Social and Emotional Wellbeing of Children: Facilitating Role of Bibliotherapy

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Abstract: *The very concept of social and emotional wellbeing needs to be understood in the realm of resilience and the scaffolding being provided to children during adverse situations. The relevance of nurture and the benefits it reaps for children has been proven beyond doubt. The aim of the paper is to explore the active role of resilience building for providing social and emotional wellbeing through storytelling. Along with this how the nurturer can provide the scaffold during the developing years of the child's life. Based on my research study with ADHD children and other learning disabilities I wish to critically examine and focus on the skills which play a positive role in furthering the child's social and emotional skills. These building blocks can be incorporated in the day to day activities by the nurtures, so as to enhance a child's skills at various crucial junctures during their developing years like relationship building, conflict resolution, facing adversity and enhancing attention for cognitive and academic performance. The study has explored the role of bibliotherapy at length in promoting overall wellbeing and resilience in children. The researcher has developed some simple techniques in the form of a module for enhancing Social- Emotional skills during early years.*

Keywords: Resilience, Scaffolding, ADHD, Wellbeing, conflict resolution, Bibliotherapy

1. Introduction

"Our emotions need to be as educated as our intellect. It is important to know how to feel, how to respond, and how to let life in so that it can touch you."(Rohn, 2015).

The entire gamut of education system is geared towards academic achievement. This emphasis recognizes cognitive and scholastic achievements as the essential skills being imparted by the institutions. It is deemed essential that children grow up as adults with rounded personality who can take up life's challenges and adversities, and sail through them in a positive manner.

The researches in the field are in agreement on certain crucial aspects of the child's social fabric. A sense of wellbeing for the child is experienced in a safe and secure space. Home environment where the child feels loved and protected are the safest spaces for children. The child needs to be given ample opportunity to express feelings without any fear of ridicule.

Coping means how does an individual respond to a stressful situation and how it impacts the emotional and psychological wellbeing. Social competence is reflected in relation with peers. This skill plays a crucial role in resilience of at risk youth (Reeslund, p. 7). Access to social support systems, and positive self-appraisal of children have been found to act as buffers against stress associated with parental mental health issues, disharmony, separation and other adverse factors. This promotes emotional and psychological wellbeing.

2. Social Competence

The role of social competence and coping and the relation between the two potential resources of resilience and potential protection from psychopathology in children with depressive parents has been explored (Reeslund, 2010, December). The children with depressive parents are exposed to hostile, disengaged and inconsistent parenting (Reeslund, p. 4). Process of resilience involves coping and social competence which are the psycho-social resources of coping.

Social competence is the ability to achieve success in social and interpersonal relations (Chen, 2008) some descriptions of social competence tend to focus on active participation of the individual in social relations and appropriateness of the behaviour in social settings. Interactions with peers is basic (Nicholls, 1983). The children are now able to perceive themselves as others perceive them. This insight impacts the social acceptance and bond formation. Support of peers and friends is of utmost importance for problem solving skills, socially acceptable behaviour, gaining confidence and positive self-view (Chen, 2008).

Research on relationship between social competence and adjustment identifies deficits in social skills which put the individual at risk for mental health problem (Cole, 1996). Competence, resilience, social system modification and empowerment have been identified as factors which are the potentials for wellness (Cowen, 1991). The skills in the non-cognitive domains have been found to be positively related adult performance in different domains like education, employment. Significant associations have been identified with social-emotional skills at pre-school age and adult performance (Jones, 2015 Published online October 9). Mindfulness based education programs during pre-adolescent and adolescent years have been found to be positively associated with wellbeing and social emotional competence (Schonert-Reichl, 2010).
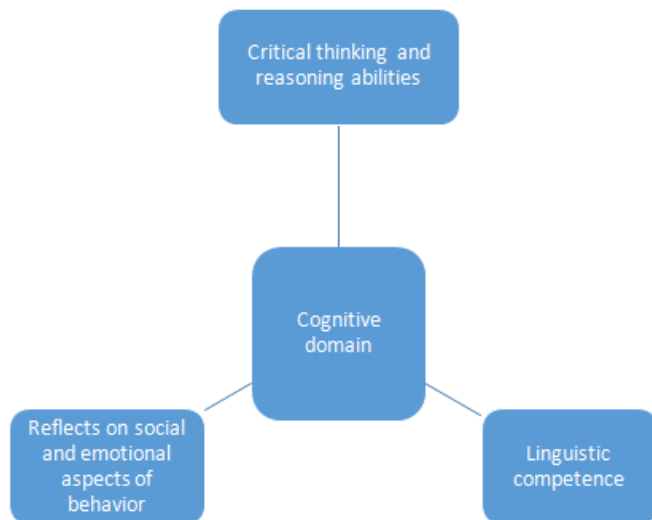
Figure 1: Story telling to enhance cognitive ability

This serves as a fertile ground for researchers to establish a link between social competence and indicators of positive adjustment. Social-emotional development provides a strong scaffold which supports the child's feelings about the self and how the child interprets the experiences with others. This foundation begins the moment a child is born and continues throughout the lifespan. The quality of relationship the child has formed with the primary caregivers influences the social and emotional skills of children. Resilience is a term used to describe a set of qualities that foster a process of successful adaptation and transformation despite risk and adversity (Benerad, accessed 2019). Persons who are resilient have the capacity to withstand, overcome, or recover from serious threat (Masten, 2001). Simply put, resilience is the ability to bounce back from adversity. Social and emotional competence is at the core of resilient behaviour. The protective factors do focus on processes like the ability to adapt in challenging situation which has been termed as resilience (Pluess & Belsky, 2010)

"Resilience refers to a dynamic process encompassing positive adaption within the context of significant adversity" (Luthar, Cicchetti, & Becker, 2000). Resilience has been termed as a 'dynamic' process where new vulnerabilities and new strengths emerge with changing life circumstances (Garmezy, 1984). The other researches too have supported the emergence of In tribal cultures the concept of resilience is inherent and the closet translation is 'resistance' (Fromboise, 2006). Resistance to negative thoughts, negative feelings. "The gift (of adversity) is the lesson we learn from overcoming it" (Graham, 2001, p. 1) cited in (Fromboise, 2006). A strong sense of belongingness to the cultural traditions, values, supportive mother with positive self-esteem and self-identity, efficacy, positive feeling about themselves and environment are some of the positive factors which work against negative impact of stress and adversity (Fromboise, 2006). People who display adaptation in face of adversity become stronger by acquiring and learning new skills and coping mechanisms in a creative way and thus, learn to face and overcome life challenges (Luthar & Zelazo, 2003).

The protective factors across eco-systemic levels have focussed on culture and positive identification with traditional beliefs and values of the culture. In native people resilience is cultivated by focussing on spirituality, physical, mental and emotional wellbeing. (Graham, 2001). Spirituality refers to the belief in the interrelatedness of all things, a sense of purpose, search for hope and harmony, activities which give meaning and value to life and a belief in a higher being (www.mentalhealth.orguk, Retrieved 2019). Having clear thoughts, balancing the emotions and taking care of the physical self are native ways of building self-esteem and thus fostering coping behaviour and resilience.

Feeling of belonging to a cultural group and enhancing the cultural values through stories, folklore, providing nurturance and parents acting as role models to foster and balance spiritual, social, emotional and physical competence helps in developing resilient behaviour in children (Fromboise, 2006).

The process of positive adaptation or resilience is a construct which relies heavily on critical social and emotional competencies. The interdependence and interrelatedness of the environment and individual, bi-directionality of the relationship results in both the individual and environment influencing each other (Bronfenbrenner, 1977).

After a critical evaluation of the skills which are crucial to social-emotional wellbeing as well as resilience in children, focusses on many commonalities. Social and emotional competence is at the core of resilient behaviour which furthers the well-being of children. With this theoretical framework wherein social and emotional competence subsequently provides a strong support for a person to acquire resilience when faced with adverse situations. Inadequate levels of social emotional functioning have been found to be related to many public health problems (Jones, 2015 Published online October 9). Non- cognitive abilities like emotional regulation, attention, self-regulation and social skills are affected by the cognitive abilities. Skills both in the cognitive and non-cognitive realms are required for academic and career success; non-cognitive abilities are more 'Malleable' (Jones, 2015 Published online October 9).

Children who have difficulty in paying attention or have a very short attention span or cannot follow teachers' instructions, have frequent conflicts with peers (Birchwood, 2012). The children with ADHD do tend to underperform in academics and face challenges during their school years from pre-school years, childhood and adolescence (Daley. D, 2010).

The children who are faced with challenges by adversities have been found to emerge stronger with capacities which may not have emerged otherwise (Waller, 2001). It is important to examine those factors that result in positive adaptations in the face of adversity. The protective factors which have been found to enhance social-emotional skills and consequently resilience in children can be categorized into family, Individual and community factors.

Competent and consistent parenting where parents use authoritative parenting style for instilling discipline in children have been found to be effective for developing skills of emotional regulation, social competence and wellbeing (Baumarind, 1967). The attitude that parents have towards their children has three dimensions: autonomy, involvement and warmth (Grolnick, 1989). In authoritative style parenting the parents are responsive to child's needs, actively participate in child's life and value children's ideas, and encourage active participation in decision making process (Baumarind D. , 1991). Parents who value children's accomplishments have been found to be associated with positive self-identity in children. Coupled with this, another crucial aspect for children's wellbeing is marital harmony with strong ethnic identity and self-efficacy of carers. These are some of the factors which support and scaffold a child's healthy social emotional development. The individual factors of the child which do contribute to positive adaptation are easy outgoing temperament, positive responsiveness, sense of humour, problem solving skills, high intelligence, hopefulness, and social skills, trust in people, cooperation, empathy, emotional regulation, strong positive ethnic identity (Waller, 2001).

At the community level good schools having adequate resources to focus on instilling self-esteem and personal responsibility, and healthy ways of communicating act as strong nurturing protective factors to enhance skills needed for resilient behaviour.

Children with Behavioural Challenges

Attention Deficit Hyperactivity Disorder (ADHD) is most commonly identified neurobehavioural disorder identified in early years (Wilens, 2010). 5-7% children are diagnosed with ADHD in early years (Barton, retrieved 2019). It is primarily accompanied by impulsivity, hyperactivity and inattention .This neurodevelopmental psychiatric disorder has significant problems with executive functions like attention control, and inhibitory control. (Attention Deficit Hyperactivity Disorder, accessed 2019). This causes attention deficits, hyperactivity or impulsiveness which are inappropriate for a person's age (Diamond, 2013) (Childress, accessed 2019) . The symptoms often appear early in life. Inattention is followed by Impulsiveness and hyperactivity. Research in the area has revealed that different symptoms may appear in different settings depending on the demands placed on the child's self-control (Barton, retrieved 2019).

The symptoms vary across settings, the recent version of Diagnostic and statistical manual of mental disorder has identified three patterns of behaviour that indicate ADHD. 6-7 percent of the children are diagnosed with ADHD when DSM IV used for the establishing diagnosis. Symptomatically such children are often restless, fidgeting with their hands and feet, squirming while seated. Behavioural disorders characterized by inability to focus or pay attention due to hyperactivity, over a longer duration of time have negative consequences academically and in social adaptation. Characteristics of hyperactivity, impulsiveness and inattention are the most obvious traits.

Other learning difficulties associated with ADHD is the difficulty in understanding certain sounds and words. A school aged child may experience problem in expressing self and encounter problem reading, spelling, writing and Math. Oppositional defiant disorder, conduct disorders common in such children

There is apparently little consensus between researchers, Paediatricians, psychologists and other child care professionals working with children regarding the cause of ADHD in children. In most cases the cause is unknown, but believed to involve interaction between genetic and environmental factors (Thapar, 2013)

In 75% of the cases genetics is a predominant factor responsible for ADHD in siblings (Nikolas, 2010). Many genes are found to be involved resulting in ADHD in children many of these genes directly affect dopamine neurotransmission (Jaclyn, 2017). The role of dopamine has been researched and has been found to be associated with positive emotions. Rewards, weather in the form of physical things or social behaviour help in giving pleasure and are of great help in behave our modification and increasing the frequency of target behaviour. 'Dopamine Pathway' or reward pathway have been found to be significant in improving the motivation (kim, 2013).

Executive functions refer to a variety of mental processes which are required to regulate, control and manage daily life tasks.

Environment per se is not considered to be a major contributing factor but consumption of alcohol or tobacco during pregnancy has shown to be significant (Hyman, accessed 2019)contributing factor in ADHD. Parenting has no significant role in ADHD and poor parenting is not a contributing factor (Barton, retrieved 2019).

Functional impairments in some of brain neurotransmission system particularly those involving dopamine and norepinephrine (Hyman, accessed 2019) have been found to be associated with ADHD. These neurotransmitters govern a variety of cognitive functions. The pathways of these neurotransmitters are directly responsible for modulating executive functions like cognitive control of behavior, motivation and reward perception

Social –emotional Inadequacies of children with ADHD

Children with all subtypes of ADHD have more problems in social-emotional domains compared to non ADHD children. Most of these children have problem making and keeping friends. This happens as they have difficulty reading social cues, and are not sensitive to others' body gestures. As a consequence, children with ADHD often misunderstand the social situation. Along with, their aggressive and impulsive tendencies very often put them under problems when it comes to sharing and taking turns.

Physical and aggressive behaviour makes their reactions very inappropriate especially in a frustrating situation. This directly has an impact on their inter-personal relationships. The inability of children with ADHD at cooperative play and sharing results in peer rejection.

The trait of inattentiveness has a direct consequence on school related tasks. The cognitive activities and learning tasks require the child to focus his/her attention for a longer duration. The inability to focus on the task leads to lack of understanding of the concepts, incomplete tasks. This frustrating and challenging situation often makes the child feel inadequate. Aggressive behaviour, often defiant attitude coupled with peer rejection and lowered cognitive skills consequently impacts the child's self-esteem and limitations in social and emotional skills.

The children have trouble self-regulating and experiencing negative feelings so often that it affects their social interactions and rejection from those who are at the receiving end.

Many factors contribute to children's angry reactions. The children with ADHD often find it difficult to manage their emotions. They are very sensitive, as a result feel deeply and can have a hard time regulating and controlling these feelings. ADHD children have a low tolerance for frustration this provokes them very easily. Feelings of low self-esteem are expressed outwardly as aggressive behaviour. Inability to inhibit responses results in impulsive behaviour which is driven by the intensity of the moment. To be able to delay a response is very difficult for children with ADHD. As a result of their growing up with rejections and negative labels, children become very sensitive even to positive statements and suggestions. Even simple subtle sounds can be a cause of distraction.

A simple pat on a shoulder by a friend or a teacher can be interpreted in a negative connotation and may result in aggressive or violent outburst.

Children with ADHD often display socially immature and defiant behaviour towards authority figures like parents, teachers or class monitor. All these intense reactions and anxiety provoking situations impact the child's self-esteem, their relationships and academic performance. The repeated failure in academic and social context as well as in emotional domains makes the child prone to low self-concept. The child in early school years needs to be able to resolve the conflict between a positive self-image and inferiority (Erikson). This implies that the interventions for social and emotional skills need to be introduced during early years itself.

Planning activities and games at home which require the child to pay attention, cooperate and follow certain rules. Moreover, the parents can invest some time by relating stories to children where take the child focus on problem solving skills, dealing with challenges. It is very important to focus on critical aspects like feelings of others' to the reactions of the story characters. The child needs to be encouraged to speak only after the other person has put

their point of view. All these efforts inculcate a sense of space, sharing and caring, focus their attention to details as well as perspective taking in the child. These are the crucial social and emotional skills needed by children in their social milieu.

Listening skills can be enhanced by reading stories, picture stories. Activities like colouring pictures, block building games, puzzles, dominoes are some of the activities which can enhance the attention in children (Barton, retrieved 2019).

Social skill training is usually help children with:

Enhancing their interpersonal skills, controlling and regulating intense emotions, working on the attention span of children, conflict resolution skills and reinforcing socially appropriate behaviour.

Important Social and emotional skills children need to develop are Confidence; which implies the child to be able to approach novel situations and learning tasks with a positive attitude. Along with this the child needs to develop the skills to enhance concentration and persistence at challenging tasks. The child needs to learn to be attentive to instructions and master the skills needed for interpersonal relations like sharing, caring, empathy, and conflict resolution with peers as well as adults.

The child needs to develop an understanding of emotions and their regulation. This implies an understanding and recognition of emotions, social and emotional nonverbal cues.

The parental support, physical presence and a supportive and responsive attitude makes the child feel secure and safe both physically and emotionally.

The warm secure environment with acceptance from parents is the most crucial factor which enables the child to learn and control emotions. The child tends to imitate the parental responses in different social settings. The parental strategies of emotional regulation and their social interactions impact the child's reactions and responses in different social settings (Sheffield Morris et.al). Based on Belsky's model of parenting, it is conjectured that child's temperament has an impact on parental behaviour. A child with a difficult temperament often receives parental aggressive and punitive responses. This implies that the child's temperament to a large extent plays a role in emotional regulation and impact on the type of parenting they receive (Taraban, retrieved 2019). Difficult temperament can become a 'bidirectional' problem leading to aggressive behaviour from the parents. It is of utmost importance to guide children's emotions in socially appropriate behaviour and help them find ways to express themselves in a healthy manner. This sort of emotional coaching helps them to learn and regulate their responses to challenges. This facilitates their academic and social competence. In addition to being able to express their own emotions, it is important in social situations for children to be able to identify and deal with the emotions of those around them. Parents model for their children how to

comfort someone who is crying or smile at someone who is smiling, but other parental behaviours also influence how their children learn to understand the emotions of others. It has been found that the interaction between parents affects a child's emotional and social development. Marital conflict negatively impacts the social and emotional skills of children (Sheffied, 2007).

Safe, caring, participating and responsive homes support the development of a socially-emotionally healthy child. Positive home environments lead to a happy child who is independent and willing to take responsibilities and is a keen learner. It is deemed important that the child develops a sense of trust and resolves the developmental conflicts positively (wiki, Retrieved 2019). This makes the child feel connected to and belonging to the environment. Physical safety from verbal or physical threats/ teasing is of utmost importance for the healthy development of the child. Emotional safety is the result of internal sense of being safe which can be achieved if the child receives a warm and caring parenting. Consistency in discipline and a predictable routine are of great significance in making children emotionally mature and competent.

The teacher needs to focus on building positive relationships with the pupils and may even need to be flexible with reference to academic activities. The teacher needs to develop her teaching style in a manner which has the social and emotional component embedded in it and models an appropriate social behaviour. and provide opportunities to children to learn new social emotional skills. A connection needs to be established with the school and home environment in a subtle and skilful manner. The onus of making the curriculum engaging and relevant to the child's experience is challenging for the teacher but can yield a strong bond with the children thus will facilitate development of appropriate social skills. The ability to understand the self, manage and regulate emotions, form relationships and resolve conflicts amicably, decision making communication skills empathy are some of the crucial skills for mental wellbeing of children. Children, who in spite of challenges, and threat to their survival are able to maintain a positive mind set and achieve a reasonable level of success in school and life have been of interest to researchers in resilience domain. Engaging in play with other children has been found crucial for social and emotional development in children and help them in controlling their negative emotions.

3. Bibliotherapy

Bibliotherapy or story telling with a therapeutic purpose has been used by psychologists, therapists, clinicians since long. This is an expressive therapy that involves story telling as a narrative. Storytelling Therapy can be used as an "umbrella Term" for narrative psychology (Eric, 2015). The narrative can be woven into a story for children, which gives a sense of identity and direction to the child. Storytelling is one of the oldest method of developing social skills of children. Storytelling experience helps the children to gain experience in a social setting in the realm of imagination and safe mental space.

Through stories the children can deal with issues like difficulties in family, trauma, disability or other challenges like parental neglect, poverty, racial or ethnic discrimination, war, natural calamities etc. Stories are an interactive medium which helps the child to handle their own life challenges and crises in effective manner. "Storytelling is a two way process it echoes and stimulates healthy attachments" (killick, 2007). Storytelling in a very natural and interactive way where the child listens to as well as speaks about feelings, relationships and appropriateness of a behaviour. A primary mode of human cognition of both self and other is narrative (https://en.wikipedia.org/wiki/Narrative_psychology).

The stories need to be selected which are in consonance with the challenges being faced by the child. By identifying with the protagonist in the story, who might be in a similar challenging situation, the child is also able to handle the situation in an effective manner. The non-verbal cues and communication are effective in making the children understand the emotional tones and gestures through non- verbal modes.

The fears and anxieties about peer rejection, social isolation, academic failures, and parental separation can sometimes have a crippling effect on the coping skills of children. Stories are a powerful medium to help children to re-write their narratives in a positive way. Based on the social and emotional needs of children stories can be woven around those needs with the culmination in a positive and mature perspective on the problem and better coping and adjustment skills. Positive modelling stories address children's life challenges and issues. The protagonist uses realistic thinking and problem solving in his or her mind.
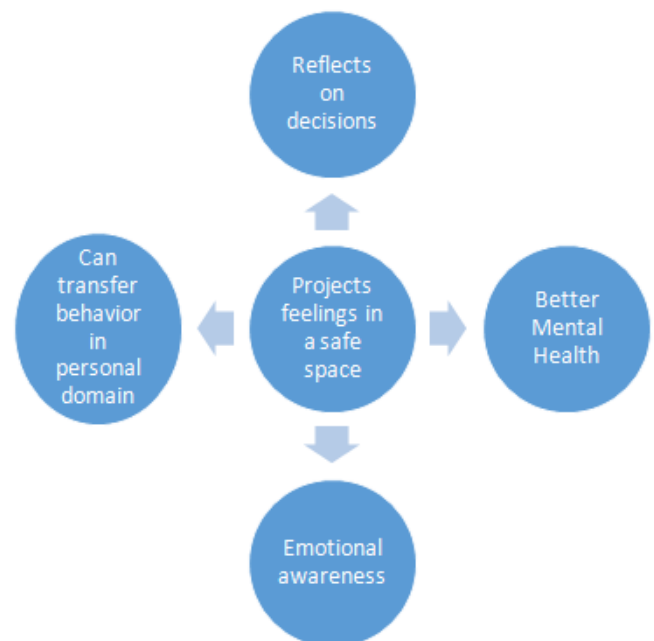

Figure 2: inculcation of social emotional skills through narratives

Neurobiologists have focussed on the brain's activity during storytelling. It has been established that story line is instrumental in changing the activities of the brain if the

narrative is well constructed. Neurochemical 'oxytocin' is released and sends the signal to the brain "It is safe to approach others" (Zack, 2019). Oxytocin is responsible for emotions like empathy, trust, kindness and elicits cooperation. Bed time stories have been found to have a calming effect on children's brains, foster bond with parents, and enhance brain development (parents.com/fun/entertainment/books, accessed 2019).

The early education programs have traditionally focussed only on social emotional skills and interpersonal relationships and not paying attention to reading have found such children to be high on social and emotional skills but low on reading abilities and are at a disadvantage in grades three onwards (Lyon). The children with learning challenges tend to avoid print, and become extremely active and display behaviours akin to ADD. Attention deficit in these cases were just avoidance of reading task (Lyon). Performance in academics is obvious through ability to read and write. Vocabulary during later years is the result of reading. Children whose parents read stories or narrated stories either through books, orally or using dramatization have been found to be able to learn to read better. The brain scans have revealed that when a person reads or listens to a story with descriptions, emotional exchanges or metaphors, corresponding part of the brain lights up. Using Magnetic Resonance Imaging (MRI), the research has shown that along with language processing part of the brain, sensory cortex, motor cortex also lights up. The brains of the narrator and the listener are synchronized (Widrech, accessed 2019). The 'Neural Coupling' can be used as Stories stimulate the brain and can even act as powerful source to change the behaviour of an individual. The narrator can plant ideas, emotions, thoughts into the listeners' brain (Hasson, 2012 February 16(2)).

In the present study on children (6-10 year old) with ADHD and other learning challenges, **Bibliotherpy** was used as a technique for behaviour modification and enhancing social emotional skills of children (Sapra, 2015, 2018). The stories were selected based on the emotional and social needs of children who were facing challenges in their school setting. The stories were selected from Panchtantra, which is a Sanskrit word meaning 'Five Treaties'. It is an ancient Indian collection of fables in Sanskrit using metaphors of animals. It is believed to be 200 BCE old based on oral tradition (Panchtantra, accessed 2019). Vishnu Sharma has been attributed the contributed these stories in Hindi literature. It has been translated in almost all Indian languages and fifty languages around the world (Panchtantra, accessed 2019). It is a series of interwoven fables which were the narratives for the three ignorant princes to make them understand the principles of 'Niti' or 'wise conduct of life'. The stories have animal characters with human virtues and vices. The fables focus on crucial aspects of human behaviour. The five aspects on which these stories are based are:

Mitra Bheda	Loss of Friends
Mitra Labha	winning of friends
Kakolukyan	on owls and crows
Labdhapranasan	loss of gains
Apariksitakaram	Considered action

The English translation for these five principles as well as stories have been provided by Ryder (Ryder, 1925).

Along with storytelling other interventions that were activity based to enhance emotional awareness, emotional regulation, self-awareness, attention span enhancement and social skills. The activities were developed for behaviour and challenges which were being faced the group selected for the study. The issues addressed by the intervention were Bullying and aggressive behaviour, attention deficit, hyperactivity, and peer relations (Sapra R. , 2019).

Traditionally storytelling as a technique has immense potential in enhancing social and emotional skills. Listening to stories helps children in enhancing their skills of communication, with enhanced ability to reflect and focus on feelings, nonverbal cues. These are critical components to learn to regulate emotions.

The story telling helps a child to imbibe the values of their culture. Stories in Indian culture have traditionally been known as Katha. This is didactic in nature. This sort of narration usually refers to religious texts. These stories intend to instil the moral and social values like honesty, selfishness, humility, empathy, sharing caring and so on. This serves the function of guiding the individual to remain composed in the face of challenges, controlling anger and at the same time reflecting on interpersonal and social awareness skills. Story narration using Sangeet (song), Abhinay (derama) in different Indian languages like Sanskrit, Hindi and other Indian languages is called Kathakalashepa. The objective is to mould the behaviour in a way which reflects the values of the culture and promotes skills of self-awareness, critical thinking, decision making and emotional regulation. These skills are the building blocks for socio-emotional wellbeing.

Bibiotherapy as a method with theme based storytelling sessions were organized using colourful audio-visuals. In the present study on children facing behavioural and school related challenges, conflict resolution issues, interactive story telling sessions were organized. The children were encouraged to express and discuss their feelings, emotions, and appropriateness of protagonist's behaviour or lack of it in the narrative. During narration the child's reactions, emotional expressions and body movements were observed intently. These cues provided a lead to the stories. The stories were selected based on the emotional and social needs of the children in the group. The major themes focussed on peer relations, challenges in personal life of the child, empathy, emotional reactions. The stories were selected with the central character displaying socially appropriate behaviour even under stressful situations. The children react to stories, either with joy, excitement, sadness, anger, happiness to name a few. The narrative keeps the child engaged and if skilfully

woven helps the child to learn to empathize with the character in the story as well as evaluate the choices made and emotional reactions and social skills of the central character in the story.

The selection of the stories can be made based on the age, challenges being faced/ life skills that the nurturer wishes to develop in children, cultural appropriateness in different social settings like home, school, clinic, or peer interactions.

In the present research design (Sapra 2015, 2018) for the study bibliotherapy was used along with other intervention strategies for enhancing social and emotional skills. The children were able to sustain their attention for longer period, better able to pay attention to their academic tasks, there was a marked improvement in social behaviour. For detailed understanding of the various approaches used, the readers can refer to the report and the module (Sapra, 2015, 2019).

4. Discussion

The social and emotional skills are acquired by children in home environments which are safe, responsive and non-threatening. Positive relations with parents act as a strong scaffold for children's mental wellbeing and appropriate social and emotional skills. The socio-emotional competencies and resilience can be considered as two sides of a coin, where each influences the other. Further studies can be taken up to explore the nature and extent of relationship between the two. It is further imperative that a positive and a strong connection needs to be established between the school and home environment. Positive and nurturing attitude of the teachers provide the opportunities to children to develop important social and emotional skills. Schools with nurturing relationship with the teacher can be safe secure spaces for children to develop critical social, emotional and resilient skills.

The scope of bibliotherapy can further be explored with adolescents and youth facing adverse life circumstances.

The benefits of Bibliotherapy or storytelling as a therapeutic tool are summarized in a concise form as follows:
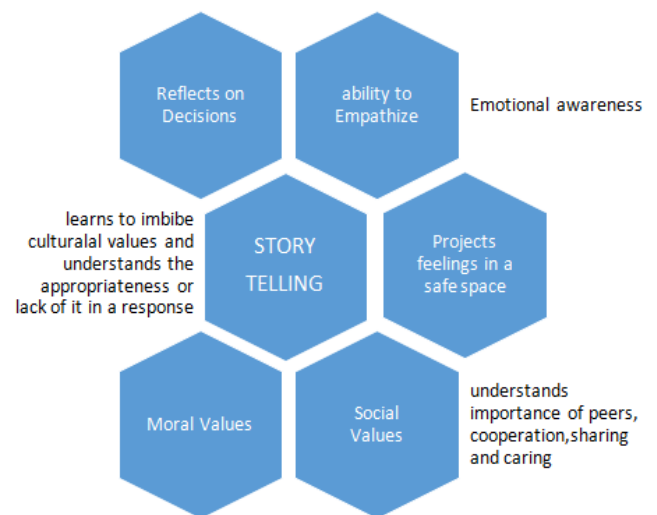

Figure 3: Storytelling as a therapeutic tool

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