Hacettepe Üniversitesi Eğitim Fakültesi Dergisi

Hacettepe University Journal of Education

e-ISSN: 2536-4758

Analysing the Concepts of Hospital and Illness in Illustrated Children's Books Prepared for Children Between the Ages of Three and Six

Ayşen YALIN KOTAN*[1], Aynur BÜTÜN AYHAN**

Article Information

Received: 12.08.2025

Accepted: 10.05.2026

Online First: 30.10.2026

Published: 30.10.2026

ABSTRACT

This study aimed to examine how the concepts of hospital and illness are represented in picture books prepared for children aged three to six years. The study group consisted of 29 picture children's books that addressed the themes of hospital and illness and were selected through criterion-based purposive sampling. A qualitative document analysis design was employed. Data were collected using the "Illustrated Storybook Evaluation Scale" to assess formal and content-related characteristics, and the "Book Evaluation Form" to examine how hospital and illness concepts were presented. The data were analyzed using descriptive and categorical content analysis. The findings indicated that the overall form and content quality of the picture books was at a sufficient level. Regarding the representation of hospital and illness, elements such as examination rooms and their features, medical devices used during examination, developmentally appropriate information about disease type, causes, and symptoms, and opportunities for children to express their feelings about illness were commonly included. However, important components such as information about hospital exteriors, gardens, playrooms, operating rooms, pre- and post-surgical procedures, treatment processes, hospital staff, and children's emotional experiences related to the hospital environment were largely absent. The results were discussed in light of existing literature, and recommendations were provided for the development of more developmentally supportive hospital-themed picture books.

Keywords: Three to six years, Children, Hospital, Illness.

doi: 10.16986/hunefd.1763557 Article Type: Research Article

Citation Information: Kotan, A. Y., & Ayhan, A. B. (2026). Analysing the Concepts of Hospital and Illness in Illustrated Children's Books Prepared for Children Between the Ages of Three and Six. *Hacettepe University Journal of Education*, *41*(4), 792 - 808. https://doi.org/10.16986/hunefd.1763557

1. INTRODUCTION

The preschool period is a period when skills progress rapidly in all developmental areas (Clements & Sarama, 2011). Children in this period learn about life by interacting with their environment and develop their developmental skills in cognitive, language, social, emotional, motor and self-care areas through their experiences (Santrock, 2021). According to Piaget, one of the leading theorists of developmental psychology, children complete cognitive development stages in four main stages. Children in the preschool period are in the "pre-operational" stage (Piaget, 1985). As a result of the cognitive development area, which includes skills such as memory, perception, thinking and meaning, preschool children have difficulty acquiring abstract concepts in the process of making sense of the world (Bronson, 2019). In this stage, children develop thought structures based on concrete objects and events (Piaget, 1991). For example, a picture book telling how a tiger cub spends a day can be used to concretize the concept of "time", which is an abstract concept.

The sunrise and the surroundings being filled with light, getting out of bed, having breakfast, play time, lunch, resting in the afternoon, the sun starting to set and the surroundings getting darker, dinner, the stars or the moon appearing in the sky, and the actions of getting ready for sleep, making routines two-dimensional with pictures and texts can support children's perception of the concept of time. However, during this period, children also experience a "self-centered" mindset. They have

*Lecturer, Bahçeşehir University, Vocational School of Health Services, Department of Child Care and Youth Services, Child Development Program, aysen.yalinkotan@bau.edu.tr (ORCID: 0000-0002-9624-5293)

* PhD Student, Department of Child Development, Institute of Health Sciences, Ankara University, aysenyalin@ankara.edu.tr (ORCID: 0000-0002-9624-5293)

**Professor, Department of Child Development, Faculty of Health Sciences, Ankara University, a_butun@yahoo.com (ORCID: 0000-0003-3306-9672)

difficulty comprehending that other people may have a different perspective than their own (Piaget, 1952). The use of concrete tools such as puppets, costumes and illustrated children's
books during drama, play and interactive book reading activities can allow children to notice different perspectives in other individuals. During this period, children's presence together with qualified stimuli appropriate to their developmental levels contributes to the positive progress of their cognitive development processes (Piaget, 2003). Children's picture books are one of the forms of children's literature produced for preschool children, where there are fewer texts and more pictures, and where texts are supported by illustrations (Gönen & Uyanık Balat, 2002). Thanks to the texts and pictures in children's picture books, children enjoy coming into contact with literary works, develop their imagination skills, and have fun while learning various information about life (Şahin, 2014). Books help children concretize abstract concepts with the combination of visual and textual elements (Pilav & Orhan, 2020). In addition, children in this period can greatly benefit from picture books to understand complex situations and express their own feelings (Harper, 2001; Zambo, 2007).
It is suggested that the inclusion of elements related to the environment in which children live and the inclusion of topics that help them get to know their own world in works prepared for preschool children trigger their curiosity and desire to explore (DeTemple & Snow, 2003). Any concept such as the relationship between children and family members, animals, protecting nature, the joy of life, equality, tolerance, honesty, etc. can be the subject of children's books (Ural, 2013). However, it is expected that the selected subject should be planned according to the interests and needs of preschool children, written in a clear and understandable style, and produced within the framework of the principle of "suitability for children" (Çocuk Vakfı, 2009; Sever, 2003). A work published in accordance with the principle of "suitability for children" is defined by Şirin (1998) as "a work that successfully reflects childlike sensitivity and is identified with the sensitivities of the child's heart". When looking at children's literature works, it is seen that subjects that are based on real life, that tell about situations and events in the child's immediate environment, and that convey children's own experiences and past events are preferred (Bilir Seyhan, 2022; Karayel & Samur, 2019). It is known that when subjects that present sections from children's daily lives are chosen in works, it becomes easier for children to connect with the book and the hero, and their interest in books increases (Cengiz & Duran, 2017). There are also illustrated children's books that deal with events and possible problem situations that children may encounter in their lives and support them in acquiring coping strategies for these events. Subjects such as the birth of a new sibling, parents' divorce, natural disasters, death, illness, etc. are covered in illustrated children's books (Ural, 2013). Such works are defined in different ways in the literature as problem-oriented (Dilidüzgün, 1996) or works written for special purposes (Işıtan, 2016). Experiences related to illness and hospital are among the subjects that children frequently encounter and may have difficulty in making sense of in these early periods of their lives (Koukourikos et al., 2015; Yükselen & Savcı, 2018). Illustrated children's books facilitate parents and specialists' interaction with children in order to answer questions about illness and hospital, learn children's correct or incorrect information, correct incorrect information, enable them to acquire new information, and create space for them to notice and express their feelings. For example, information such as illness symptoms, doctor's examinations, treatment processes, procedures to be performed during diagnosis and treatment processes, and tools used are included in books both as text and illustrations. Such information reduces children's uncertainty about unknown, abstract situations and contributes to them becoming more conscious individuals on health-related issues. In addition, how preschool children perceive the concepts of illness and hospital can shape their ability to cope with these situations and their emotional reactions. Perception and knowledge of the concepts of illness and hospital can deeply affect children's worldview and perception of security. The hospital environment can be perceived as an unfamiliar environment, a place full of unknown people and uncertainties for many children. As a result, children's reactions to illness and hospital experiences can include various emotional reactions such as fear, anxiety or a sense of trust (Ünver & Yıldırım, 2014). In this context, illustrated children's books that help children understand the concepts of illness and hospital can function as both an educational and therapeutic tool. These books can explain illnesses, the hospital environment, medical procedures, medical tools and the roles of health professionals in a simple and understandable language. The role of families and health professionals in this process is of great importance. When children are given information about illness and hospital through illustrated children's books, the language used, the level of explanations and the approach can determine the attitudes and emotional reactions that children will develop towards these concepts (Karaaslan et al., 2015). In addition, it is important that the picture books used are prepared in a quality manner and appropriate to the developmental level of children in terms of language expression, content and illustrations, so that children can acquire accurate information about the disease and the hospital and have positive perceptions.

Although numerous studies have examined picture books in terms of visual quality, narrative structure, and various thematic areas (e.g., values, gender, emotions, or social skills), systematic analyses of how illness and hospital experiences are represented in picture books for preschool children remain extremely limited. This study makes a unique contribution by focusing specifically on hospital and illness-related content and by evaluating these themes through a multidimensional framework that includes physical hospital environments, medical devices, communication with healthcare personnel, emotional expression, and developmental appropriateness. By identifying both the strengths and the missing components in existing publications, this research provides empirical evidence that can guide parents, educators, healthcare professionals, and publishers in selecting and producing developmentally supportive hospital-themed picture books.

1.1. Statement of the Problem

When the literature on illustrated children’s books is examined, it is seen that a wide range of themes—such as migration and refugee experiences, fatherhood, special needs, environmental literacy, disasters, gender, sexual education, basic values, social

skills, children's rights, routines, and emotions—have been extensively analyzed in terms of language expression, content, and illustrations (Aydın & Ceylan, 2023; Karabulut, 2024; Kayıran, 2023; Şahin & Özaydınlı, 2023). However, despite this broad body of research, studies specifically focusing on illness, hospital preparation, and hospitalization in picture books for preschool children remain extremely limited. Therefore, examining how hospital environments and illness-related processes are represented in such books and identifying developmentally appropriate and qualified works is expected to make a meaningful contribution to the field.

1.2. Purpose of the Study

The aim of this study is to examine illustrated children's books with illness and hospital themes written for children between the ages of 3-6 through content analysis within the framework of language expression, content and illustration. As a result of the research, it is aimed to provide guidance for parents, educators and health professionals and to help children choose the most appropriate books to develop their knowledge and perceptions about illness and hospital. At the same time, determining books that will support the emotional health of preschool children and contributing to increasing the quality of publications in this field has been determined as another aim of the study. This study seeks to answer the following research questions:

1. What is the overall quality of illustrated children's books on illness and hospital in terms of language expression, content, and illustration?
2. To what extent do illustrated children's books include developmentally appropriate information about illness (e.g., causes, symptoms, diagnosis, and treatment processes)?
3. How are hospital environments (e.g., examination rooms, medical equipment, staff, and physical settings) represented in illustrated children's books for preschool children?
4. To what extent do these books support children's emotional experiences related to illness and hospitalization (e.g., fear, anxiety, coping, and emotional expression)?
5. Which components related to hospital and illness are missing or underrepresented in illustrated children's books for children aged 3–6?

2. METHOD

A qualitative research design was employed in this study. Specifically, a document analysis approach was used to examine illustrated children's books focusing on illness and hospital themes. Document analysis enabled the systematic examination and interpretation of the textual and visual content of the books in order to identify patterns, themes, and categories related to language expression, content, and illustration (Yıldırım & Şimşek, 2018). Although the study was based on qualitative document analysis, descriptive statistics such as frequencies and percentages were used to quantitatively summarize and present the findings.

2.1. Study Materials

A criterion-based purposive sampling method was used to determine the picture books that constituted the data source of the study. Criterion-based purposive sampling enables the selection of information-rich cases that meet predefined inclusion criteria relevant to the research purpose (Şahan & Uyangör, 2021; Yıldırım & Şimşek, 2018). Children's books were searched through major online bookstores, including BKM Kitap, D&R, Kitapyurdu, and Idefix. Within the categories of "children's books" and "preschool children's books," the keywords "hospital," "patient," "doctor," "health," and "tooth" were used to generate an initial list of titles. A total of 80 books were identified at this stage. These books were then screened according to predefined inclusion criteria: (a) being designed for children aged 3–6, (b) not being an activity book, and (c) containing content related to hospital and illness. Based on these criteria, 29 illustrated children's books were selected as the final data source of the study. Although additional books related to health and illness were identified in online bookstores, many of these titles were excluded because they were activity books, informational guides for parents, books aimed at older children, or books in which hospital or illness was only a minor or incidental theme. Only books that met all inclusion criteria and contained sufficient narrative and visual content relevant to the analytical framework of the study were included in the final sample. Information regarding the selected books, including title, author, illustrator, publisher, and year of publication, is presented in Table 1.

Table 1.
Bibliographic information of the included picture books

Number of Books	Title of the Book	Author of the Book	Illustrator of the Book	Publisher	Year of Publication
K1	Meslekleri Tanıyalım – Doktor	Kolektif	Kolektif	Parıltı Yayınları	2024

Number of Books	Title of the Book	Author of the Book	Illustrator of the Book	Publisher	Year of Publication
K2	Hayvanat Bahçesinde Diş Fırçalama Günü	Sophie Schoenwald	Günter Jakobs	Türkiye İş Bankası Kültür Yayınları	2024
K3	Cingöz Bobi: Doktor	Guy Parker-Rees	Guy Parker-Rees	Türkiye İş Bankası Kültür Yayınları	2018
K4	Doktor Hayvanlar	Angine Trius, Mark Doran, Julio Antonio Blasco	Julio Antonio Blasco	Doruk Yayınları	2022
K5	Doktor Ayı	Helena Kraljic	Kristina Krhin	Final Kültür Sanat Yayınları	2013
K6	Tumburluplar Diş Hekiminde	Meltem Erinçmen Kanoğlu	Doğan Başar Muluk	Çikolata Yayınevi	2019
K7	Elif Diş Bakımını Öğreniyor	Liane Schneider	Janina Görrisen	Türkiye İş Bankası Kültür Yayınları	2023
K8	Hayatı Öğreniyorum – Hastane	Kolektif	Jess Stockham	Türkiye İş Bankası Kültür Yayınları	2023
K9	Hayatı Öğreniyorum – Diş Hekimi	Kolektif	Jess Stockham	Türkiye İş Bankası Kültür Yayınları	2023
K10	Hayatı Öğreniyorum – Doktor	Kolektif	Jess Stockham	Türkiye İş Bankası Kültür Yayınları	2023
K11	Diş Hekimine Gidiyoruz	Andrea Zschocher	Michaela Heitmann	Türkiye İş Bankası Kültür Yayınları	2023
K12	Diş Doktoru	Koray Avcı Çakman	Elif Balta Parks	Kırmızı Kedi Yayınevi	2018
K13	Doktor Ne Yapar?	Liesbet Slegers	Liesbet Slegers	Domingo	2023
K14	Diş Doktorunu Ziyaret Zamanı	Nancy Parent	Jerrod Maruyama	Doğan Egmont	2019
K15	Tavşi'nin Doktor Ziyareti	Emmanuelle Massonau	Melaine Combes	Doğan Egmont	2021
K16	Hastanede İlk Gün	Katarzyna Nedzi	Disney Öykü Kitabı Yaratım Ekibi	Doğan Egmont	2018
K17	Ayşegül Hasta Yatağında	Gilbert Delahaye	Marcel Marlier	Yapı Kredi Yayınları	2023
K18	Hasta Olan Pembe Flamingo	Christine Beigel	Herve Le Goff	1001 Çiçek Yayınları	2024
K19	Diş Hekimi Filiz	Bridget Heos	Kyle Poling	Beta Kids	2019
K20	Dünyanın En Mutlu Hayvanı Koka ve Doktor Fafi	Işıl Çelimli Duman	Beril İrman	Romos Çocuk	2022
K21	Ece'nin Hastane Ziyareti	Halise Sağlam	Halise Sağlam	Pembe Fil Yayınevi	2023
K22	Deniz Hasta Oldu	Aydoğan Yavaşlı	Hilmi Şimşek	Bulut Yayıncılık	2015
K23	Şaşkın Lili ve Doktor Ziyareti	Jedda Robaard	Jedda Robaard	Türkiye İş Bankası Kültür	2021
K24	A'dan Z'ye Hastane (Oyunlu Alfabe)	Ezgi Perktaş	Duygu Gezer	Çamlıca Çocuk	2024
K25	Zeynep Hastaneye Gidiyor	Ezgi Perktaş	Duygu Gezer	Çamlıca Çocuk	2024
K26	Kaan'ın Sallanan Dişi	Ezgi Perktaş	Duygu Gezer	Çamlıca Çocuk	2024
K27	Kardeşim Hastanede	Ezgi Perktaş	Duygu Gezer	Çamlıca Çocuk	2024

Number of Books	Title of the Book	Author of the Book	Illustrator of the Book	Publisher	Year of Publication
K28	Elif Ameliyat Oynuyor	Ezgi Perktaş	Duygu Gezer	Çamlıca Çocuk	2024
K29	Hastane Arkadaşım	Ezgi Perktaş	Duygu Gezer	Çamlıca Çocuk	2024

2.2. Data Collection Instruments

2.2.1. Book evaluation form

The Book Evaluation Form was developed based on a comprehensive review of the relevant literature and was refined through expert evaluation. The draft form was submitted to five experts in the field of child development, and revisions were made in line with their feedback to ensure conceptual clarity, developmental appropriateness, and relevance to the study purpose. The draft form comprised 25 items organized into four sections. Following expert review and revision to address overlap, ambiguity, and relevance, the final version contained 17 items within the same four sections. The final form consisted of the following four dimensions:

1. Physical structure of the hospital
This dimension evaluates how the hospital's physical environment is represented in the books. It includes items related to the exterior and garden of the hospital, examination rooms, operating rooms, and their physical characteristics.

2. Medical devices and equipment
This dimension examines the representation of medical devices and equipment used in healthcare settings. It includes items related to medical tools and devices used during examinations, as well as those used before and during medical or surgical procedures.

3. Communication about the hospital (parent/healthcare personnel–child communication)
This dimension focuses on how the hospital environment and processes are explained to children. It includes items related to the depiction of hospital staff and their roles, the explanation of the hospital environment, providing information appropriate to the child's age and developmental level, addressing and correcting negative perceptions, and supporting children in understanding hospital-related experiences.

4. Communication about illness (parent/healthcare personnel–child communication)
This dimension evaluates how illness-related information is communicated to children. It includes items related to explaining the type, causes, and symptoms of illness; providing age- and developmentally appropriate information; allowing children to express their feelings and expectations; explaining possible physical and daily life changes during the illness; presenting the treatment plan; and informing children about possible future changes related to the illness.

2.2.2. Illustrated storybook evaluation scale

The Illustrated Storybook Evaluation Scale, developed by Deniz and Gönen (2020), comprises 21 items assessing the illustration and content characteristics of picture books. Each item is rated on a three-point Likert scale: insufficient (1), partially sufficient (2), and sufficient (3). Total scores range from 21 to 63; scores of 21–34 indicate insufficient quality, 35–49 indicate partially sufficient quality, and 50–63 indicate sufficient quality. In the original validation study, Deniz and Gönen (2020) reported a Cronbach's alpha coefficient of .94. In the present study, inter-rater agreement for the scale was assessed using Cohen's kappa ($\kappa = .86$).

2.3. Data Collection and Reliability

The data were collected between September and December 2024. The picture books included in the study were identified by the researchers through publicly accessible sources, including publisher catalogues, online bookselling platforms, and library catalogues. These sources were selected because they provide broad access to children's books currently available in the field, allow verification of bibliographic information, and enable the identification of books from different publishers, publication years, and thematic contents.

The books were included in the study based on predetermined inclusion criteria. Specifically, only picture books that were accessible in full text or full preview, suitable for children, and directly related to the study topic were included. Books were excluded if they were duplicate editions of the same title, lacked sufficient bibliographic information, were inaccessible in full,

did not meet the characteristics of a picture book, or were not directly relevant to the thematic scope of the study. Accordingly, the study sample was constructed through purposive sampling to ensure variation in publisher, theme, and year of publication rather than statistical representativeness. Therefore, the aim was not to generalize to all picture books, but to establish a diverse and information-rich set of books relevant to the phenomenon under investigation.
The books included in the study were examined using the Book Evaluation Form and the Illustrated Storybook Evaluation Scale, and the obtained data were recorded in electronic files.

To ensure the reliability of the study, the confirmability strategy was employed. Confirmability refers to the extent to which the findings are grounded in the data and open to external auditing (Creswell, 2021). Accordingly, all data records, written documents, coding materials, and analysis files were stored digitally in a computer environment. In addition, inter-coder reliability was established. Ten books were selected through purposive maximum variation sampling to reflect diversity in publisher, theme, and publication year. These books were independently coded by two researchers, and inter-coder reliability was calculated using the Miles and Huberman (1994) formula, Consensus / (Consensus + Disagreement) × 100. The inter-coder reliability coefficient was found to be .90, indicating a high level of agreement.

2.4. Data Analysis

In this study, the data were analyzed through document analysis, a systematic qualitative method used to examine printed and electronic materials (Kıral, 2020). Although the study was primarily based on qualitative document analysis, descriptive statistics (frequencies and percentages) were also used to summarize recurring features identified in the books and to support the presentation of the findings.

The analysis process was carried out in several stages. First, all books were read and reviewed multiple times by both researchers in order to gain familiarity with the content and visual structure of the materials. During this phase, preliminary notes were taken on recurrent features related to the study focus, including formal characteristics of the books, thematic content, and the ways in which hospital and illness concepts were represented.
In the second stage, a coding framework was developed based on the analytical dimensions of the study and the content of the books. The initial coding structure was informed by the sections of the Book Evaluation Form and the Illustrated Storybook Evaluation Scale. Accordingly, the data were organized under three main analytical categories: formal features, content features, and representations of hospital and illness concepts. Within these main categories, subcategories and codes were generated through repeated examination of textual and visual data. Thus, the coding process was guided both by the existing evaluation framework and by themes emerging from the books.

To ensure systematic analysis, each book was assigned an identification code (K1, K2, K3, …), each sentence was coded as (C1, C2, C3, …), and each illustration was coded as (R1, R2, R3, …). This coding hierarchy enabled the researchers to match each interpretation with its textual and/or visual evidence. Relevant sentence codes, illustration codes, and explanatory notes were recorded in the appropriate sections of the evaluation form.

In the third stage, both researchers independently coded the books according to the established framework. After independent coding, the researchers compared their coding decisions. Similar codes were grouped under broader subcategories, and related subcategories were organized under the main analytical categories. When discrepancies occurred, the researchers re-examined the relevant sentence or illustration together and discussed the interpretation until consensus was reached. In this way, the consistency and trustworthiness of the analysis were strengthened.

To increase transparency, the coding process included both textual and visual examples. For instance, a sentence describing a child as being afraid before entering the hospital was coded under the subcategory emotional responses to hospital experience, while an illustration depicting medical devices such as a hospital bed, syringe, or stethoscope was coded under representation of medical environment and equipment. In this way, both verbal and visual representations were systematically incorporated into the analysis.

3. FINDINGS

The findings obtained from the study are presented under two main headings. The first heading includes the findings regarding the formal and content features of the illustrated children's books as evaluated through the Illustrated Storybook Evaluation Scale developed by Deniz and Gönen (2020). The second heading presents the findings related to the representation of hospital- and illness-related content in the books, based on the Book Evaluation Form developed by the researchers. Throughout the findings section, the results are presented not only descriptively but also in relation to the fields of children's literature and child development.

3.1. Findings Regarding Form and Content Features in Illustrated Children's Books

This section presents the findings regarding the formal and content features of the illustrated children's books as evaluated through the Illustrated Storybook Evaluation Scale developed by Deniz and Gönen (2020). The results are summarized in Table 2 and interpreted in relation to both children's literature and child development.

Table 2.

Items, Frequencies and Total Scores Regarding Form and Content Features in Picture Children's Books

Evaluation criterion	Insufficient n (%)	Partially sufficient n (%)	Sufficient n (%)
The cover image is of interest.	1 (3.4)	4 (13.8)	24 (82.8)
More than half of the book pages consist of pictures.	0 (0.0)	5 (17.2)	24 (82.8)
Texts and pictures on the same page are compatible with each other.	0 (0.0)	2 (6.9)	27 (93.1)
The pictures have aesthetic value.	1 (3.4)	4 (13.8)	24 (82.8)
The pictures are suitable for the child's developmental level.	2 (6.9)	3 (10.3)	24 (82.8)
In the book, the characteristics and movements of the characters (body language, emotions, etc.) are accurately reflected in the pictures.	1 (3.4)	6 (20.7)	22 (75.9)
The subject of the story is suitable for the age and developmental level of the child.	1 (3.4)	4 (13.8)	24 (82.8)
The colours used in the painting are vivid and striking.	0 (0.0)	5 (17.2)	24 (82.8)
The subject of the story is interesting for children.	1 (3.4)	14 (48.3)	14 (48.3)
The story fulfils the spiritual needs of children.	2 (6.9)	12 (41.4)	15 (51.7)
The story feeds the child's creative imagination.	7 (24.1)	11 (37.9)	11 (37.9)
The language used in the story is clear, understandable and grammatically correct.	1 (3.4)	4 (13.8)	24 (82.8)
The language and style used in the story is suitable for the age and developmental level of children.	2 (6.9)	6 (20.7)	21 (72.4)
The style of the story is not preachy and instructive.	9 (31.0)	8 (27.6)	12 (41.4)
The story develops the vocabulary of the child.	1 (3.4)	10 (34.5)	18 (62.1)
The main idea/theme of the story is clear and understandable.	1 (3.4)	3 (10.3)	25 (86.2)
The story has introduction, development and conclusion sections.	3 (10.3)	6 (20.7)	20 (69.0)
The characters in the story are suitable for the child to identify and model.	0 (0.0)	5 (17.2)	24 (82.8)
The story gives importance to ethical and universal values (love, respect, democracy, etc.).	0 (0.0)	8 (27.6)	21 (72.4)
The story does not create stereotypes in terms of language, religion, ethnic origin, gender, etc.	0 (0.0)	1 (3.4)	28 (96.6)
The story presents problems that the child can solve.	4 (13.8)	3 (10.3)	22 (75.9)

The picture books focusing on hospital and illness themes were evaluated in terms of their formal and content-related characteristics using the Illustrated Storybook Evaluation Scale. Overall, the findings indicated that the majority of the books demonstrated high quality in both visual and narrative dimensions.

With regard to visual and formal features, most of the books were found to be sufficient in terms of cover attractiveness, aesthetic value of illustrations, the use of vivid and attention-grabbing colors, and coherence between text and images. In addition, illustrations generally occupied a dominant place on the pages and were developmentally appropriate, thereby supporting children's understanding of the story and characters. The accurate visual depiction of characters' body language and emotions further contributed to the clarity and emotional expressiveness of the narratives.
In terms of content and language features, most books were evaluated as sufficient regarding the clarity and grammatical accuracy of language, as well as the developmental appropriateness of language and style. The majority of the stories presented a clear main idea, included a structured narrative with a beginning, development, and conclusion, and supported children's vocabulary development. Characters were generally suitable for identification and modeling, and most books emphasized ethical and universal values while avoiding stereotypes related to language, culture, gender, or religion.

From the perspective of children's literature, these findings suggest that most of the examined books meet several important criteria of qualified picture books, including text–picture harmony, aesthetic visual design, narrative coherence, and child-centered characterization. Such features strengthen the literary quality of the books by making the narratives more accessible, engaging, and meaningful for young readers. In particular, the compatibility between visual and verbal elements appears to support the artistic and narrative integrity of the books, which is a central feature of children's literature.

From the perspective of child development, the findings indicate that the books generally provide developmentally supportive content through clear language, age-appropriate expression, understandable story structure, and characters with whom children can identify. These features are important because they may facilitate comprehension, vocabulary development, emotional engagement, and children's meaning-making processes, especially when complex themes such as illness and hospitalization are introduced.

However, some areas of relative weakness were also observed. A considerable proportion of the books were only partially sufficient in fostering children's creative imagination and in meeting their emotional needs. Similarly, in several books the narrative style tended to be somewhat didactic or overly instructive, which may limit children's engagement and opportunities for deeper emotional or cognitive involvement. The level of interest generated by the stories also varied, with some books being more engaging than others.

In terms of children's literature, these weaker findings suggest that some books privilege direct instruction over literary subtlety and imaginative depth. An overly didactic style may reduce the aesthetic and interpretive richness of the reading experience, which is particularly important in picture books intended to engage children not only cognitively but also emotionally and imaginatively.

In terms of child development, limited support for imagination and emotional needs may reduce the potential of these books to help children process fear, uncertainty, and emotionally challenging experiences related to illness and hospital settings. Since books addressing such themes are expected not only to inform but also to support emotional understanding and coping, these limitations are developmentally significant. Overall, when the total scores obtained from the Illustrated Storybook Evaluation Scale were considered, the majority of the analyzed books were classified as sufficient in terms of their formal and content-related characteristics, while a smaller proportion fell into the partially sufficient category.

3.2. Findings Related to Hospital and Illness Concepts in Picture Books

This section presents the findings related to the representation of hospital- and illness-related concepts in the illustrated children's books, based on the *Book Evaluation Form* developed by the researchers. The findings are organized under four dimensions: the physical structure of hospitals, medical devices and equipment, parent/healthcare provider–child communication about illness, and parent/healthcare provider–child communication about the hospital.

Table 3.
Items and Frequencies Related to the Physical Structure of Hospitals in Picture Books

Characteristic	Present n (%)	Not present n (%)
External Appearance and Garden Features	8 (27.6)	21 (72.4)
Examination Rooms and Their Features	18 (62.1)	11 (37.9)
Playrooms and Their Features	11 (37.9)	18 (62.1)
Operating Rooms and Their Features	5 (17.2)	24 (82.8)

In the first section of the *Book Evaluation Form*, which focuses on the physical structure of hospitals, the findings indicated an uneven representation of hospital environments across the books. While examination rooms and their basic features were relatively frequently depicted, elements related to the external appearance of hospitals, garden areas, playrooms, and operating rooms were represented less consistently.

More specifically, many books included at least some information about examination rooms and the procedures taking place in these spaces, suggesting that the clinical encounter between the child and healthcare professionals constituted the central hospital-related focus of the narratives. However, information about the broader physical environment of the hospital—such as its exterior, entrance, and outdoor spaces—was absent in most of the books. As a result, the hospital was more often represented as a place of examination and treatment than as a broader social and physical environment. From the perspective of children's literature, this finding suggests that the narrative setting of the hospital was often presented in a limited and function-oriented way. In picture books, setting is an important component of literary construction, as it helps shape the atmosphere of the story and supports the child reader's imaginative engagement with the narrative world. Therefore, the limited inclusion of external spaces, gardens, and child-friendly hospital areas may have reduced the richness and experiential depth of the hospital setting in the examined books.

From the perspective of child development, the representation of the hospital primarily through examination rooms and medical procedures may restrict children's opportunities to develop a holistic and emotionally manageable understanding of hospitalization. Since children often make sense of unfamiliar experiences through concrete environmental cues, the absence of broader hospital spaces may limit the books' potential to reduce anxiety and foster familiarity. In contrast, the inclusion of spaces such as playrooms may support a more child-centered understanding of the hospital by presenting it not only as a place of treatment, but also as an environment where play, interaction, and emotional comfort remain possible.

These patterns can be illustrated by excerpts from the analyzed books. For example, Book K1 states, "Doctors work in hospitals, health centers, or private clinics called outpatient offices." Similarly, Book K25 includes the statement, "The doctor examined Zeynep. Then, the doctor told Zeynep's mother that staying in the hospital for a while and receiving her medication there would help her recover faster." These examples reflect the emphasis placed on medical spaces and treatment processes. In relation to the item "Playrooms and Their Features," 37.9% (n = 11) of the books included such elements, whereas 62.1% (n = 18) did not. For instance, Book K29 includes the following excerpt: "Yiğit was very surprised when he arrived at the playroom with his mother. Some children were coloring, others were gluing papers, and some were looking at books with their mothers. They all looked very happy." This example is important because it presents the hospital environment in a more reassuring and child-friendly way. By contrast, for the item "Operating Rooms and Their Features," only 17.2% (n = 5) of the books included relevant content, whereas 82.8% (n = 24) did not.

Table 4.
Items and Frequencies Related to Medical Devices and Equipment in Picture Books

Characteristic	Present n (%)	Not present n (%)
Medical Devices and Equipment Used During Examinations	19 (65.5)	10 (34.5)
Medical Devices and Equipment Used Preoperatively	8 (27.6)	21 (72.4)
Medical Devices and Equipment Used During Surgery	1 (3.4)	28 (96.6)

Under the section titled "Elements Regarding Medical Devices and Equipment," the picture books were analyzed in terms of their inclusion of relevant medical content. The findings showed that medical devices and equipment used during examinations were represented more frequently than those used in preoperative or surgical contexts. Specifically, content related to medical devices and equipment used during examinations appeared in 65.5% (n = 19) of the books, whereas 34.5% (n = 10) did not include such content. By contrast, medical devices and equipment used preoperatively were represented in only 27.6% (n = 8) of the books, and medical devices and equipment used during surgery appeared in only 3.4% (n = 1). These findings suggest that the books predominantly focused on familiar and relatively non-invasive aspects of medical care, while more complex or intensive treatment-related processes were represented only to a very limited extent.

From the perspective of children's literature, the inclusion of examination-related devices may contribute to making medical experiences more concrete, visible, and narratively understandable for children. In picture books, the naming and visual representation of objects such as stethoscopes, examination lights, or similar tools can enrich the realism of the story and support children's engagement with the narrative world. At the same time, the limited representation of preoperative and surgical equipment suggests that many books tend to remain within safer and less emotionally demanding medical scenarios, rather than expanding the narrative to include a broader range of hospital experiences.
From the perspective of child development, the relatively frequent inclusion of examination tools may be considered developmentally supportive, as young children often benefit from concrete explanations and recognizable objects when trying to understand unfamiliar situations. Introducing commonly used medical devices may help reduce uncertainty and support children's comprehension of routine healthcare encounters. However, the low frequency of preoperative and surgical equipment indicates that the books may provide limited support for children who are preparing for more invasive procedures. In such cases, the books may be less effective in helping children anticipate what they may see, hear, or experience during more intensive medical treatment.

These patterns can be illustrated by excerpts from the analyzed books. For example, Book K15 includes the following dialogue: "Then the doctor asked, 'Do you remember the name of the device that lets me listen to your heart?' Tavşi proudly replied, 'A toscope.' 'You're so smart! That's very close. Its name is a stethoscope. It's a bit hard to say, and the part that touches your body can feel a little cold.'" Similarly, Book K24 states: "Light Source: Helps to better illuminate the area being examined." These examples show that some books not only mention medical devices but also explain their function in a child-friendly way, which may help children approach medical examinations with greater familiarity and less fear.

Table 5.
Items and Frequencies Related to Parent/Healthcare Provider – Child Communication About Illness in Picture Books

Characteristic	Present n (%)	Not present n (%)
Providing Age- and Developmentally Appropriate Information About the Type, Cause, and Symptoms of the Illness	17 (58.6)	12 (41.4)
Allowing the Child to Express Emotions Related to the Illness	19 (65.5)	10 (34.5)
Addressing and Correcting Child's Misconceptions or Negative Perceptions of the Illness	17 (58.6)	12 (41.4)
Providing Information on Potential Changes During the Illness (Physical, Environmental, etc.)	10 (34.5)	19 (65.5)
Providing Information About the Treatment Plan During the Illness	13 (44.8)	16 (55.2)
Providing Information on Changes That May Occur After the Illness	8 (27.6)	21 (72.4)

Under the section titled "Elements Regarding Parent/Healthcare Provider–Child Communication About Illness," the picture books were analyzed in terms of how illness-related information was communicated to the child. The findings showed that some communicative dimensions were represented relatively frequently, whereas others remained limited. Specifically, age- and developmentally appropriate information about the type, cause, and symptoms of illness was included in 58.6% (n = 17) of the books, and opportunities for the child to express emotions related to illness appeared in 65.5% (n = 19). Similarly, content addressing and correcting the child's misconceptions or negative perceptions of illness was found in 58.6% (n = 17) of the books. In contrast, information about potential changes during illness was represented in 34.5% (n = 10), information about the treatment plan in 44.8% (n = 13), and information about changes that may occur after illness in only 27.6% (n = 8) of the books. These findings indicate that the books tended to focus more on explaining the immediate experience of illness than on presenting the broader process of treatment and recovery.

From the perspective of children's literature, these findings suggest that many of the books attempted to make illness narratively understandable and emotionally communicable for child readers. In books addressing sensitive topics, explanatory dialogue, emotional expression, and reassurance are important literary tools for transforming difficult experiences into a form that children can follow and interpret. The relatively frequent inclusion of explanations about

illness and space for the child's emotional expression indicates that many books do not merely present illness as a medical fact, but also as a personal and relational experience. However, the more limited representation of treatment processes and post-illness changes suggests that some narratives remain focused on the immediate problem rather than developing a fuller story of coping, transition, and recovery.

From the perspective of child development, the findings are particularly significant. Developmentally appropriate explanations about the causes and symptoms of illness may help children understand bodily changes and reduce confusion. Likewise, allowing the child to express fear, pain, or uncertainty may support emotional recognition and regulation, while correcting misconceptions may help reduce anxiety and negative anticipations. These are important developmental supports, especially in early childhood, when children often need concrete language and emotionally responsive interaction in order to make sense of illness-related experiences. On the other hand, the relatively low frequency of information about treatment plans, ongoing changes during illness, and the period after illness suggests that many books may offer limited support for helping children anticipate what comes next. This may reduce their usefulness in preparing children for the continuity and progression of medical experiences.

These patterns can be illustrated by the excerpts included in the analyzed books. For example, Book K8 states, "Here, your bone is broken. Look, it shows up on the X-ray. We'll need to put your arm in a cast," while Book K7 explains a dental problem in simple and developmentally appropriate language. Such examples show that some books provide concrete and comprehensible explanations of illness-related situations. Similarly, the emotional expression dimension is reflected in Book K13, where the child says, crying, "My name is Leyla. I fell off my bike. My arm really hurts," and in Book K15, where the mother responds supportively after the examination. These examples indicate that several books recognize the child as an emotional participant in the illness experience rather than merely as a passive recipient of care. In contrast, the comparatively limited representation of information about treatment progression and post-illness changes suggests that fewer books support children in understanding illness as an ongoing process with multiple stages.

Table 6.

Items and Frequencies Related to Parent/Healthcare Provider – Child Communication About the Hospital in Picture Books

Characteristic	Present n (%)	Not present n (%)
Providing Information About Hospital Staff and Their Roles	8 (27.6)	21 (72.4)
Providing Age- and Developmentally Appropriate Information About the Hospital Environment	8 (27.6)	21 (72.4)
Addressing and Correcting the Child's Misconceptions or Negative Perceptions About the Hospital	4 (13.8)	25 (86.2)
Allowing the Child to Express Emotions Related to the Hospital Environment	4 (13.8)	25 (86.2)

Under the section titled "Elements Regarding Parent/Healthcare Provider–Child Communication About the Hospital," the picture books were analyzed in terms of how the hospital environment itself was explained and emotionally mediated for the child. The findings showed that all items in this section were represented at relatively low levels. Information about hospital staff and their roles appeared in 27.6% (n = 8) of the books, and age- and developmentally appropriate information about the hospital environment was also found in 27.6% (n = 8). Content addressing and correcting the child's misconceptions or negative perceptions about the hospital was present in only 13.8% (n = 4) of the books, and allowing the child to express emotions related to the hospital environment was likewise represented in only 13.8% (n = 4). Overall, these findings suggest that the hospital was explained less frequently as an environment to be understood and emotionally negotiated than as a background setting for medical events.

From the perspective of children's literature, this finding suggests that the hospital often remained a functionally described setting rather than a fully developed narrative environment. In children's picture books, settings gain meaning not only through physical description but also through how they are emotionally and socially experienced by the characters. When the hospital environment is not sufficiently explained, personalized, or emotionally interpreted, it may remain distant and abstract within the narrative. The low representation of content dealing with hospital-related fears, questions, and misunderstandings indicates that many books do not fully transform the hospital into an accessible and child-readable literary space.

From the perspective of child development, these findings point to an important limitation. Hospitals are often unfamiliar, complex, and potentially anxiety-provoking environments for children. Therefore, books that explain who works in the hospital, what different spaces are used for, and how a child may feel in such settings can help reduce uncertainty and support emotional preparation. The low frequency of these elements suggests that many books may not sufficiently support children in becoming familiar with the hospital as a social and physical environment. Similarly, when children's negative perceptions of hospitals are not addressed and their feelings about the environment are not given space, the books may be less effective in helping them cope with fear, separation anxiety, or resistance to staying in the hospital.

The examples from the analyzed books illustrate both the strengths and the limitations of this dimension. For instance, Book K19 introduces a healthcare professional by explaining what a dentist does, while Book K24 provides simple definitions of hospital-related terms such as "Monitor" and "Ward Round." Book K25 also offers a concrete description of the hospital environment by referring to the nurse, the child's room, and the ward. These examples show that some books attempt to make the hospital more understandable through role explanations and environmental information. However, the much lower frequency of books that address negative perceptions and children's emotions related to the hospital

indicates that such efforts are not common. In this respect, Book K29 is particularly noteworthy, as it portrays the child's reluctance to stay in the hospital and includes a reassuring response from the nurse, thereby presenting the hospital as an environment that can be emotionally negotiated rather than merely endured.

4. RESULTS, DISCUSSION AND RECOMMENDATIONS

In this study, picture books aimed at children aged three to six that include hospital and illness-related concepts were examined in terms of their formal and content-related features. It was observed that, in most of the books, formal features such as the attractiveness of the cover illustration, the presence of illustrations on more than half of the pages, the coherence between text and images on the same page, the aesthetic quality of illustrations, the developmental appropriateness of images, the accurate visual representation of characters' features and actions (e.g., body language, emotions), and the use of vivid and attention-grabbing colors were evaluated as sufficient. These findings are consistent with previous studies, which similarly concluded that picture books for children generally meet adequate standards in terms of visual design (Arıcı & Işıtan, 2021; Bapoğlu Dümenci & Demir, 2022; Bilgen & Gönen, 2024; Dinç, 2017; Dönmezler, 2019; Gönen et al., 2017; Kapoğlu, 2012; Kardaş Koçak, 2017; Özgider, 2010).

This finding may be related to the increasing competition in the children's book market, as suggested in previous studies. In addition, the growing presence of digital media in children's daily lives and advances in graphic design and printing technologies may have contributed to the emphasis on visually appealing and high-quality picture books.

In terms of content features, items such as the age and developmental appropriateness of the story theme, the clarity of the main idea, the presence of a structured narrative (beginning, development, conclusion), vocabulary development potential, the clarity and grammatical accuracy of language, and the developmental suitability of language and style were mostly evaluated as sufficient. The level of interest the stories generated in children was rated as partially sufficient to sufficient, with a split distribution. Moreover, when evaluating how clearly the message or moral of the story was conveyed, the majority of the evaluated books were classified as either sufficient or partially sufficient in this respect. Since preschool-aged children have not fully developed abstract thinking skills, they comprehend life events more effectively through simple and concrete narratives (Siegler, 2016). Picture books help them visually conceptualize events and characters through illustrations, enhancing their understanding.

Although the illness and hospital-related content in the books generally aligned with children's developmental levels, the relatively lower level of engaging and creative presentation suggests a need for authors to strengthen their imaginative and child-centered storytelling approaches. Items such as the suitability of characters for identification and modeling, the emphasis on universal values (e.g., love, respect, equality), the absence of stereotypical representations (e.g., religion, ethnicity, gender), and the inclusion of problem-solving opportunities were mostly rated as sufficient. Identification with story characters is a critical process in early childhood for developing self-awareness and socio-emotional skills (Bandura, 1977). Thus, protagonists who display prosocial behaviors and embrace diversity play a significant role in shaping children's worldviews. However, due to their stage of cognitive development, preschool children often rely on categorization and generalization (Piaget, 1952), which may lead to adopting stereotypes. Therefore, presenting diverse and inclusive representations in children's books is essential (Batmaz, 2021).

The findings showed that items related to meeting children's emotional needs, fostering creative imagination, and avoiding didactic or overly moralizing narrative styles were frequently evaluated as only partially sufficient. This indicates that, although many books were visually and linguistically strong, their capacity to support children's emotional engagement and imaginative thinking was more limited. Narrative structures in picture books can activate these intelligence types and support different forms of problem-solving. Items such as meeting children's emotional needs, stimulating creative imagination, and avoiding didactic or moralizing tones were found to be split between partially sufficient and sufficient. This aligns with previous findings indicating that children's picture books can support emotional needs such as empathy, security, and emotional relief (Bapoğlu Dümenci & Demir, 2022; Dönmezler, 2019; Gönen et al., 2014; Miller & Almon, 2009; Tekin, 2017). However, the 41.4% rate of partial sufficiency suggests that nearly half of the books fail to fully ensure emotional security and require more empathic approaches in handling sensitive topics.Similarly, 27.6% of books were still found to use a somewhat didactic tone, despite the emphasis on avoiding moralizing language. This may reflect a common adult tendency to give advice rather than foster understanding in children (Lillard, 2017). Recent literature emphasizes that books should instead promote emotional intelligence and be written in an empathic tone (Ginsburg, 2007).

When examining features related to the physical structure of hospitals, it was found that most books did not include exterior or garden features, playrooms, or operating rooms, although examination rooms were more commonly represented. Physical hospital features are important in helping children construct a concrete and positive understanding of hospitals (Isbell & Raines, 2007). These findings indicate that while treatment-related aspects are emphasized in children's books, developmentally essential elements such as play and recreation spaces are often neglected. This absence may cause children to view hospitals merely as places for medical intervention, reinforcing a narrow view of

health as physical well-being only. Creative, developmentally appropriate preparation materials, including art therapy and storybooks, may support children's emotional adjustment to medical environments (Councill, 2003; Sarialioğlu et al., 2023). Although surgical content requires careful and age-appropriate explanation, randomized studies indicate that preparation-themed picture books can reduce children's preoperative anxiety (Sarialioğlu et al., 2023; Yang et al., 2022).

In the section on Medical Devices and Equipment, it was found that examination-related tools (e.g., stethoscopes, thermometers) were frequently included, while those used during or prior to surgery were mostly absent. This suggests that books focus more on routine medical examinations, which may be perceived as less emotionally challenging. Visual and narrative preparation can make unfamiliar procedures more predictable; experimental studies with children have reported lower preoperative anxiety after exposure to procedure-related picture books (Sarialioğlu et al., 2023; Yang et al., 2022). The scarce depiction of surgical equipment in the present sample therefore represents a potential gap in preparation-oriented content.

The Parent/Healthcare Provider – Child Communication About Illness section revealed that items like providing age-appropriate information, addressing misconceptions, and allowing emotional expression were mostly included. However, information about changes during or after illness and explanations about treatment plans were often lacking. According to Piaget's theory of cognitive development, children need simple, concrete explanations to understand illness-related processes (Bjorklund & Causey, 2018). Preparation-themed picture books have been associated with lower preoperative fear and anxiety in randomized studies (Sarialioğlu et al., 2023; Yang et al., 2022). The 65.5% rate of inclusion for emotional expression supports the therapeutic potential of picture books. Yet, the 34.5% inclusion rate for changes during illness, and only 27.6% for post-illness changes, indicates a significant gap. The literature on picture-book interventions primarily demonstrates benefits for preoperative preparation; a recent meta-analysis also found reduced preoperative anxiety, while evidence concerning recovery-related adjustment requires further investigation (Li et al., 2025).

Lastly, in the section Parent/Healthcare Provider – Child Communication About Hospitals, most books failed to provide information about hospital staff and roles, explain the hospital environment in a developmentally appropriate way, or allow space for correcting misconceptions or expressing emotions. These gaps limit children's ability to develop realistic and reassuring understandings of the hospital experience.

Research shows that explaining the roles of doctors, nurses, and other staff can help build trust and reduce fear (Vélez & Prieto, 2018). Storybooks that explain clinical events in a developmentally appropriate manner may help children anticipate unfamiliar experiences; controlled studies have identified benefits for preoperative fear and anxiety (Sarialioğlu et al., 2023; Yang et al., 2022). Providing opportunities for emotional expression remains an important content criterion, although the present document analysis cannot determine whether such content changes children's actual behavior or emotional outcomes.

Books that fail to use appropriate language and visuals to describe complex hospital concepts may exacerbate anxiety and misunderstanding (Bjorklund & Causey, 2018). Therefore, picture books should combine accurate information with emotionally sensitive narratives. Evidence from picture-book preparation studies supports their potential for reducing preoperative anxiety, although effectiveness depends on the context and cannot be inferred from a content analysis alone (Li et al., 2025; Sarialioğlu et al., 2023). Overall, the findings suggest that picture books addressing hospital themes should be designed with greater sensitivity to children's developmental needs.

The originality of this study lies in its combined evaluation of literary quality and developmental relevance in picture books dealing with hospital and illness themes. By using both the Illustrated Storybook Evaluation Scale and the researcher-developed Book Evaluation Form, the study demonstrates that the adequacy of picture books cannot be understood solely through visual appeal, language quality, or narrative structure. Rather, books addressing medically sensitive topics should also be examined in terms of how they explain hospital settings, treatment processes, emotional experiences, and child–adult communication. In this sense, the study contributes to the literature by identifying a gap between the formal strengths of many books and their more limited capacity to support children's emotional preparation and understanding of hospitalization.

Taken together, the findings suggest that the examined picture books are generally stronger in terms of visual quality, language clarity, and basic developmental appropriateness than in their representation of hospitalization as a holistic emotional, social, and experiential process. In other words, many books appear to be successful as picture books in a formal sense, yet more limited in helping children understand the broader meanings of illness, treatment, hospital environments, and recovery. This constitutes one of the central contributions of the present study. By demonstrating the gap between formal adequacy and developmental-emotional comprehensiveness, the study highlights the need for picture books on hospital themes to be evaluated through an interdisciplinary lens that combines children's literature, child development, and child-centered health communication.

4.1. Conclusion and Recommendations

In this study, the aim was to examine the concepts of hospital and illness in picture books prepared for children aged 3 to 6. With regard to the content related to hospital and illness concepts, it was observed that features concerning the physical structure of hospitals—such as the garden, exterior design, operating rooms, and playrooms—were mostly absent, whereas only examination rooms were represented in the books. Similar results were identified under the category of medical devices and equipment: while medical tools used during examinations were depicted, those used before or during surgery were not included in the content.

In terms of parent/healthcare provider–child communication about illness, books frequently included elements such as providing age- and developmentally appropriate information regarding the type, cause, and symptoms of the illness; allowing children to express their emotions about the illness; and addressing or correcting children's negative perceptions or misunderstandings. However, information regarding the treatment plan during illness and potential changes that may occur during or after illness (e.g., physical or environmental) was largely absent. Similar findings emerged under the category of parent/healthcare provider–child communication about hospitals. In most of the books, there was a lack of information about hospital staff and their roles, insufficient content adapted to the child's age and developmental level regarding the hospital environment, and an absence of content aimed at changing children's potential negative perceptions or supporting the expression of emotions related to the hospital experience.

The inclusion of only examination procedures and the medical devices used during such procedures in the text and illustrations of picture books may lead children to perceive hospitals in a limited manner, merely as "places where one is examined." However, children in the preschool period may undergo surgical operations due to conditions such as inguinal hernia, adenoid hypertrophy, circumcision, undescended testes, appendicitis, or accidents. Moreover, they may also acquire information about surgery through communication with peers or family members who have undergone operations. Therefore, it is recommended to increase the production of picture books that provide age- and developmentally appropriate information about surgical procedures. To ensure healthy communication with children in the preoperative period, training can be provided to all physicians working with children, as well as child development specialists in hospitals, on using high-quality picture books about surgery as a communication tool.

Picture books addressing topics such as divorce, migration, death, and illness have been categorized under the heading "books that address difficult topics" (Ural, 2013). For parents, communicating with their preschool-aged children about abstract and challenging topics like illness can be difficult. Therefore, given that many books were found to lack sufficient information about hospital environments, treatment processes, and emotional support, interdisciplinary seminars involving pediatricians, child development specialists, psychologists, and communication experts may be planned to support parents in compensating for these gaps when using picture books with children. These seminars can also be organized for authors and illustrators in cooperation with publishing houses that produce children's books, thereby enriching the pool of picture books that parents can use as concrete tools when communicating with their children.

To ensure that hospital and illness-related topics are addressed in a developmentally appropriate way, training can be provided to interested authors and illustrators by child development specialists on the cognitive, social, emotional, and language development characteristics of preschool-aged children.

The lack of comprehensive hospital-related content in picture books may contribute to uncertainty and anxiety in children. Therefore, picture books addressing hospital themes should include, through text and illustrations, developmentally appropriate representations of the hospital's physical environment and staff in order to support children's understanding and emotional adjustment.

Given that a considerable number of books were found to be only partially sufficient or insufficient in terms of developmental appropriateness, informational content, and emotional support, training sessions may be organized for parents, preschool educators, and healthcare professionals on how to select high-quality picture books and how to use them effectively through shared and interactive reading. In addition, integrating such books into preschool education programs may help compensate for the observed limitations in existing publications.

Research and Publication Ethics Statement

Ethics committee approval was not required for this study as it is based on document analysis.

Author Contributions

Both authors contributed equally to the study**.**

Conflict of Interest Statement

The authors declare no conflicts of interest.

5. REFERENCES

Arıcı, M. R., & Işıtan, S. (2021). Göç ve mülteci konulu resimli çocuk kitaplarının incelenmesi. *Milli Eğitim Dergisi, 50*(1), 683-713. https://doi.org/10.37669/milliegitim.958764

Aydın, A., & Ceylan, Ş. (2023). Erken çocukluk dönemine ait resimli çocuk kitaplarının çevre okuryazarlığı bileşenleri açısından incelenmesi. *Mehmet Akif Ersoy Üniversitesi Eğitim Fakültesi Dergisi*, (68), 384-411. https://doi.org/10.21764/maeuefd.1084323

Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review, 84*(2), 191–215. https://doi.org/10.1037/0033-295X.84.2.191

Bapoğlu Dümenci, S., & Demir, E. (2022). COVID-19 pandemi sürecinde okul öncesi eğitime devam eden çocukların pandemiye ilişkin algılarının incelenmesi. *Hacettepe University Faculty of Health Sciences Journal, 9*(2), 264-280. https://doi.org/10.21020/husbfd.1005183

Batmaz, Ö. (2021). Resimli çocuk kitaplarındaki toplumsal cinsiyet eşitliğine bir bakış. *Gaziantep Üniversitesi Eğitim Bilimleri Dergisi, 5*(1), 1-18.

Bilgen, Z., & Gönen, M. S. (2024). Sayı temalı bebek kitaplarının incelenmesi. *RumeliDE Dil ve Edebiyat Araştırmaları Dergisi*, (39), 120–147. https://doi.org/10.29000/rumelide.1469392

Bilir Seyhan, G. (2022). *Resimli öykü kitabı okuma etkinliklerinin 3 yaş çocuklarının dil gelişimleri ve sosyal becerileri üzerindeki etkisinin incelenmesi* [Doktora tezi, Hacettepe Üniversitesi]. Hacettepe Üniversitesi Açık Erişim Sistemi. https://hdl.handle.net/11655/26198

Bjorklund, D. F., & Causey, K. B. (2018). *Children's thinking: Cognitive development and individual differences (6th ed.).* Sage Publications.

Bronson, M. B. (2019). *The developmental approach to parenting: Raising healthy children in the modern world.* Random House.
Cengiz, Ş., & Duran, E. (2017). Okul öncesi dönemine ait hikâye ve masallardaki değerlerin incelenmesi. *Eğitim ve Bilim, 42*(191), 205–233. https://doi.org/10.15390/EB.2017.6945

Clements, D. H., & Sarama, J. (2011). Early childhood mathematics intervention. *Science, 333*(6045), 968–970. https://doi.org/10.1126/science.1204537

Councill, T. (2003). Medical art therapy with children. In C. A. Malchiodi (Ed.), *Handbook of art therapy* (pp. 207–219). Guilford Press.

Creswell, J. W. (2021). *A concise introduction to mixed methods research.* SAGE Publications.

Çakman, K. A. (2018). *Diş doktoru* (E. B. Parks, Çiz.). Kırmızı Kedi Yayınevi.

Çocuk Vakfı. (2009). *100 temel eser raporu*. https://cocukvakfi.org.tr/wp-content/dosya/raporlar/11_100_TEMEL_ESER_RAPORU.pdf

Delahaye, G. (2023). *Ayşegül hasta yatağında* (M. Marlier, Çiz.). Yapı Kredi Yayınları.

Deniz, A., & Gönen, M. S. (2020). Resimli öykü kitaplarını değerlendirme ölçeğinin geliştirilmesi: Geçerlik ve güvenirlik çalışması. *Erken Çocukluk Çalışmaları Dergisi, 4*(2), 88-116. https://doi.org/10.24130/eccd-jecs.1967202042220

DeTemple, J., & Snow, C. E. (2003). Learning words from books. In A. van Kleeck, S. A. Stahl, & E. B. Bauer (Eds.), *On reading books to children: Parents and teachers* (pp. 16–36). Lawrence Erlbaum Associates.

Dilidüzgün, S. (1996), Çağdaş çocuk yazını. Yapı Kredi Yayınları.

Dinç, S. (2017). *Türkiye'de en çok okunan çocuk kitaplarının istatistiksel analizi* [Yüksek lisans tezi, Marmara Üniversitesi]. YÖK Ulusal Tez Merkezi. https://tez.yok.gov.tr/UlusalTezMerkezi/

Dönmezler, E. (2019). *Türkiye'de yayınlanmış 5–8 yaş resimli çocuk kitaplarının biçim, resim ve içerik açısından incelenmesi* [Yüksek lisans tezi, Mersin Üniversitesi].

Duman, I. Ç. (2022). *Dünyanın en mutlu hayvanı Koka ve Doktor Fafi* (B. İrman, Çiz.). Romos Çocuk.

Ginsburg, K. R. (2007). The importance of play in promoting healthy child development and maintaining strong parent-child bonds. *Pediatrics, 119*(1), 182-191. https://doi.org/10.1542/peds.2006-2697

Gönen, M., Uludağ, G., Fındık Tanrıbuyurdu, E., & Tüfekçi, E. (2014). 0–3 yaş çocuklarına yönelik resimli çocuk kitaplarının özelliklerinin incelenmesi. *Hacettepe Üniversitesi Eğitim Fakültesi Dergisi, 29*(1), 126–139. https://dergipark.org.tr/tr/pub/hunefd/article/101790

Gönen, M., Uysal Bayrak, H., Çelik, N. N., Gökdoğan, H., & Tütüncü, Ö. (2017). Resimli çocuk kitaplarındaki korku ve kaygı figürlerinin resimleme ve içerik açısından incelenmesi. *International Journal of Eurasia Social Sciences/Uluslararası Avrasya Sosyal Bilimler Dergisi, 8*(28), 1-17.

Gönen, M., & Uyanık Balat, G. (2002). Çocuk kitaplarına yeni bir yaklaşım: İnternet'te resimli çocuk kitapları. *Türk Kütüphaneciliği, 16*(2), 163-170.

Harper, G. (2001). Enfranchising the child: picture books, primacy, and discourse. *Style, 35*(3), 393-409.
Heos, B. (2019). *Diş hekimi Filiz* (K. Poling, Çiz.). Beta Kids.

Isbell, R. T., & Raines, S. C. (2007). *Creativity and the arts with young children* (2nd ed.). Thomson Delmar Learning.
Işıtan, S. (2016). Özel amaçla yazılmış çocuk kitapları. *Turkish Studies, 11*(4), 471-492. https://doi.org/10.7827/TurkishStudies.9086

Kanoğlu, M. E. (2019). *Tumburluplar diş hekiminde* (D. B. Muluk, Çiz.). Çikolata Yayınevi.

Kapoğlu, E. N. (2012). *İlköğretim 1–3. sınıf öğrencileri için hazırlanan öyküleyici çocuk kitaplarının nitelik yönünden değerlendirilmesi* [Yüksek lisans tezi, Abant İzzet Baysal Üniversitesi].

Karaaslan, B. T., Beyazıt, U., & Bütün Ayhan, A. (2015). Gelişimsel dönemler açısından hasta çocuklar ve hastane ortamının düzenlenmesi. In A. Bütün Ayhan (Ed.), *Hasta çocukların gelişimi ve eğitimi* (pp. 27–57). Anadolu Üniversitesi Yayınları.

Karabulut, H. (2024). Resimli Çocuk Kitaplarında Baba Katılımı Kavramının İncelenmesi. *HUMANITAS-Uluslararası Sosyal Bilimler Dergisi, 12*(23), 273-286. https://doi.org/10.20304/humanitas.1386558

Karayel, F., & Samur, A. Ö. (2019). Okul öncesi öğretmenlerinin öykü kitabı seçebilme yeterliklerinin incelenmesi. *Uluslararası Eğitimde Mükemmellik Arayışı Dergisi (UEMAD), 2*(1), 19-28.

Kardaş Koçak, M. (2017). *2000–2014 yılları arasında okul öncesi dönem çocukları için yayınlanmış olan hikâye kitaplarının dış yapı, iç yapı ve resimleme nitelikleri açısından incelenmesi* [Yüksek lisans tezi, Trakya Üniversitesi]. YÖK Ulusal Tez Merkezi. https://tez.yok.gov.tr/UlusalTezMerkezi/

Kayıran, D. (2023). Resimli çocuk kitaplarında afet kavramının incelenmesi. *Disiplinlerarası Eğitim Araştırmaları Dergisi, 7*(15), 255-262. https://doi.org/10.57135/jier.1329578

Kıral, B. (2020). Nitel bir veri analizi yöntemi olarak doküman analizi. *Siirt Üniversitesi Sosyal Bilimler Enstitüsü Dergisi, 8*(15), 170-189.

Kolektif. (2023a). *Hayatı öğreniyorum – Diş hekimi* (J. Stockham, Çiz.). Türkiye İş Bankası Kültür Yayınları.

Kolektif. (2023b). *Hayatı öğreniyorum – Doktor* (J. Stockham, Çiz.). Türkiye İş Bankası Kültür Yayınları.

Kolektif. (2023c). *Hayatı öğreniyorum – Hastane* (J. Stockham, Çiz.). Türkiye İş Bankası Kültür Yayınları.

Kolektif. (2024). *Meslekleri tanıyalım – Doktor.* Parıltı Yayınları.

Koukourikos, K., Tzeha, L., Pantelidou, P., & Tsaloglidou, A. (2015). The importance of play during hospitalization of children. *Materia Socio-Medica, 27*(6), 438.

Kraljic, H. (2013). *Doktor Ayı* (K. Krhin, Çiz.). Final Kültür Sanat Yayınları.

Lillard, A. S. (2017). *Why do the children (pretend) play? Trends in Cognitive Sciences, 21(11), 826-834.*

Li, C., Chen, Q., Zhuang, X., Wu, Y., & Hu, R. (2025). The effectiveness of picture books on reducing preoperative anxiety in children: A systematic review and meta-analysis of randomised controlled trials. *Journal of Clinical Nursing, 34*(8), 3406–3416. https://doi.org/10.1111/jocn.17747

Massonau, E. (2021). *Tavşi'nin doktor ziyareti* (M. Combes, Çiz.). Doğan Egmont.
Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis: An expanded sourcebook.* Sage.

Miller, E., & Almon, J. (2009). *Crisis in the kindergarten why children need to play in school.* Alliance for Childhood. http://www.allianceforchildhood.org/sites/allianceforchildhood.org/files/file/Kindergarten_8-page_summary.pdf

Nedzi, K. (2018). *Hastanede ilk gün* (Disney Öykü Kitabı Yaratım Ekibi, Çiz.). Doğan Egmont.

Özgider, D. S. (2010). *Türkiye ve İngiltere'de çok satılan çocuk kitaplarının biçimsel ve içerik özellikleri açısından karşılaştırılması* [Yüksek lisans tezi, Ankara Üniversitesi]. YÖK Ulusal Tez Merkezi. https://tez.yok.gov.tr/UlusalTezMerkezi/

Parent, N. (2019). *Diş doktorunu ziyaret zamanı* (J. Maruyama, Çiz.). Doğan Egmont.

Perktaş, E. (2024a). *A'dan Z'ye hastane (oyunlu alfabe)* (D. Gezer, Çiz.). Çamlıca Çocuk.

Perktaş, E. (2024b). *Elif ameliyat oynuyor* (D. Gezer, Çiz.). Çamlıca Çocuk.

Perktaş, E. (2024c). *Hastane arkadaşım* (D. Gezer, Çiz.). Çamlıca Çocuk.

Perktaş, E. (2024d). *Kaan'ın sallanan dişi* (D. Gezer, Çiz.). Çamlıca Çocuk.

Perktaş, E. (2024e). *Kardeşim hastanede* (D. Gezer, Çiz.). Çamlıca Çocuk.

Perktaş, E. (2024f). *Zeynep hastaneye gidiyor* (D. Gezer, Çiz.). Çamlıca Çocuk.

Piaget, J. (1952). *The origins of intelligence in children.* International Universities Press.

Piaget, J. (1985). *The equilibration of cognitive structures: The central problem of intellectual development (T. Brown & K. J. Thampy, Trans.).* University of Chicago Press.

Piaget, J. (1991). *The child's conception of the world (A. S. Doise & L. E. Mugny, Trans.).* Harvester Wheatsheaf.

Piaget, J. (2003). Part I: Cognitive development in children—Piaget development and learning. *Journal of Research in Science Teaching, 40*(S1), S8–S18. https://doi.org/10.1002/tea.10090

Pilav, S., & Orhan, M. (2020). 6–12 yaş grubu TÜBİTAK çocuk kitaplarının değerler eğitimi yönünden incelenmesi. *Manisa Celal Bayar Üniversitesi Sosyal Bilimler Dergisi, 18*(3), 434-453.

Robaard, J. (2021). *Şaşkın Lili ve doktor ziyareti* (J. Robaard, Çiz.; M. Aydın, Çev.). Türkiye İş Bankası Kültür Yayınları.
Sağlam, H. (2023). *Ece'nin hastane ziyareti* (H. Sağlam, Çiz.). Pembe Fil Yayınevi.

Santrock, J. W. (2021). *Children (14th ed.).* McGraw-Hill.

Sarialioğlu, A., Kurudirek, F., & Oluç, T. (2023). The effect of storybook reading on children's preoperative fear and anxiety levels: A randomized controlled study. *Child: Care, Health and Development, 49*(5), 906–913. https://doi.org/10.1111/cch.13100

Schneider, L. (2023). *Elif diş bakımını öğreniyor* (J. Görrisen, Çiz.). Türkiye İş Bankası Kültür Yayınları.

Schoenwald, S. (2024). *Hayvanat bahçesinde diş fırçalama günü* (G. Jakobs, Çiz.). Türkiye İş Bankası Kültür Yayınları.
Sever, S. (2003). *Çocuk ve edebiyat.* Kök Yayıncılık.

Siegler, R. S. (2016). Continuity and change in the field of cognitive development and in the perspectives of one cognitive developmentalist. *Child Development Perspectives, 10*(2), 128-133.

Slegers, L. (2023). *Doktor ne yapar?* (L. Slegers, Çiz.). Domingo.

Şahan, H. H., & Uyangör, N. (2021). Bilimsel araştırmalarda örneklem seçimi. In M. Çelebi (Ed.), *Nitel araştırma yöntemleri* (pp. 112–137). Pegem Akademi.

Şahin, D., & Özaydınlı, B. (2023). TÜBİTAK resimli çocuk kitaplarının toplumsal cinsiyet açısından incelenmesi. *Uludağ Üniversitesi Eğitim Fakültesi Dergisi, 36*(1), 255-285. https://doi.org/10.19171/uefad.1171382

Şahin, G. (2014). Okulöncesi dönem çocuk kitaplarında görsel bir uyaran olarak resim. *Turkish Studies - International Periodical For The Languages, Literature and History of Turkish or Turkic, 9*(3), 1309-1324. https://doi.org/10.7827/TurkishStudies.6507

Şirin, M. R. (1998). *Çocukluğun kozası: ve kültür ve kitap ve edebiyat.* İz Yayıncılık.

Tekin, E. (2017). *Süleyman Bulut'un çocuk kitaplarının çocuk edebiyatının temel ilkeleri açısından incelenmesi* [Yüksek lisans tezi, Balıkesir Üniversitesi]. Balıkesir Üniversitesi Açık Erişim Sistemi. https://hdl.handle.net/20.500.12462/3228

Trius, A., Doran, M., & Blasco, J. A. (2022). *Doktor hayvanlar* (J. A. Blasco, Çiz.). Doruk Yayınları.

Ural, S. (2013). Okul öncesi çocuk kitaplarının tanımı. In M. Gönen (Ed.), *Çocuk edebiyatı* (pp. 33–56). Eğiten Kitap.

Ünver, S., & Yıldırım, M. (2014). Cerrahi girişim sürecinde çocuk hastaya yaklaşım [Approach to the pediatric patient during the surgical intervention]. *Güncel Pediatri, 11*(3), 128-33.

Vélez, I. B., & Prieto, J. L. (2018). Literature as a therapeutic instrument in the health-disease process in childhood. *Enfermeria Global, 17*(2), 601-616.

Yang, Y., Zhang, M., Sun, Y., Peng, Z., Zheng, X., & Zheng, J. (2022). Effects of advance exposure to an animated surgery-related picture book on preoperative anxiety and anesthesia induction in preschool children: A randomized controlled trial. *BMC Pediatrics, 22*(1), Article 92. https://doi.org/10.1186/s12887-022-03136-1

Yıldırım, A., & Şimşek, H. (2018). *Sosyal bilimlerde nitel araştırma yöntemleri.* Seçkin Yayıncılık.

Yükselen, A., & Savcı, F. (2018). Hastanede yatan çocuklar ve hastanede yatmanın gelişimsel etkileri. In P. Bayhan & İ. Artan (Eds.), *Sağlık kuruluşlarında çocuk* (pp. 54–69). Hedef Yayıncılık.

Zambo, D. (2007). Using picture books to provide archetypes to young boys: Extending the ideas of William Brozo. *The Reading Teacher, 61*(2), 124-131.

Zschocher, A. (2023). *Diş hekimine gidiyoruz* (M. Heitmann, Çiz.). Türkiye İş Bankası Kültür Yayınları.