
LETTER TO EDITOR**Use of bibliotherapy in the treatment of child-to-parent violence***Hüseyin Çaksen^{1*}*

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Dear editor,

Violence is an act of physical force that causes or is intended to cause harm. The damage inflicted by violence may be physical, psychological, or both [1]. Aggression is defined as “any behavior intended to harm another person who is motivated to avoid the harm” [2]. Child-to-Parent Violence (CPV), a form of domestic violence, is defined as any action used by children to gain power and control by generating fear in their parents and aimed at causing physical, psychological and/or financial harm to their parents [3].

In today's world, a holistic approach to health and well-being has become increasingly important [4]. Bibliotherapy (also referred to as book therapy or reading therapy), a complementary therapy, involves using any text to improve holistic health including physical, social, mental, spiritual, and religious health, through reading, discussing, and facilitating a greater understanding. Specific books, self-help books, storybooks, allegorical stories, storytelling, and texts in the holy books of Judaism, Christianity, and Islam are included in the notion of bibliotherapy [5]. Herein, we discuss use of bibliotherapy in the treatment of CPV to draw attention to the importance of bibliotherapy.

Children, teenage and younger girls and boys, use physical, psychological, emotional, financial and verbal aggression against their parents in CPV. This behavior jeopardizes family safety because of the power imbalance it generates, leaving many abused

parents feeling guilty and humiliated [3]. Estimates of the worldwide prevalence of CPV span the range of 5-21%. Specifically, in relation to verbal, psychological, and emotional CPV, the incidence rises to 22-93% [6].

Baeza and Gaete (2021) reported that psychological, economic, and physical aggression toward the mothers were reported to be more common than aggression toward fathers [3]. Girls tended to display psychological aggression toward both mothers and fathers, while boys showed more financial and physical aggression. Young people living in single-parent families were more likely to display financial and psychological aggression toward their mothers [3]. When one parent exerts psychological control, the low-quality relationship between the adolescent and his/her opposite-sex parent increases the risk of aggression during adolescence. As mothers exert psychological control, the high-quality parent-child relationship a son shares with his father reduces his risk of adolescent aggression [7].

In the treatment of CPV behaviors, interventions should focus specifically on the training of anger management and cognitive strategies to generate alternative responses different from aggression. For adolescents who abuse their parents for instrumental purposes, these interventions might include, specifically, the modification of their dysfunctional beliefs about the use of violence

and the learning of strategies to anticipate the consequences of their behaviors and to solve interpersonal conflicts [8].

Bibliotherapy, unknown by many health professionals, has been applied to patients and their parents/caregivers experiencing different mental health disorders, cancer, sexual health problems, etc. Table 1 shows clinical applications of bibliotherapy in adults and children [5, 9]. To the best of our knowledge, there is no study in the literature on the use of bibliotherapy in the treatment of CPV behaviors.

In conclusion, we would like to emphasize that CPV, a hidden and ignored form of family violence, is

prevalent in both developing and developed countries. We think that bibliotherapy using appropriately selected books or texts can be useful in CPV because they have been successfully used in many mental health disorders such as anxiety, depression, posttraumatic stress disorder, etc. Comprehensive and randomized controlled studies should be conducted on this subject in different sociocultural societies of the world. These studies will fill the gap in the literature and guide healthcare professionals to deal with children who abuse their parents.

Table 1: Clinical applications of bibliotherapy in adults and children

Mental Health Disorders	
In adults	In both adults and children
Improving fatigue	Improving mental health
Psychological flexibility	Improving social health
Forgiveness	Improving spiritual health
Recovery management	Improving religious health
Anger management	Stress
Worry management	Anxiety
Problems of living	Depression
Suicidal thoughts	Post-traumatic stress disorder
Recurrent deliberate self-harm	Obsessive-compulsive disorder
Emotional disorders	Cancer
Adjustment disorders	Accepting diagnosis
Borderline personality disorder	To be self-sufficient
Internalizing disorders	Coping with disease
Externalizing disorders	Decreasing pain
Panic disorder with or without agoraphobia	Strengthening immune system

Somatic symptom disorder (somatoform disorder or somatization disorder)	Improving sleep quality
Illness anxiety disorder (hypochondriasis or hypochondria)	Improving physical well-being
Alcohol use disorder	Improving emotional well-being
Substance use disorder (drug addiction)	Improving mental well-being
Hoarding disorder	Improving psychological well-being
Gambling disorder	Relaxation
Social phobia	Reducing stress
Chronic phobia	Improving anxiety
Specific fears such as fears of flying and snakes	Improving depression
Dementia	Improving post-traumatic stress disorder
Rehabilitation of patients with psychosis and schizophrenia	Improving treatment adherence
Decreasing mentalization deficit in patients with schizophrenia	Reducing side effects associated with treatment
Emotional improvement in carers of people with psychosis	Accelerating healing process
Social problem solving in carers of people with psychosis	Treating disease
Sleep disorders	Increasing vitality
Insomnia	Increasing duration of life
Bulimia nervosa and bulimia like phenotype	Reducing fear of death in end-stage
Protecting prisoners' mental health	Improving spiritual and religious health
Self-concept and internal locus of control in a correctional setting	Asking for patience, help and healing from Allah
Treatment of bereavement, loss and grief	Alleviating the grief of bereaved parents after a patient's death

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In children	Sexual Health Problems
Autism spectrum disorder	Sexual dysfunctions
Attention-deficit hyperactivity disorder	Premature ejaculation
Childhood aggression	Lifelong vaginismus
Oppositional defiant disorder in childhood	Low sexual desire in women
Childhood bullying	Female orgasmic dysfunction
Phobia of dogs in children	Sexual assault prevention
Nighttime fears of children	Child sexual abuse
Children's bedtime problems	Miscellaneous
Nocturnal enuresis	Chronic pain
Reduction of children's pain expectation	Tinnitus and tinnitus-related distress
Children's reading disability	Medication overuse in patients with migraine
Learning disabled, emotionally handicapped adolescents	Preventing post-smoking cessation weight gain
Second-language vocabulary acquisition	Self-management ability in older people
Parents of children with conduct problems	Aging and masculinity in older men

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