrated by Janae Dueck
- Sitting with My Lions by Janae Dueck

If your child has any unresolved feelings from this research that cannot be answered by Janae Dueck or Dr. Erin Partridge, Telehealth and in-person options for mental health services are provided at the following locations.
San Jose Area:
Family Therapy Center of Silicon Valley
(408) 560-0065
information@ftcsv.com

Child & Family Counseling Group, Inc.
(408) 351-1044
info@childfamilygroup.com

Los Gatos Area:

TherapyWorks: Changing Lives
(408) 508-6789
hello@mytherapyworks.com

In case of an emergency, please call 9-1-1 or contact these local emergency services at:

- National Alliance for Mental Illness (NAMI) at website: https://nami.org/home\n- National Suicide Prevention Lifeline at website: https://suicidepreventionlifeline.org/ Helpline, 1-800-273-TALK (8255)
- Substance Abuse and Mental Health (SAMHSA) at website: https://www.samhsa.gov/National Helpline, 1-800-662-HELP (4357)
- Helplines by Region at website: https://helplines.org/helplines/?fwp_topics=mental-health
Appendix F: Recruitment Flyer
DO YOU WANT TO BE IN A RESEARCH STUDY FOR ART THERAPY?

What will I do?
First, listen to a reading of a children's book.
Second, draw a picture and write a story about it!

What art supplies do I get to use?

Crayons, markers, color pencils,
highlighters, or paints
8 1/2 x 11 inch white printer paper
Pencil or a pen

What's the name of the book I'll listen to?
"Where Oliver Fits" by Cale Atkinson

How long will I have to draw, and where will I do it?
50 minutes in class with your teacher.

Where will this study go?
It will be used for research and to learn more about how children's books can make people feel.
Appendix G: Activity Instructions For Teacher
Instructions for Teachers

History of DAS:
The study will incorporate a modified version of the art therapy assessment tool Draw A Story (DAS) created by Rawley Silver, Ed.D., ATR-BC, HLM, in 1988. This art therapy tool measures self-image, emotional content, and use of humor in the artist’s drawings, and the prompt has been modified when working with different populations (Silver, 1988). According to Silver, the DAS is used by clinicians to assess self-image and aggressive behavior in children and adolescents as well as to provide therapy through storytelling. Through the use of fourteen stimulus cards, different metaphors between drawn subjects can evoke personal experiences and can give insight to the child’s current state. The art will be followed by an explanation from the child to ensure greater accuracy of assessment (Betts, 2006).

Context and Hypothesis:
The participants in this study will do a modified version of the DAS after reading a children’s book, Where Oliver Fits by Cale Atkinson. The researcher hypothesizes that the participant’s drawings after reading this book will have higher scores indicating more positivity, and will express similar themes from the book.

DAS Instructions:
While showing the 14 stimulus cards to the students, read the following:

“Look over the pictures you see, and choose two. Imagine something happening between the two pictures, and then draw a picture of your own of what you’ve imagined. Make your picture tell a story and draw yourself in it as the main character. Are you similar to the main character that was in the book? Are you different? When you finish drawing, write a story about what is happening in your drawing. Give your story a title.”

Total class time for drawing/writing: 50 minutes

Supplies
- 14 Stimulus cards
- Coloring utensils (e.g. Crayons, color pencils, markers, highlighters, paints, pencil/pen)
- 8 1/2 x 11-inch white printer paper

(A) Instructions for each teacher:

- Ensure all parental consent forms, assent forms, and demographic forms have been collected by each student in the class.
- Once collected, receive the study materials from the researcher.
- Schedule a day/time to do the 1 hour study.

(B) Instructions for each teacher:

- Watch a 4:45 minute vid of the reading of *Where Oliver Fits* by Cale Atkinson with the class.
- Make sure each student has a piece of paper, a pencil or pen, and coloring utensils.
- Give the students the Draw A Story (DAS) prompt provided by the researcher.
- Allow 50 minutes for the students to draw in class, and come up with their own stories.
- Ensure the student’s parents know how to upload the images of the artwork and stories through the teacher’s Google Classroom.

(C) Instructions for each teacher:

- Share the confidential folder(s) on Google Classroom consisting of each student’s artwork and story, parent consent form, assent form, and demographic form with the researcher.
- Destroy all research-related material once the researcher confirms she has received these documents.
Appendix H: Scoring Procedures for Raters
Draw A Story Scales

The criteria laid out by Rawley Silver for rating these three constructs (e.g., self-image, emotional content, use of humor) will be shared with the raters on the day of scoring. Each of Silver’s scales are on a 1–5-point rating system, 1 meaning more negative and 5 meaning more positive.

**AN EXAMPLE SCORING SHEET FOR PARTICIPANT:**

Participant’s Number: ______

*Three Scores per drawing. Write the score of the participant’s drawing (including a careful examination of their written story and title) based on the DAS scales.*

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-image</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional Content</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use of Humor</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Fourth Component**

*Similarities in Participant’s Drawing/Story/Title to Themes Found in the Book (Circle one)*

<table>
<thead>
<tr>
<th>Very Similar Themes</th>
<th>Somewhat Similar Themes</th>
<th>Neutral</th>
<th>Not Similar At All</th>
</tr>
</thead>
</table>

**Themes in the Children’s Book Include:**

- Being Unique/Different
- Self-care/Self-love
- High self-esteem
- Positive self-image
- Confidence/Belonging
- Finding Your Own Voice
- Community/Friendship
Appendix I - Video Recording of Book
Video Recording of Book

Here is a 4 minutes and 45 seconds video recording of *Where Oliver Fits* by Cale Atkinson. It is a public video created by YouTube account, Lauren Aversa. Only the reader’s voice is heard with no face appearances.

Video instructions for the teacher: “Please play the video, full-screen and with subtitles, on your work computer. Make sure your students can hear the audio of the video and can see these subtitles. If your Wi-Fi causes the video to lag during the screening, you can rewind the video or pause the video to help with this lag.”

Notes:
- The video will have subtitles to address any hearing implications of the students.
- For virtual classrooms, the video is intended to be watched through a “share-screen” mode played from the teacher’s work on the computer. Thus, the student will view the recording via the teacher’s screen.

*Click image below to be directed to the YouTube video.*

**Source**

https://www.youtube.com/watch?v=7ueidcaf_A
Appendix J- Book Summary and Reviews
About Cale Atkinson

Cale is an illustrator/writer/animator currently residing in Kelowna, Canada. He was informed about the study and quoted back upon hearing about it from the researcher, “I am honored you chose Where Oliver Fits to focus your school thesis, and this super fascinating study (C. Atkinson, personal communication, April 3, 2021).”

About book

Published September 5th, 2017, by Tundra Books; Theme of book is “Self-image” and “Self-esteem”; 40 pages; All color illustrations

Summary

"Oliver has always dreamed about where he will fit. Will he be in the mane of a unicorn? The tentacle of a pirate squid? The helmet of an astronaut? When he finally goes in search of his perfect place, he finds that trying to fit in is a lot harder than he thought. But like any puzzle, a little trial and error leads to a solution, and Oliver figures out exactly where he belongs.

Where Oliver Fits is a sweet and funny story that explores all the highs and lows of learning to be yourself and shows that fitting in isn't always the best fit" (Goodreads, 2021).

Book Reviews

4.33/5
552 ratings; 123 reviews

Source

Appendix K - Contingency Plan
Current and Alternative Plans

Plan #1 - Current

The current plan for this study is for the participants (i.e., Second and third grade students) to engage in the class-led study activities through online instruction or in-person with limited capacity and with the teacher. Due to COVID-19 precautions that begun Spring of 2020, this study will involve school regulations during their Spring 2021 semester in which their students are attending classes both online and in-person. The school system terms this process as a “hybrid” experience for students. The research will still identify all students who participate in the study as “one group” and will not differentiate the students who are receiving instruction online as “another group” in the research. To account for these differences in group settings, the researcher will acknowledge all external factors that may affect the results of assessing the artwork and stories of the students. She will acknowledge these limitations in her Thesis’s discussion portion.

Plan #2 - Alternative

If COVID-19 spikes during the end of the Spring 2021 school semester when this study would take place, the study will transition to being fully online and instructions will be given by the teacher in the same virtual format. No part of the study should be altered other than all participants having to engage in the class-led study activities from their home.
Appendix L: Permission to Use Draw A Story
Reference for the Draw a Story assessment tool, materials, stimulus cards, and protocols:


https://doi.org/10.4324/9780203942178

Referenced below was included on all Draw A Story-related study material per agreement between the researcher and Taylor & Francis Group LLC before beginning the research:


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**Researcher’s explanation for use of assessment**

The current study will be referencing an assessment created by Rawley Silver in 1988. Silver has now passed, but her legacy lives on. Her original assessment and protocols for the Draw a Story is a sub-test to The Silver Drawing Test. It is published and copyrighted by Routledge-Taylor & Francis Group in the book, *The Silver Drawing and Draw a Story: Assessing Depression, Aggression, and Cognitive Skills (1st Edition)*. There is only one edition of this assessment since its publication. The assessment referenced in this Thesis will include the book’s provided DAS instruction and prompt, 14 stimulus cards (Form A), and three scales: Scale for Assessing Self-Image, Scale for Assessing Emotional Content, and Scale for Assessing Use of Humor. As noted in the thesis proposal and requested for permission from Taylor &
Francis Group LLC, the researcher intends to use a modified version of the DAS prompt altering the verbiage, so it is more geared towards her participants and the context of this research. She will use Form A with her participants but will only reference the cards in her Thesis and provide no actual photos of the form or any other DAS test material. The researcher will also use scales for scoring the drawings but will not include any actual images from the book of these scales in the Thesis publication. No copies of the Thesis will be made for marketing purposes.