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Play therapy

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Abstract

Play therapy is a current trend in school and mental health counseling that takes into account the importance of play for a child's self-expression. It is primarily used with children ranging from three to ten years in age (Knell, 1995). Play therapy is not a theory that stands alone; counselors utilizing play therapy draw from their personal theoretical orientation and blend it with play as the primary means of communication (Cochran, 1996).

The purpose of this paper is to describe play therapy skills. In addition, two theories of play therapy that could be implemented in a school setting will be presented. Play media, techniques, and implications for school counselors will also be addressed.

PLAY THERAPY

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“Birds fly, fish swim, and children play” (Landreth, 1991, p. 25). In fact, play has been referred to as a child’s inherent way of communicating with others (Ginott, 1961; Gumaer, 1984; Landreth, 1987, 1993; Oaklander, 1978, as cited in Campbell, 1993). Even those children who lack communication skills are able to express themselves through play (Gil, 1991; Fall, 1995, as cited in Johnson, McLeod, & Fall, 1997). Talking out difficulties can be challenging for young children since they have not fully developed the ability to think abstractly or verbalize their emotions, thoughts, or actions. For these reasons, young children are better able to express themselves through play (Kottman, 1995).

Play therapy is a current trend in school and mental health counseling that takes into account the importance of play for a child’s self-expression. It is primarily used with children ranging from three to ten years in age (Knell, 1995). Play therapy is not a theory that stands alone; counselors utilizing play therapy draw from their personal theoretical orientation and blend it with play as the primary means of communication (Cochran, 1996).

Countless authors and play therapy practitioners have defined play therapy. Phillips (1985) critiqued 200 studies on play therapy. He concluded that play therapy could be defined as “a formal, regular relationship between a child exhibiting some maladaptive behavior and a trained provider in which therapeutically derived play activities occupied the central method of treatment” (as cited in White & Allers, 1994, p. 390). Virginia Axline, a renowned play therapy practitioner, defined play therapy as:

“Play therapy is based upon the fact that play is the child’s natural medium of self-expression. It is an opportunity which is given to the child to “play out” his [or her] feelings and problems just as, in certain types of adult therapy, an individual “talks out” his [or her] difficulties” (as cited in Cochran, 1996, p. 288).

The purpose of this paper is to describe play therapy skills. In addition, two theories of play therapy that could be implemented in a school setting will be presented. Play media, techniques, and implications for school counselors will also be addressed.

Play Therapy Skills

Tracking

There are certain skills that play therapists must use that are independent of one's theory base. The first skill is known as tracking. When tracking, the counselor provides a description about the behaviors clients are presenting in the play room. This lets children know that their actions are important to the counselor and deserving of recognition. Through tracking, the counselor can start building relationships with their clients. Since their actions are noticed, the children typically feel special (Muro & Kottman, 1995).

When tracking, it is important that the counselor refrains from labeling objects that a child is playing with. For example, a child may play with a toy broom during a typical session. If the counselor tracks the child by saying, "you are using the broom on the floor", the counselor may be tracking the child incorrectly. The broom may have become a sword, airplane, or pole in the child's mind. It is also important to be vague when tracking. For example, a child may look into a mirror during a session and make faces. The child could be imitating a scary movie, acting like a classmate from school, or countless other alternatives. Therefore, it is important not to pin-point what a child is doing (Muro & Kottman, 1995). "By not labeling the toys or pin-pointing the child's actions, the counselor encourages creativity and individual interpretation by the child" (Landreth, 1991, as cited in Muro & Kottman, 1995, p.174).

Reflection of Feelings

One of the most important skills during play therapy is reflection of feelings. This exchange enhances the counseling relationship by accepting the child's expression of feelings. In addition, utilizing this skill helps the client

gain self-understanding and builds the child's feeling vocabulary (Muro & Kottman, 1995).

During play therapy, children often express their feelings by acting out situations with the toys. For example, children who are sad about divorce would not typically tell the counselor directly. However, children may use a play family to act out a scene where the mother and father figures argue and the child goes outside and cries. The feelings that the toys are experiencing during play must be reflected back to clients, even though they have not expressed the feelings directly. Children will take ownership of the feelings expressed through the toys at their own rate and should not be rushed (Muro & Kottman, 1995).

Setting Limits

Another skill during the play therapy process is known as limiting the child's behavior. According to Landreth (1991), "emotional and social growth is not very likely to occur in disorganized, chaotic relationships" (p. 209). Therefore, limits must be set. Establishing limits appears to be one of the most difficult skills for play therapy counselors. A novice counselor may set limits later on in the play sessions due to insecurities, or a counselor may refrain from setting limits in order to gain approval from the child (Landreth, 1991).

Counselors from different theoretical orientations have their own beliefs on what limits would be warranted during play sessions. However, Muro and Kottman (1995) identified four general behaviors that counselors from most theoretical orientations would limit:

1. Physical attacks on self, other children, and the counselor.
2. Destruction of the play setting or play materials.
3. Removal of toys or play materials from the play setting.
4. Staying beyond the time limit of the session (p.178).

The proper time to set a limit can be disconcerting for counselors. It is

not imperative to present children a list of limits at the beginning of a counseling relationship. In fact, providing a list may give some students ideas for misbehaving. Also, several limits may restrain children who are shy or scared even more than they already are (Landreth, 1991). According to Landreth (1991), "limits are not needed until they are needed" (p. 212). Thus, a limit does not need to be set unless the counselor feels that clients are doing something that should not happen.

Play Therapy Theories

How counselors set up their play room and incorporate interventions are based on their personal theories. There is no best theory to utilize when practicing play therapy. Since it is not possible given the scope of this paper to thoroughly discuss all theories, two play therapy theories that can be incorporated in a school setting will be described.

Jungian Play Therapy

In order to understand how Jungian play therapy can be integrated into elementary schools, some of the basic tenants of the theory need to be addressed. First of all, a Jungian therapist believes that a human psyche consists of three levels. The first level is known as the ego, and is representative of what is conscious in one's mind. The next level is referred to as the personal unconscious, and is representative of repressed experiences, or those experiences that a person is not aware of because they are stored below one's awareness level. The final level is the collective unconscious, and it is made up of several archetypes (Allan & Brown, 1993).

Jungian therapists believe that children have a "struggle with opposites" (Allan & Brown, 1993, p. 32). This struggle pulls them between their outside world that is affected by their families, school environment, and friendships, and their inside world that contains personal feelings, emotions, dreams, and inhibitions (Allan & Brown, 1993). When people are healthy, their ego mediates the outside and inner worlds, and the relationship can be

workable. The struggle can be hard for school counselors to balance since their goal is to meet the needs of both the child and the school. Therefore, counseling needs to address both the inner and outside worlds. Typically in a forty minute counseling session, a Jungian therapist would spend approximately thirty minutes working with the child's play and the last ten minutes would be reserved for addressing concerns brought up by those in the child's outer world (Allan & Brown, 1993).

For change to take place, a Jungian counselor believes that certain variables must be in place. A regular time and room each week are vital components of Jungian counseling. In an ideal setting, the room would be soundproof, and it would contain play media such as sand trays, art and craft materials, games, a doll house, furniture for children, and a sink. The room would be a safe haven for children to express themselves, recall past experiences, utilize the media, and move forward with a new understanding and confidence (Allan & Brown, 1993). It would also be important to have a controlled environment and prevent unnecessary interruptions such as PA systems and telephones. Jungian therapist believes that if the time and space are controlled, a child can be treated in approximately five to fifteen forty minute sessions (Allan & Brown, 1993).

It is very important for a Jungian counselor to link the counseling sessions to what is going on in their school environment. As mentioned, the last ten minutes of counseling are typically reserved for this process. For example, the counselor may take a sheet of paper and draw a line down the middle. One side would be reserved for things that are not going well at school, and the other side would be used for listing all of the positive aspects of school life. The counselor may follow up by asking the child what could be done in order to make school better for them during the week. As treatment continues, the negative list will shorten and the positive list will become more defined. By using this technique, the children realize that they

are directly involved in the process of change (Allan & Brown, 1993).

Often times a child will become attached to a particular toy or activity during the counseling sessions. Another way for the counselor to connect with the school environment would be to share this information with the teacher, and encourage the possibility of creating classroom activities around it. For example, if a child likes to play with a stuffed tiger, the teacher could design a project on tigers, assign the child reading material on the topic, or provide the child time to discuss the animal during class (Allan & Brown, 1993).

Adlerian Play Therapy

Adlerian play therapy combines the constructs of Adlerian psychology with the rationale of play therapy (Kottman & Warlick, 1989, 1990, as cited in Kottman & Johnson, 1993). When school counselors implement Adlerian play therapy, they can use the toys as a way to communicate with the child and form a solid relationship. After obtaining information from the child, the counselor can refer to the basic tenants of Adlerian psychology in order to form a basic understanding of the child and his or her relationships (Kottman & Johnson, 1993). Children between the ages of four and nine are most suited for this type of therapy, according to Kottman and Warlick (1990).

There are four primary goals during the Adlerian play therapy process: establishing a relationship with the child, investigating his or her life-style, helping the child understand his or her lifestyle, and reorientation and reeducation (Kottman & Johnson, 1993). The four goals are sequential and are implemented throughout the duration of the counseling relationship.

Building a relationship is an ongoing process that starts before the first counseling session and continues until the child has been phased out of counseling (Kottman, 1995). The counselor's primary goal is to have the child realize that the counseling relationship is based on equality (Kottman, 1995). Counselors can demonstrate this to children in several ways. When meeting a child, the counselor could briefly acknowledge the parents and then lower to

the child's level so that they do not appear intimidating. According to Kottman (1995), this shows the child that "we are equals in this world of play, and I do not want to look as though I am starting out with a size or power advantage" (p. 50). In addition, counselors can use some of the basic play therapy skills. By tracking behavior, reflecting feelings, and restating content back to their clients, children realize that what they are doing is being recognized and is important (Kottman & Johnson, 1993).

The next step is to investigate the child's life-style. Griffith & Powers (1984, as cited in Kottman & Warlick, 1990) concluded that by the age of six, children behave in a manner that allows them to maintain their desirable status in their family system. A counselor can investigate life-styles by talking to relatives and teachers of the child or by observing the child directly. In addition, a counselor can use play media such as toys, hand puppets, and craft materials in order to elicit pertinent information from a client. Early memories of the child and looking at the family constellation are also worthwhile efforts (Kottman & Warlick, 1990).

A major focus of investigating life-styles is to find out the goals of behavior. When working from an Adlerian perspective, there are four identified goals: power, attention, revenge, and inadequacy (Dreikurs & Soltz, 1964, as cited in Kottman & Johnson, 1993). According to Kottman and Johnson (1993), attention is the most widespread goal of behavior. When children do not receive attention from their family or school environment, they may misbehave in order to gain negative attention. Children whose goal is power want things to go their way so they can show how superior they are. Children who feel that others have hurt them seek revenge in order to get back at them. Children driven by inadequacy feel that they are not worthwhile and will never attain success (Kottman, & Johnson, 1993).

Helping children gain insight into their life-styles is the next phase of the Adlerian play therapy process. In order to do this, the counselor makes a

tentative hypothesis concerning the child and then reflects it back to them (Kottman & Warlick, 1990). By providing a tentative hypothesis, counselors allow children to take a look at themselves and gain an understanding of their coping strategies (Dinkmeyer, Pew, & Dinkmeyer, 1979; Mosak, 1984, as cited in Kottman & Warlick, 1990).

In the final stage, counselors reorient and reeducate children. According to Sweeney (1981, as cited in Kottman & Warlick, 1990), this is done by helping children understand that their prior life-style was not advantageous and teaching them new skills that will allow them to be more successful. Counselors can utilize several techniques in order to assist children in this stage to attain more desirable life-styles, goals, and conduct. Drama and art techniques, storytelling, and visualizations have all been used effectively (Muro & Kottman, 1995).

Play Media

Since toys are used to help children express feelings during play therapy, toy selection is a substantial factor that must not be taken for granted (Landreth, 1991). Play media is the term used to represent the assortment of materials used in play therapy (Campbell, 1993). Counselors frequently choose media that are representative of the fine arts such as music, art, and drama. Additional media may include sand trays; materials for written expression; puppets; and toys or materials that allow for aggression, nurturing, and creativity (Campbell, 1993; Kottman, 1995).

Toys have been regarded as the primary means of emotional communication for children (Ginott, 1961; Landreth, 1993, as cited in Campbell, 1993). There is an assumption that children will express their emotions with any available play media (Landreth, 1982). However, that assumption overlooks the fact that different forms of expression are elicited from media in various categories (Landreth, 1982). Some toys evoke children to express their concerns, while others hinder their expressions

(Landreth, 1982). For example, children using craft materials are able to share their story in many different modalities. They could paint their family, make figures out of play-doh, or draw a picture. Children would only be limited by their creativity. However, board games that are not therapeutic in nature inhibit the expression of children. Children are not able to be creative during board game because they are limited by rules. Therefore, toys should be carefully chosen by their ability to provoke emotional expression rather than collecting media in order to fill up a play space (Landreth, 1991).

Counselors from varying theoretical orientations have their own philosophy about which toys are conducive for play therapy (O'Connor, 1991, as cited in Kottman, 1995). Putting all theoretical orientation aside, however, when children have a wide variety of play media to express themselves, there is a greater chance that they will be able to clearly convey to the counselor what is happening in their lives (Kottman, 1995).

Techniques

Sand Play

One technique used by counselors in play therapy is known as sand play. Materials commonly used for this technique include two sand trays and miniatures. One tray is traditionally filled with dry sand and the other is reserved for wet sand. In order to begin the sand play, the counselor asks the child to create a "miniature world" in the sand (Carmichael, 1994, p. 303). By observing the child's choice of miniatures, the counselor can look deeper into the child's innermost "symbolic world" (Carmichael, 1994, p. 303). According to Snyder (1997), "sand play is the process, the sand tray the medium, and the sand world the finished product" (p. 79).

The counselor has two primary roles during the sand play process. First, the counselor needs to create an atmosphere for children that is secure and acknowledges expression of feelings (Carmichael, 1994). In addition, the counselor must keep careful notes of the building process. This is often

done by sketching out the world, taking a photograph of different stages, or by writing notes. Important items to document would be the miniatures that were chosen or denied by the child, and how the miniatures were put together, rearranged, torn apart, or recreated (Carmichael, 1994).

According to Allan and Berry (1987, as cited in Carmichael, 1994), there are three stages in sand play: chaos, struggle, and resolution. In the chaos stage, children could be intrigued to use all of miniatures in creating their world, or they could merely play in the sand without the miniatures. Both situations could be representative of children that are overwhelmed by the emotions that they are experiencing (Carmichael, 1994).

During the struggle stage, destruction often takes place. In fact, children rarely leave any survivors. However, the situations become less violent as the child's condition improves. By the time a child reaches resolution, the situations depicted are actually very structured, peaceful, and proportional, instead of random, violent, and chaotic. At this time, children may discuss the possibility of not coming to counseling any more (Carmichael, 1994). It typically takes most children eight to ten sessions to work through the three stages (Allan & Berry, 1987, as cited in Carmichael, 1994).

Drawing

Counselors do not need specific training in art in order to utilize it in their therapy with children and adolescents (McMurray, 1998, as cited in Snyder, 1997). Therefore, when children like to draw, a play therapy technique that works well involves cartoon strips. This technique encourages children to think about their situations in a future oriented and solution focused manner. In the first step, children are asked to draw a situation that is fearful, worrisome, or hurtful to them. Next, the children are asked to draw a helper who can provide assistance in dealing with these situations. Finally, children are encouraged to draw how the situation will look after the issues are resolved

(Crowley & Mills, 1989, as cited in Kottman, 1995). This technique allows children to formulate some of their own solutions and gain a sense of empowerment. In addition, children can examine roles and determine what they may or may not have control over by examining and evaluating their cartoon strip.

Applications for School Counselors

Since children do not have refined verbal communication skills that allow for expression of feelings, play is often a necessity when school counselors communicate with their clients. "It would seem then that it is not a question of whether the elementary school counselor, psychologist, or social worker should use play therapy, but rather how play therapy should be utilized in elementary schools" (Landreth, 1983, as cited in Muro & Kottman, 1995, p. 165).

When setting up a play therapy program in a school, counselors may have to deal with some obstacles. First of all, some teachers, administrators, parents, or other school personnel may react negatively to the term therapy (Landreth, 1991). In fact, some may think that play therapy should be reserved for those children who are "severely disturbed," instead of being appropriate or available for all children (Muro & Kottman, 1995, p.168). Therefore, a different title that leaves out the word therapy may generate a more positive connotation. "Counseling with toys, emotional growth through play, developmental growth through play" or comparable names have been given to play therapy programs in elementary buildings (Landreth, 1991, p. 129).

According to Landreth (1991), the main task for counselors is to sell the play program to all those who have a vested interest. The key to gaining support from the staff and parents is to educate them on play therapy and the benefits that go along with it. Faculty and parents deserve to know what play therapy is, the rationale for utilizing it at school, possible techniques that

may be used, typical childhood concerns that could be addressed by play therapy, and any other questions they have. An in-service for faculty would be a way to address some of the concerns (Murro & Kottman, 1995). After explaining play therapy and gaining acceptance of the concept, the counselor is ready to tailor and implement play into various aspects of the comprehensive counseling program. Incorporating play into classroom guidance, small groups, and individual counseling sessions will be addressed.

Classroom Guidance

Elementary counselors can incorporate play therapy techniques into the regular developmental guidance program quite readily (Muro & Kottman, 1995). Classroom guidance provides an opportunity for children to learn and practice new skills that may benefit them in their day to day encounters. For instance, the counselor could create a lesson that teaches children how to be assertive when they encounter bullies. The lesson could incorporate play techniques such as role-playing and drama. In this lesson, children could be given scripts to act out appropriate and improper ways of handling bullies.

Counselors could also incorporate play techniques during classroom guidance by using media to introduce themselves to the children and explain the role of a counselor at the beginning of the school year (Muro & Kottman, 1995). For example, the counselor could take a stuffed rabbit with big, floppy ears into the classroom and explain that a counselor is "all ears". In addition, a teddy bear could be shown in order to represent how counseling can be "bearable". Lastly, a troll doll could be introduced to the class. The doll could be a visual reminder for the children that "it is no big, hairy deal to see the school counselor". Since the counselor's role in a school can be hard for young children to comprehend, the concrete examples given would be easy for children to understand and retain.

Small Groups

Play therapy techniques can be used in small groups to help children “explore concepts, develop self-awareness, appreciate each others’ positive differences, and practice new behaviors” (Campbell, 1993, p.15). For example, a small group could be developed that addresses childhood anger. In this group, children could use art techniques to draw how their body responds when they are angry. In addition, they could role play situations that may provoke anger and use new skills to remain calm and assertive instead of using anger in an improper manner and hurting themselves, others, or property.

Small groups focused on play have been used to build friendships among children from various cultures (Cochran, 1996). According to Cochran (1996), children who may have similar interests are chosen for the group in order to create an environment that is conducive for forming friendships. During the group, the children are able to communicate in a common language that can be referred to as play and imagination. In this way, children are able to form culturally diverse friendships. In addition, Cochran (1996) typically utilizes role playing in order for students to learn the social skills unique to each culture to foster a deeper understanding and appreciation for each other.

Individual Counseling

Having media available for children to manipulate is one of the easiest ways to incorporate play into individual counseling sessions. The counselor can utilize the media to make the counseling session less threatening and more comfortable. For example, a small child may be able to tell a stuffed bunny about a situation in his or her life easier than disclosing to the counselor. In addition, children can act out situations with the toys rather than talk about the situation at the beginning of play therapy sessions. For example, a child might perform a puppet show where a bunny is excluded from a group of

puppies, and in reality, the child may be having friendship concerns (Campbell, 1993, p.14).

Play can also be incorporated into individual sessions by creating therapeutic games. For example, the common game tic-tac-toe could be turned into a valuable resource for school counselors. Feeling words could be positioned on the tic-tac-toe board instead of marking traditional x's and o's. As players position a feeling word, they are asked to share a time when they have experienced the particular feeling. In addition to strengthening feeling vocabularies, this game allows children to share feelings in a fun manner.

Conclusion

“On the seashore of endless world children meet. Tempest roams in the pathless sky, ships are wrecked in the trackless water, death is abroad and children play “ (Tagore, 1913, as cited in Cattanach, 1992, p.29). Since play has been and always will be an integral part of a child's life, school counselors have sufficient rationale for implementing play into aspects of their elementary guidance programs. Children are expected to come to school and behave, perform well, and get along with others. However, many children have stressors that impede them from achieving school expectations. Since children often articulate their feelings and personal stories through play easier than verbalization, it is only logical for school counselors to integrate play techniques in order to reach young children most effectively.

There will always be critics who question the true value of play therapy as presented in this paper. However, “therapeutic play can bring light to children who live in darkness; smiles to children who can only cry; and inner peace to replace turmoil. This contribution to human happiness should never be dismissed as ‘just playing’” (Carroll, 1998, p.154).

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