# PLAY THERAPY ~ WHAT IS IT?

• According to Webster's dictionary, play is defined as "to engage in sport or lively recreation; to exercise for the sake of amusement; to frolic."

www.webster-dictionary.org/definition/play

 "In the context of play, children practice new roles, express emotions, try to make sense of experiences, and deal with both reality and fantasy. A Child's play is influenced by parental factors, experiences with peers, available materials, school, and the media" (Knell, 1993, pg. 7).

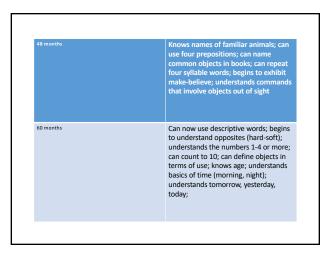
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#### **BENEFITS OF PLAY**

- Therapists use play as a means to understand children because it is a reflection of the child's feelings, thoughts, experiences, perceptions and even conflicts.
- Play helps children to process trauma and gain a sense of control over the event.
- Play can involve the use of the imagination. This can help a child to learn to overcome fears, learn social skills, control impulsivity etc.
- They can communicate things through play that might otherwise remain unconscious.
- Children do not have the ability to communicate themselves as effectively verbally. So play is a form of communication.

- Play is very non-threatening and neutral. As a result, it can help build the therapeutic relationship, lower defenses access information that you might not be able to access.
- Easier to engage children sometimes in play than talk because it is fun.
- It is unique often for the child to have an adult play with them in such a manner.
- It is a safe way to express emotions.

	Language Development
6 months	Respond to name; vocalization with intonation; turns head; responds to tone (anger, friendly)
12 months	Uses one of more words with meaning; understands simple instructions; aware of the value of speech
18 months	Has vocabulary of 5-20 words (mostly nouns); repeats words; follows simple commands
24 months	Can name a number of common objects; can use at least 2 prepositions (in, on, under); combines a noun and a verb; vocabulary of 150-300 words; lack of control over volume and pitch; can use two pronouns (i, me, you);
36 months	Use of pronouns is correct; begins to use past tense and plurals; knows primary parts of the body; communicates three word sentences; vocabulary of 900-1000 words; 90% of what they say is intelligible; understands simple questions;



	Masters the sounds f, v, sh, zh, th; speech is all intelligible and socially useful; can understand relationships; can tell a story about a picture
7 years	Masters the sounds s-z, voiceless th, ch, wh and soft g; understands opposites (boy-girl, short-long); understands alike, different, beginning, end; can tell time to the quarter hour; read and write many words
8 years	Can relate events; complex sentences; reading and writing simple compositions; control rate, pitch, volume; talk to an adult; understands time and numbers



#### COGNITIVE DEVELOPMENT

• Piaget's Theory of Cognitive Development and Play:

• Sensorimotor Stage:

• Birth to 18 months

- Interact with environment using senses and motor skills
- Play is primarily about exploring and manipulating objects
- Children will put things in their mouth, shakes them, move them etc.

• This is called Sensorimotor Play

- Children will begin to build things and construct things. A child may build a tower. Through this kind of play they learn some of the rules regarding our physical world. They will learn that a tower with a wide bottom will stand whereas one with a narrow bottom will fall over.
- This is called Constructive Play
- (Rubin, Fein, & Vendeberg, 1983)

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#### Piaget and Play (cont.)

• Preoperational Stage:

- 18 months to age 6
- Ability to use symbols Thus they can pretend in their play. A child will use an item correctly such as using a cup to drink from.
   However, they will pretend to drink even though there is no liquid in the cup. Children will also feed a doll.
   Their sound Eist Destend Day.
  - This is called First Pretend Play
- Later into this stage, children will begin to use objects for other purposes such as a block to represent a car.
   This is called Substitute Play
- During the pre-school age, children begin to play roles such as playing the role of mother or father. They may assign a role to you as well. This is also when children might manifest an imaginary friend (Taylor, Cartwright, and Carlson, 1993).
   This is called Sociodramatic Play
- (Rubin, Fein, & Vendeberg, 1983)

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#### Piaget and Play (cont.)

• Preoperational Stage (cont.):

18 months to age 6

- Children begin to use rules in play or engage in game playing with rules such as board games. This is a sign that children are ready to move on to the next stage of development.
   This is called Rule-Governed Play
- Concrete Operational Stage:

- Age 6 to age 12
- Logical Thought
- Reversibility: Physical and mental actions can be reversed. This
- enables the use of clay for example to be so useful.
- Class inclusion: Classifications. That things belong to a larger group. For example, a banana is a fruit.
- Inductive Reasoning: Take your own experience and generalize it. This is why children are able to develop empathy for example.
- (Rubin, Fein, & Vendeberg, 1983)

#### Piaget and Play (cont.)

- Formal Operational Stage:
  - Adolescence
  - Manipulate and organize ideas
  - Hypothetical thinking
  - Individuals can now explore and search or the answer to a question.
  - Hypothetico-deductive Reasoning: the ability to use deductive reasoning (general to the specific), consider hypotheses and come to a logical conclusion
  - Enables true abstract thinking such as imagine they way they would want their world to be and how it compares to the world they are in now.
  - (Rubin, Fein, & Vendeberg, 1983)

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# TYPES OF TECHNIQUES

- Child Therapy is "a relationship between the child and the therapist, aimed primarily at symptom resolution and attaining adaptive stability" (Sours, 1980, pg. 275).
- Child Therapy seems to have begun, as a separate entity, in 1909 when Freud worked with Little Hans.
- About 10 years later, Melanie Klein and Anna Freud established the theory and practice of play therapy. This created the distinction between Child Therapy (working with children) and Play Therapy (using play for therapeutic purposes).
- All Play Therapy techniques have their roots in the following theories: Psycho-analytic, existential, behavioral and Jungian.

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# PSYCHO-ANALYTIC PLAY THERAPY

- Play is important to build a relationship between the child and the therapist.
- Substitute for verbal communication.
- Analyze the transference.
- Gain insight through play in order to work through difficulties/traumas.
- Play is the child's version of Free Association.
- Get at the unconscious.
- The goal is for the therapist to observe the play, understand it and communicate with the child about their play to create understanding and move towards a resolution.

#### STRUCTURED PLAY THERAPIES

Goal oriented

- Emerged from the Psychoanalytic work
- Therapist active: sets the focus/course for play
- With children who are traumatized, purposefully help them recreate the event. "The goal of this type of play was to help the child assimilate the negative thoughts and feelings associated with the trauma by reenacting it over and over again" (Gil, 1991, pg. 30). Do not use this technique too soon in therapy. You want to make sure you have a strong therapeutic relationship established.
- Also useful to teach children how to express anger without the consequences that they usually experience (getting in trouble with parents).

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# RELATIONSHIP PLAY THERAPIES

- Created by Rogers, a non-directive therapist
- Main principal is the full acceptance of the child
- The therapeutic relationship is extremely important
- This determines if therapy will work or not and if the child will or will not make progress.
- Brings out in the child their own innate ability to solve problems as well as the ability to recognize that appropriate behavior feels better than inappropriate behavior.

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# BEHAVIOR THERAPIES

- Based upon Learning Theories
- Reinforcement and modeling are key
- This leads to the elimination of behavioral issues
- Focus is on the behavior and nothing else
- Techniques are used directly with the child during sessions or are taught to the parents in order for them to implement the techniques at home
- Very effective for behavioral problems that stem from a lack of parenting such as guidance, boundaries, rules and limit setting

# JUNGIAN THERAPY

- The principles of Jungian Therapy were the basis for the development of Sand Tray Therapy.
- According to Dorra Kalff (1980) who is credited by some with creating Sand Tray Therapy, the sand tray represents the child's psyche.
- Kalff believed that the therapist should interpret the objects used and placement within the tray. By observing this, the therapist witnesses the child progress through various stages of healing.
- Please make note that contemporary theories pertaining to Sand Tray Therapy have changed.

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#### ASSESSMENT AND DIAGNOSTICS

- When meeting with a child for the first time, go into the assessment as objectively as possible. Assume normalcy!
   First, the previous diagnosis could be wrong.
  - It is so important to understand what is normal if we are to be able to see the difficulties.
- Work with the parents
  - This is often the first source of information.
  - Make sure to get concrete examples from the parents about the behavior for which they are concerned.
  - Find out all interventions that have been tried to date formal and informal.
  - Get a full developmental history this will also help give you an idea of the expectations of the parents.

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# ASSESSMENT AND DIAGNOSTICS

- Obtain information from as many sources as possible.
  - Children behave differently in different environments and with different people.
  - You want to look for similarities and differences.
- Acquire assessment information from the child. • The child's experience and perception is vital.
- Always assess the readiness for treatment.
  - Do they seem ready to engage with you?
  - Are the parents' supportive?
  - This is useful information.

# PROJECTIVE ASSESSMENTS

 Tools that are often vague and/or unstructured with the goal being for the child to project thoughts, feelings, experiences and beliefs onto the presented stimulus.

- Thematic Apperception Test/Children's
- Apperception Test: The TAT uses human figures while the CAT uses animals depicted in human actions and situations.
- Or use any pictures except for known books!
- Rori's Story Cubes
- Sentence Completion: Can be a useful means of collecting information about thoughts, ideas etc.

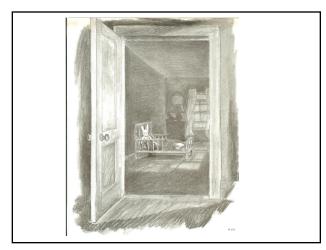
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# CAT EXAMPLES

• Card 1 – The Three Little Chicks. That's the title. The three little chicks sat down at the table and the rooster came over and said "what are you doing little chicks without your mother?" And the three little chicks looked at themselves and said "What are we doing without our mother?" And then their mother came over. She said "You're getting ready to eat!" They said "We're so glad we see you. We were wondering where you were". The end.





# CAT EXAMPLES

• Card 9 – Once there was a big bunny and a little bunny. The little bunny said "Where is father?" Mother said "He's at work" and the little bunny said "that's where he has been all day!" The mother said "Yes, that is where he has been all day. But you need to sleep. So get in your bed and rest until Daddy gets home." The end



# CAT EXAMPLES

• Card 10 – Client first said "I wonder what this one is about?"

One night a little pup went to the bathroom and found toothpaste. Then he squirted it all around the bathroom. The mother said "What are you doing in there?" He said "I'm just going to the bathroom." But he lied. His mother went into the bathroom and it was all squirted with toothpaste. She had to spank him but she felt all sad for what she did (than corrected herself and said he). He was thinking that if he was good he'd get a treat. But his mother said "You're still not getting a treat for what you did to the bathroom. Go clean it up." And so he did. The end

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### NON-DIRECTIVE TECHNIQUES

- Also called Client Centered Play Therapy is based on the principles created by Carl Rogers (1951).
- The therapist-client relationship is key.
- The therapist is passive in that they do not guide the child/client in their play.
- The child is free to chose what they want to do and what toys they wish to play with.
- The child directs the process.
- The therapist observes and comments on what they are seeing.
- Interpretation is done after a significant amount of observation.
- Because these mediums do not have firm boundaries, they tap into the limbic system and thus can trigger emotions. These are also often called a wet medium.

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# SAND TRAYS

- This technique begins with a bin such as an under the bed storage container that is filled about a third of the way with sand. The play area should contain a number of small objects, figures, animals etc.
- The client is invited to create a world in the sand. This can involve creating patterns in the sand or placing objects in the sand.
- The individual may create scenes that are meaningful, experiences, fears, hopes etc.
- See what the client shares with you. This can often be a means of communicating with your things that can not otherwise be verbalized.

# SAND TRAYS(CONT.)

- Often a client may not even understand the symbolism of what they have created. But, the therapist can help the client understand the relationship between the world they have created in the sand tray and their own world.
- With individuals who have been abused, neglected or experienced some kind of trauma, the sand tray becomes on important medium to communicate because they may not want to communicate otherwise. Once familiar with the tray, this becomes a safe place and a medium they are comfortable with and will use to communicate with you.
- Often by using the tray repeatedly, the client will create worlds that allow for healing. They may never speak but can take action that enables them to heal.

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# SAND TRAYS & ADULTS

• This can be a very useful tool with adults who are struggling to verbalize feelings, experiences etc. This can also be useful if an adult have been traumatized. The therapist can work with the client including moving objects in the sand tray to represent real people or experiences. This can help the client feel a sense of control. Creating change in the sand tray world represents the change that the client can make in their own real world.

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# SAND TRAYS

- Great for individuals age 3 and older.
- The therapist is not there to interpret. Be careful to not make any assumptions. Listen and that can be with your eyes as well as with your ears.
- Children can learn to problem solve by the examples set using the sand tray.
- Children may play out their day and not the traumatic event that they have experienced.

# SAND TRAYS

• The role of the therapist:

- Guides you need to help the client fully engage in the sand tray and really create a world. This can include helping the client build their world when first starting to use the sand tray. It can also include support and encouragement.
- Integrate other techniques this can include narratives, music etc.
- Use this when other techniques are not working.

http://www.youtube.com/watch?v=ydG6Ynzrp2Y

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• Do not be intimidated

• Great substitute for communication – adults and children

Play out day

• Listen – Don't interpret; be cautious

Control

- Safe environment
- Age 3 and under
- Non-verbal processing

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#### Second Sand Tray

- Pt. depicted a house with a garden and the garden had a fence around it. In the garden were The Mom and The Dad. Outside of the garden were the cats and herself. Her sister was in their room. When asked to tell me about her world she told me the following:
- The lizard is trying to get into the house to find food. Her sister is looking in the mirror. She is in "our room". "The Mom" is lying down and taking a nap (she is in the garden in a lounge chair). "The Dad" is sitting down taking a picture of the tree. "I'm trying to water the tree with no leaves so it can get leaves". When asked why it did not have leaves, she said it was fall (the season). Bean (the cat) is washing Meatwad (the cat). The lizard is looking at the tree. Pisser (the cat) is looking at the lizard. The flag is blowing.

#### Sand Tray example explanation

- The lizard is trying to get into the house to find food
- · Her sister is looking in the mirror. She is in "our room"
- "The Mom" is lying down and taking a nap (she is in the garden in a lounge chair)
- The Dad" is sitting down taking a picture of the tree
- "I'm trying to water the tree with no leaves so it can get leaves". When asked why it did not have leaves, she said it was fall (the season)
- · Bean (the cat) is washing Meatwad (the cat)
- The lizard is looking at the tree
- Pisser (the cat) is looking at the lizard
- The flag is blowing.

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#### Sand Tray example explanation

- The boy who created this sand tray has an interesting story. He is 11 and lives with his aunt and uncle.
- The yellow "noodles" are the secret entrance.
- It is his house and it is very well guarded with men, planes, helicopters etc. What is inside is very "valuable".
- The other items are there because he liked them.
- Make note of the money tucked in the front of the house.
- He has an adult in his life who is significant and is Native American – note the tee pee and totem pole.

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#### Jayda:

- Money represents working and the intent to make more. - The watch equals time with is important (we live by it) and not important (summer and do not mark the days).
- Food represents diet and exercise which is important to all of them. - The fence is there but has an opening because they are all taking down their fences.
- Flower represents each of them changing but it is facing her because she is changing so much with all that she has been doing including figuring out who she is (she is the doll with the pony tails).

#### Bryson:

- Spiderman is there because of the Xbox and his nickname on Xbox live is Spidey.
- Car represents Jayda driving
- Construction guy is there because they are all working such as he is working with his grandfather.

- 50 SANDTRAY THERAPY DIRECTIVES:
- Build a tray about...For school age children:
- Your family
- Your friends at school
- Your typical day
- One side being the best part of your world/other side being the worst part of your world
- One side as when you feel happy/other side when you feel sad
- You favorite things
- The scariest thing in your world
- How you calm down when you are feeling upset
- What each of member of your family does most often
- What you want to do when you grow up

#### • For teenagers:

- A timeline of your life
- Your happiest memory
- The hurdles you face now
- Your ideal future
- What love looks like to you
- The most important things in your life
- Marriage/commitment
- Your daily routine
- What you see when you look in the mirror
- Your worst nightmare (either imagined or an actual dream)

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#### • For couples:

- Each person in the couple builds what his or her marriage feels like for them
- Their first date
- What the other person would say they need to change (3 things) such as make a tray about what your partner would say you need to change
- A fun day in the past
- Your biggest hurt from the relationship
- Hurdles you need to overcome for the relationship to be happier
- What you like best about your partner
- Each partner makes a tray about what they each like to do and then the couple brings those things together and makes a tray together about what they would be willing to do with the other person or shared interests
- Your family either nuclear or extended
- How each partner likes be shown care or love

#### • Adults:

- Your hope for the outcome of therapy
- Your one biggest struggle
- Your happiest childhood memory
- Your saddest childhood memory (could combine this with the happiest childhood memory)
- What shame means for you
- · What it feels like to feel shame
- How others can show you love
- What would take to stand up for yourself
- The best day possible
- You family (kids, husband, parents, etc.)
- What you would want to do if today was your last day alive
- Your thoughts as your feet hit the floor in the morning

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- Your motto for your life
- Three things you can do tomorrow to feel better
- What your mom/dad would say about you if they were to make a tray about you
- Your best/worst attribute or characteristic
- 5 things you tell yourself every day
- How your life would be different if \_\_\_\_\_ was not in your life/heart
- (i.e. depression, divorce, hatred, etc)
- Your feelings as you lay in bed at night
- Your favorite part of life

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# WATERCOLOR

- •A wonderful free medium.
- •Can be too much emotionally for some children given how this kind of medium taps into the limbic system.
- •You can allow the child to free paint or ask them to paint certain things as well.

#### Color

- With any medium, it is important to remember that color can be very subjective. You want to pay attention to how the child uses and reacts to colors.
- Generally speaking,
  - Red = anger
  - Yellow = dependency
  - Brown and black together = anxiety/depression
  - Blue and green = controlled/self-restraint
  - Light or hard to see color = trying to hide something

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# CLAY

- Besides Play Dough you can use Plasticene, Scuply or others that never dry!
- •Worry stones
  - •Great for anxiety, focus, impulsivity
  - •Refrigerate it cold can by calming
- •Life Beads

• Create a face – what do you show the world. Than create a fact of what they really feel. Lastly, you can have the child do a face reflecting what they want to feel.

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## DIRECTIVE TECHNIQUES

- The therapist is active by setting up a play situation, structuring the activity/play.
- This is to purposefully trigger certain unconscious thoughts and feelings, challenge defense mechanisms, or go in directions that are perceived as beneficial.
- To simply draw is non-directive but to ask the child to draw something specific is directive.
- These mediums have firm boundaries and direction. Thus they tend to tap into emotions less than nondirective techniques.

# **DOLL HOUSE**

- Do not intervene
- The child play freely
- Observe and interpret
- •See how the child has the figures interact with one another
- •What do the people do?
- How do they treat one another?
- •Who does what and with or without whom?

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#### WHAT DO YOU WANT TO BE WHEN YOU GROW UP?

- Ask the child what they want to be when they grow up?
- Ask them what they would have to do in that job?
- Ask them why they want to be that when they grow up?
- Have them draw or act out what they have told you. They can even role play with you.
- Interpret what you have been told and see how it fits with the other information you have about the child.

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# WHAT ANIMAL AM I?

- It can be fun to ask a child, if they can be any animal, what animal would they want to be?
- After they answer, than ask them why?
- You can even have them draw the animal or act out the animal.
- Important to interpret what they tell you and see how that fits into the other information you know about the child.
- Can even make the animal out of origami.
- Make it out of aluminum foil

# COOL SHADES

- •It is amazing what wearing sunglasses in the play room can do for a child.
- It is as if they are no longer visible. This creates for them a greater sense of security and safety as if they are anonymous.
- •This often enables them to feel less guarded and speak about things that are difficult or uncomfortable for them. If children are embarrassed about something, this can be a time when they are more likely to discuss it.

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# TELEPHONE

• Having toy phones (cell or regular) can be a very useful tool. You have the child use one phone and you have the other. By sitting back to back, on the floor, you promote the ability to have a more intimate conversation. The children may communicate to you things that they might not otherwise be able to say if having to look at you face to face.

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# ROLE PLAYING (DRAMA)

- By playing other roles, children can better understand other people in their world or process feelings by acting in the manner they wish that person would act.
- Role playing also allows children to experiment in a safe way. They can try different reactions and behaviors.

# PUPPETS

- This enables the child to tell stories
- They will project onto the puppets situations or issues that they are experiencing
- You can simply have the child use the puppets or you can create a discussion, similar to using telephones, and engage in a conversation
- If you want to set up a puppet theater, this can be done simply by hanging a sheet that the child can hide behind. This creates greater anonymity and thus more of a sense of safety and security
- Can be finger puppets or larger
- Make puppets out of popsicle sticks
- You can have the child make puppets out of socks, old gloves etc.

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• You can set up specific stories to act out with the child. Singer and Singer (2001) suggest the following:

- Cat and Mouse
  - The cat is asleep and the mouse wakes the cat up

• Boy and Girl

The girl asks the boy to play

Lost Dog

• The boy is crying because he lost his dog

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# DRAW A DREAM

- If a child has nightmares, this can help them to be less afraid and even feel some control over the dream.
- In addition, toast with butter (carb) and oil relaxes the body
- This is a cognitive technique suggested by Baker and Salston
- (1993):Before going to sleep, recognize that you may dream something distressing in the night.
- When the dream occurs, write it down, talk it through with someone (if possible) and then rewrite the ending.
- This is a way to enable the client to take control of the dream.
- Then do a deep relaxation and go back to sleep.
- You can do the same thing but use drawings: • Have a child draw the dream with the outcome that they want. If
  - they wake up having had the nightmare, the can pull out the picture and remind themselves of the alternative ending.

#### Fears/Nightmares

- Dream journal write down a dream that the child wants to have tonight. Have them describe it as best as they can. Have them read it out loud to you. Have them read it to themselves before going to sleep.
- Doing journals around fears can help in a similar way. Have the child journal what they are afraid of. Than have them journal what things would be like if they did not have that fear. What do they need in order to not be afraid? Help them to see that they have those things. Have them read what things would be like without that fear whenever they start to feel that fear again.

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# MAGIC WAND

 I use the magic wand by pretending it is really a magic wand – what would the child want it to do/what would they wish for? Role play with them or have them draw the result.

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# MOVEMENT

- It is great to get children moving.
  - Touch toes
  - Reach for the stars
  - Jump like a kangaroo
  - Lie down and ride a bicycle
  - Skip

Dancing

- Most children enjoy music. The right music can reduce stress, improve mood etc. Many children can be self conscious as well and this can help to break that. Use children's song or Harry Bellefonte for example depending upon the age of the child. Make it fun
- Movement helps with Speech as well great for speech therapy work!

# DANCE AND MOVEMENT

- •This is very useful, as we will discuss, with children who have been abused or experienced some kind of trauma
- You can help children to loosen up in counseling by taking the lead and moving. You can move individually or together.
- •This can do much for helping the child to be more comfortable as well as engaging with you.

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# MUSIC/LYRICS

- Individuals, especially teens, identify a lot with music. The lyrics often express for them what they can not.
- Mood strongly impacts mood as well and we will gravitate to certain types of music depending upon how we feel and want to feel.
- Have children/teens bring in a song that describes who they are.
- You can use songs for them to describe how they feel.
- Use music as an intervention such as to build self-esteem.
- Some great songs: "If I could be good" by Alanis Morrisette
- "I am my own Invention" from the musical "Wonderland"
- "Beautiful" Christina Aquilera

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#### Development of Drawing

Stages of Development for drawing:

- Children begin to scribble around ages 2 and 3.
- By age 4, children begin to become more organized, using single lines. Use circles
- Ages 4-7 children do not necessarily draw what is actually seen. They draw what they know to be there or present so may show people through walls.
- Over the years they are able to draw rough, simple structures to represent people and animals.
- Ages 7-12 children draw realistically, what is visible. Human figures are realistic as well.
- Around age 11 children often express a preference to trace the art of others.
- Between ages 11-14 often children prefer to draw geometric shapes rather than people. There is usually a strong usage of color.

#### Symbols in Drawings/Art work

- Balloons = need, desire for dominance in family
- Beds = sexual or depressive themes especially if figures are all in bed(s)
- Bicycles = common activity
- Brooms = symbol of mother figure, household cleanliness
- Butterflies = search for love and beauty
- Buttons = dependency, unmet needs
- Cats = ambivalence with mother, conflict, competition
- Circles = schizoid if preoccupations with circles
- Clowns = inferiority
- Cribs = jealousy of sibling

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- Dangerous objects (knives, hammers etc.) = anger
- Drums = displaced anger
- Flowers = need for love or love of beauty
- Garbage = issues with birth of new sibling, competitive, feeling guilty about rivalry
- Heat (sun, fires) = need for warmth and love
- Hanging lights on suspended chain = disturbance in the family,
- possible sexual issues
- Horses = common for girls
- Jump rope = protection from others if self is jumping; rivalry if someone else is jumping
- Kites = escape, freedom
- Ladders = tension

- Lawnmowers = for boys, competition
- Leaves = dependency
  - Collecting Leaves = collecting warmth
  - Burning them = needs not met
- Logs = hyper masculinity
- Moon = depression
- Motorcycles = power, dominance
- Paintbrush = extension of the hand, often associated with
- punishing figure
- Rain = depression
- Refrigerators = deprivation and depression, cold
- Snakes = phallic symbol, sexual tension
- Snow = depression and suicide
- Stars = deprivation, pain

- Stop signs = attempts at impulse control
- Stoves = nurturance and oral needs
- Sun = stereotypical in young children
  - Darkened sun = depression
  - Figures leaning towards it = need for warmth
    Figure far away = rejection
- Trains = needs for power, usually in boys
- Vacuum = unmet dependency, power, control; if mother using than she is seen as powerful
- Water themes = fantasy; depression
  - Figure floating in water = depression
  - Burns, R.C. & Kaufman, S. F. (1972). Actions, Styles and Symbols in Kinetic Family Drawings(K-F-D): An Interpretive Manual. New York: Brunner/ Mazel.





#### House

- This can be useful in order to assess family issues. You are looking for the overall feelings of the household.
- Usually only includes the exterior unless you request otherwise.
- Chimney = warmth and affection
- Emotional Indicators (Oster & Montgomery, 1996):
  - 1. Details
    - A. Essentials (normal drawing)
      - At least one door, one window, one wall, a roof, a chimney
    - B. Irrelevant (e.g. shrubs, flowers, walkway)
    - Needing to structure environment more completely, which is sometime associated with feelings of insecurity or needing to exercise control in interpersonal contact.

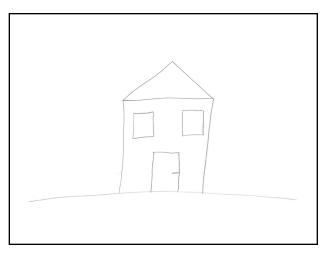
67

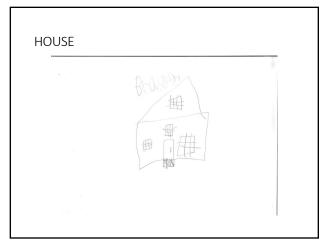
#### • 2. Chimney - Symbol of warm intimate relations, sometimes seen as a phallic symbol of significance.

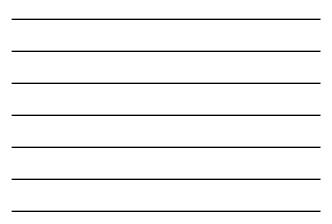
- A. absence of chimney
- Lacking psychological warmth or conflicts with significant male figures
  B. overly large
- Overemphasis on sexual concerns and/or possible exhibitionistic tendencies
   C. smoke in much profusion
- Inner tension
- 3. Door
  - A. above baseline, without steps
  - Interpersonal inaccessibility
  - B. absence of door
  - · Extreme difficulty in allowing accessibility to others • C. open
  - · Strong need to receive warmth from external world
  - D. very large
     Overly dependent on others
  - · With lock or hinges
  - defensiveness

- 4. Fence around the house
- Need for emotional protection
- 5. Gutters
- Suspiciousness
- 6. Perspective, from below
- · Either rejection of home or feelings of an unattainable desirable home situation
- 7. Perspective, from above
- Rejection of home situation
- 8. Roof
  - A. One-dimensional (single line connecting two walls)
    - Unimaginative or emotionally constricted
  - B. Overly large
    - · Seeks satisfaction in fantasy

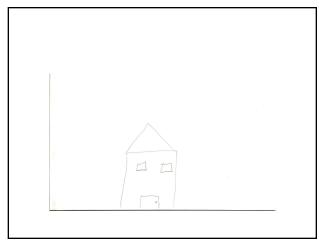


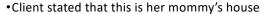






- •Patient stated that this was my house, the therapist.
- His favorite room in the house was the attic because you "there is so much you could put up there". When asked about what could be put up there the patient replied "old stuff".
  Asked him about what kinds of old stuff and he stated "I don't know". Further attempts to get him to elaborate failed.





- •She said that she, her "sister", her mom and David (father figure) live there
- •She said that her favorite room is "my room" because it "has our beds so we can sleep"
- •There was no room that she did not like

#### Tree

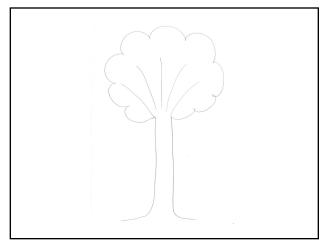
- The tree represents other potentially unconscious feelings usually towards the self.
- It is easier to project feelings onto an inanimate object.
- Emotional indicators (Oster & Montgomery, 1996):
  - 1. Extremely Large Aggressive tendencies
  - 2. Tiny Tree

  - Feelings of inferiority and insignificance
  - 3. Faint Lines • Feelings of inadequacy, indecisiveness
  - 4. Tree composed of just two lines for trunk and
  - looped crown
  - Impulsivity, variable

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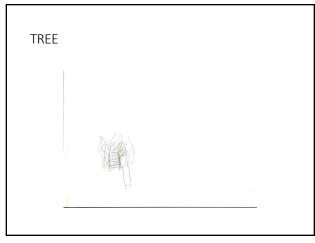
- 5. Exaggerated emphasis on trunk • Emotional immaturity
- 6. Exaggerated emphasis on crown • Inhibited emotionally, analytic
- 7. Exaggerated emphasis on roots
- Emotional responses shallow, reasoning limited
- 8. Scar, knothole, broken branch
  - Associated with trauma, e.g. accident, illness, rape (time determination in relation to length or tree)
- 9. No ground line
  - Vulnerable to stress
- 10. Ground line present, no roots
  - Repressed emotions
- 11. Shading, excessively dark or reinforced
  - Hostile defenses or aggressive behaviors

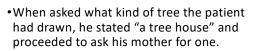
- 12. Fine, broken lines Overt anxiety
- 13. Knotholes
  - A. Small or diamond-shaped
  - Related to vagina
  - B. Small and simple
  - Sexual assault or initial sexual experience • C. Outline reinforced
  - Shock impact greater
  - D. Circles inside
  - Experience in past and "healing"
  - E. Blackened
  - Shame associated with experience
  - F. Small animal inside
    - Ambivalence surrounding childbearing



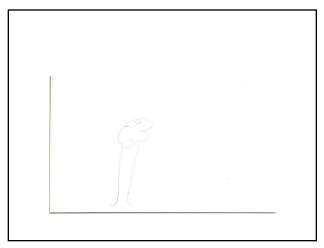








•He went on to say that he wanted one with a bed in it, a TV and an Xbox so that he could sleep out in the tree house.





•Client stated that his was an apple tree

- •She said it was in Arizona
- •She said that the tree "feels good" because it "has water".

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#### Persons

- A more direct method than the tree. Evoke conscious feelings about the self including body-image and self-concept.
- Can project emotions onto a person that they may not otherwise be able to express.
- Emotional Indictors (Oster & Montgomery, 1996):
- 1. Arms
  - Use to change or control surrounding environment
    - A. folded over chest
      - Hostile or suspicious
    - B. held behind back
      - Wanting to control anger, interpersonal reluctance
    - C. omitted
      - Inadequacy, helplessness

#### •2. Feet

- Degree of interpersonal mobility
- A. Long
  - Striving for security or virility
- B. Tiny
- Dependency, blunted feelings
- C. Omitted
  - Lack of independence
- 3. Fingers
  - A. Long and spike-like
    - Aggressive, hostile
  - B. Enclosed by loop or single dimension • Wish to suppress aggressive impulses

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#### • 4. Head

• A. Large

- Preoccupation with fantasy life, focus on mental life
- B. Small
- Obsessive-compulsive, intellectual inadequacy
- C. Back to viewer
  - Paranoid or schizoid tendencies
- 5. Legs
  - A. absent
    - Constricted, possible castration anxiety
  - B. size difference
    - Mixed feelings regarding independence
  - C. long
    - Striving for autonomy
  - D. short
    - Emotional immobility

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#### • 6. Mouth

- A. overly emphasized
- Immaturity, oral-aggressive
- B. very large
- Orally erotic
- 7. Shoulders
  - A. unequal
  - Emotionally unstable
  - B. large
  - Preoccupied with the perceived need for strength
  - C. Squared
    - Overly defended, hostile toward others

# Person Additional Emotional Indicators (Oster & Montgomery, 1996): Poor integration of parts in the figure: How frustration tolerance and impulsivity Shading Anxiety (the greater the shading, the more intense the anxiety) A.shading of face Seriously disturbed, poor self-concept B. shading of arms Aggressive impulses 3. Line Quality Sketched – insecurity, uncertainty Light – poor self-concept

Reinforced – anger; vulnerability of defenses

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- 4. Figure slanting more than 15 degrees
- Instability, mental imbalance5. Small size
  - Extreme insecurity, withdrawal, depression, feelings of inadequacy
- 6. Large Size
  - Expansiveness, positive mood
- 7. Transparencies
- immaturity
- 8. Visible teeth
  - Oral aggressiveness, sarcasm
- 9. Short arms
  - Tendency to withdraw, turning inward, attempt to inhibit impulses.

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#### • 10. Long arms

- Ambition for achievement or acquisition, reaching out toward others
- 11. Big hands
- Acting out behavior
- 12. Hand cut off
- Troubled, inadequate
- 13. Profile figure
- Evasiveness and paranoia; withdrawal
- 14. Disheveled hair
- Sexual concerns; confusion
- 15. opposite sex drawn first
  - Sexual identity problems; strong emotional attachment to opposite sex.
- 16. elaborate belt or other emphasis on waist area
   Sexual conflict; covert tension

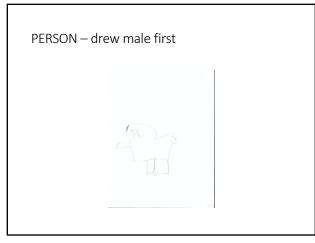
# Emotional Items in Drawing

Descriptometion of parts	<ul> <li>Big hands</li> </ul>
Poor integration of parts	Hands cut off
<ul> <li>Shading of face</li> </ul>	
<ul> <li>Shading of body and/or limbs</li> </ul>	<ul> <li>Legs pressed together</li> </ul>
<ul> <li>Shading of hands and/or neck</li> </ul>	Genitals
Gross asymmetry of limbs	<ul> <li>Monster or grotesque figure</li> </ul>
<ul> <li>Slanting figure</li> </ul>	<ul> <li>3 or more figures spontaneously</li> </ul>
Tiny figure	Clouds
Big figure	No eyes
Transparencies	No nose
Tiny head	No mouth
Crossed eyes	<ul> <li>No body</li> </ul>
Teeth	No arms
Short arms	<ul> <li>No legs</li> </ul>
Long arms	No feet
Arms clinging to body	No neck
Koppitz, E. M. (1968). <i>Psychological Evalua</i> <i>Drawings</i> . New York: Grune &	

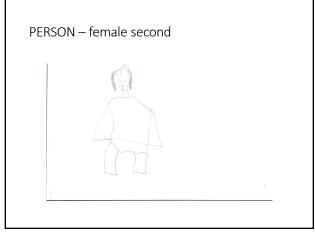
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Serious Indicators in Drawings

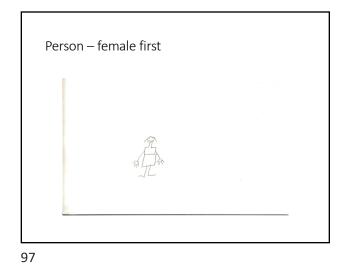
- Explicit drawing of genitals
- Concealment of genitals
- Omission of genital area
- Omission of central part of figure
- Encapsulation of drawing
- Fruit trees added
- Opposite sex drawn first
- (Peterson & Hardin, 1997)

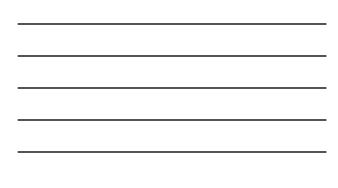


- When asked to draw a picture of a person, he first asked if he should draw a boy or a girl.
- He first drew this figure.
- He stated it was his father who was sad. When asked why his father was sad, he changed the name of the figure in the drawing to a character with whom I was not familiar. He did say that the character was bad. He said that the character was sad because he had not attacked anyone.



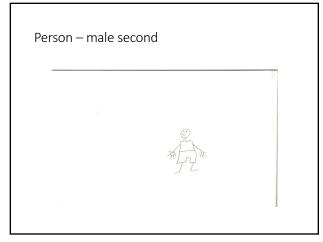
- •Next he drew this figure and stated that it was his mother.
- •He said that she was happy because "I was listening in school" a big part of why he presented for counseling.





•Client stated that this was her mom

- •Her mom is age 30
- •She stated that her mom is "happy". She is happy because "she has me, my sister and David"



- •This is Gary who is bald
- Client stated that he is kind of an uncle. Mom interjected that he used to rent a room from them a couple of years ago and is a good family friend. She was surprised though because client had not seen him since last Christmas which was about 9-10 months earlier.
- •Client stated that he is feeling "happy" because "he met us".

#### FAMILY DRAWINGS

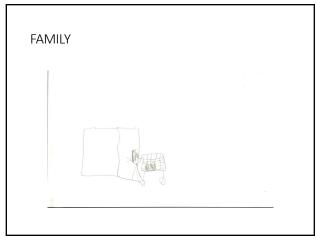
- This not only helps to assess the feelings associated with the family but can also help to reveal the individual's place within the family.
- If the child puts themselves larger or closer to the parent(s), they may view themselves as more important than any siblings.
- If a child feels isolated from the family, they may draw themselves on a different side of the page away from everyone.
- If omit self = rejection (more common with adopted children)
- Common to draw passive positions such as watching TV or sitting at the table eating.
  - Look at the table is it bare?

- If omit siblings, can be representative of competition.
- Look for the proportions with which each member is drawn = dominance
- Facial expressions of each family member
- A variation can be asking the child to draw their family in a circle. Look for:
- How close are the parents to one another?
- What barriers are there to communication?
- Who is in the center?
- Is the child smaller or larger compared to other drawings?
- Are there alliances as seen by proximity?

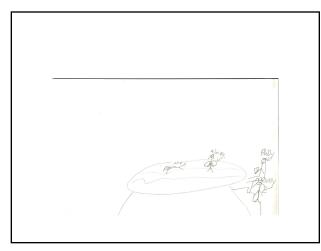
#### Actions between Figures

- Ball = rivalry, anger
- Self not playing with ball = jealousy towards figure with the ball
- Whole family playing ball = willing to engage with family
- Getting dirty = bad or negative feelings
- Mother cooking = most common; meets child's needs
- Father reading, paying bills or playing = most common and normal
- If all stick figures = regress, resistant
- Barriers = rivalry

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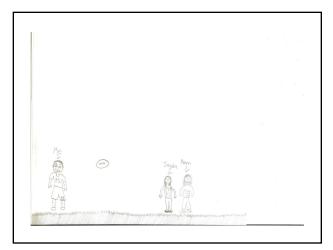
- When asked to draw a picture of his family doing something, this is the image he drew.
- At first when he said he was finished, there were no people in the drawing.
- I asked him if he were done, he said "yes" and then said "wait" and took the paper back.
- He then inserted what he stated was his mother. He explained that his mother was grocery shopping. When asked he went on to explain that he was at school, his father was at work and his sister was at school.
- A concern with this patient is his need for attention and his father's lack of involvement.







- Client stated that this is a picture of her family at the pool
- She said that she is swimming
- Her sister is in the inner tube, floating. She added that it is a Princess inner tube
- Her Dad, David, is reading a book about cars
- Mommy is getting into the pool
- She said that they family is "happy" because "we got to go swimming in the hot tub. It's cool and hot".







More Family drawings:

Draw your family as animalsDraw your family as furnitureDraw your family as buildings

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Parent-Child drawing

- •This is another type of drawing that is based in Object Relations Theory.
- •Object relations theory would instruct the child do complete a mother-child drawing.
- •Using this with either parent can not only reveal interesting information about the self but of course about the relationship.

Draw a person in the Rain

- The idea behind this drawing is that you can elicit interesting feelings of self-expression by having the child place themselves in a usually perceived as unpleasant environmental situation –rain.
- Has been found to be a good measure of stress.
- The amount of rain drawn is an indicator of the amount of stress the child is feeling.
- Their ability to cope with the stress is measures by what is drawn to protect them from the rain.

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### School Drawing

- Self doing academic work = academic achievement
- Self doing other things = lack of academic achievement
- Recess, lunch = favorite time of day
- Large number of peers = lesser academic achievement
- Lack of people = avoiding social interactions
- Large self = positive academic achievement
- Large teacher = feeling inadequate in school
- Emphasis on details of room or building = need for structure, avoiding social interactions
- Bird's eye view = distant and socially isolated

- Outdoor picture of school = often dislike school
- Apples = dependency; oral needs; issues with authority in school
- Chalkboard = writing on them may indicate feelings towards academics; inadequacy in school
- Clock = structure, order, pressure
- Principal = issues with power, structure, rules; may imply need for male figure
- School bus = avoidance, dislike, conflict, isolated for other children
- Prout, H. T. & Celmer, D. S.(1984). A validity study of the Kinetic

school drawing technique. Hoboken, NJ: Wiley.

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### If resistant to drawing...

- Often older children and teenagers are resistant to drawing.
- Ask the individual to draw a story with you. You and the child each take turns drawing a line. This helps to break resistance because the emphasis is on the interaction between the client and the therapist rather then on the client drawing.
- When done, talk about the drawing and what you have created.

- Another technique that can work is having the individual just scribble draw on a piece of paper.
- Than have the client look at the paper and see what picture they can make if they erase some lines.
- This often helps to break down inhibitions and resistance.
- It also helps clients who have done counseling before and are expecting the usual. You are working with them do to something different.

## **BOARD GAMES**

- There is very little research about the effectiveness of using Board Games in Play therapy.
- Often it is used for observational purposes.
- Games can be useful to talk with kids while playing in order to have them more relaxed and their guard down.
- There are games created for the purpose of using in therapy such as the Talking, Feeling and Doing Game, The Ungame, The Social & Emotional Competence Game (which can be supplemented with The Social & Emotional Competence Card Game – formerly known as My First Therapy Game), Character Challenge, and The Self-Esteem Game: The Game Where everybody is a Winner!

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## BOARD GAMES (CONT.)

- It can be interesting to note which game a child selects. In doing so, children are exhibiting for us aspects of their personality.
- Electronic games are making their way into the therapy room. I find that this does not lend itself for therapy work. It absorbs too much of the child's attention. It is also hard to break the rules or manipulate the game.
- In addition, it is recommended by Bellinson (2002) that we as the therapist not cheat either. By this, she means that we should not alter our actions in order to allow the child to win.
- Discuss cheating with a child but do not try to control their behavior.

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• It is so important to talk with children while playing and use their actions as a means of addressing other issues.

- A child may rush you to go when it is your turn.
- If cheating, talk about their ability to win.
- Why is it hard to sit still?
- Is the child taking their time to think before moving?
- Address the level of competitiveness.
- Talk about the determination to win
- What does it mean to lose?
- Being considerate of the other person such as taking turns who goes first.

- According to Reid (2001), there are 10 therapeutic "elements" to using games in therapy sessions:
  - 1. Therapeutic Alliance: Puts the client and therapist on a equal playing field.
  - 2. Pleasure: They have fun but they see you having fun with them.
  - 3. Diagnosis: Learn about the child's social and emotional skills. We can learn to understand
    - Cognitive strategies
    - Response to feedback
    - Drive to mastery
    - Sense of competence
    - Self-control
    - Attention spanFrustration tolerance
    - Competitive drive
    - Willingness to follow rules
    - Ability to deal with pressure
    - Reaction to success and failure
    - Bow, J. N. & Quinnell, F. A. (2001). "Therapeutic Uses of Fine Motor Games" In Schaefer, C. E. & Reid, S. E. (Eds.) (2001). Game Play: Therapeutic Use of Childhood Games. New York: John Wiley & Sons, Inc.

- 4. Communication: Although some reduce conversation, it is good to discuss rules, goals, strategy and use therapy games.
- 5. Insight: The therapist can observe and comment on the behavior of the child. The therapist can communicate connections between observed behaviors and things that the therapist has learned about the child.
- 6. Sublimation: Requires sublimation of impulses and desires.
- 7. Ego Enhancement: The child can learn to master impulses. They can also learn to plan, strategize, and work towards a goal.
- 8. Reality Testing: The manner in which a child reacts to the game and rules can give as an idea if their judgment and expectations are grounded in reality.

- 9. Rational Thinking: Games that require skills also require rational thinking to succeed.
- 10. Socialization: Most games are hard to play without being social. It is a great way to help children develop social skills.
  - Reid, S. E. (2001). "The Psychology of Play and Games." In Schaefer, C. E. & Reid, S. E. (Eds.) (2001). Game Play: Therapeutic Use of Childhood Games. New York: John Wiley & Sons, Inc.

- According to Yorke (2012), game play facilitates therapy in many ways including:
  - Forming a positive relationship with a caring adult: empathize with them while we play and we build a relationship.
  - Increase expectation of change/inspiring hope: We bring an enthusiastic attitude to play with the child. We convey fun. Be convey faith and hope and this also conveys that things can change and they can change.
  - Catharsis and labeling of feelings: The emotions that arise during play are processed. This is analogous to previous experiences.
  - Corrective emotional experience: Play will trigger a variety of feelings. We will usually react differently than the other adults in the child's life. We accept them and help to process them.
  - Insight and working through: Games that are meant to be used in the therapy session help children to connect with and communicate feelings. Insight is not needed and issues can often be addressed indirectly.

- Learning alternative problem solving: Learn new skills directly and indirectly
- Development of an internal structure: We can empathically connect with the child during game play. This can help them to develop a strong and positive sense of self.
  Yorke, G. (2012). The Use of Board Games in Play Therapy. *Play Therapy*, 7 (3), 20-23.

- To ensure that play is therapeutic, Yorke recommends the following:
   1. Resist the urge to win: We may be competitive. Be aware not to take advantage of a child's incompetence. Maintain a therapeutic attitude.
  - 2. Resist the urge to let the child win: It is reality that people will win and lose. Children need to learn to do both. Losing teaches frustration tolerance, can motivate the child to try harder, and teaches how to be a good sport. We can learn a lot about a child who has a hard time losing.
  - 3. Stay alert for opportunities to interpret and teach: Children usually let their guard down during play. Observe, interpret and interact especially with therapeutic games.
  - 4. Role play new skills: Therapeutic games often present coping and problem solving skills. Practice them immediately after they come up in the game with the child.
  - 5. Engage in therapeutic conversation: Address issues and concerns as they arise.
  - Yorke, G. (2012). The Use of Board Games in Play Therapy. Play Therapy ,7 (3), 20-23.

## Rule Breaking

- Styles of Rule Breaking (Bellinson, 2002):
  - Look for the answer or at your cards
  - Repeatedly throw the dice until get the number they need
  - Actually pick up the die and put it on the number
  - May try to hide what they are doing
  - Pretend they made a mistake like miscounting the number of spaces moved
  - Do they cheat long enough to be ahead or until the end of the game?
  - Understand the behavior and try to interpret it is it consistent with what they do at school, home etc.?
  - Children who cheat earlier in a game are often more needy

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## **Rule Breaking**

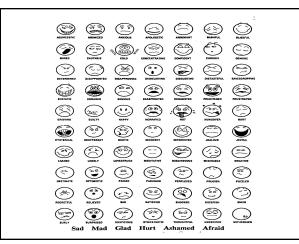
- Most children who understand rules start by following them.
- Children will often then test you.
- We need to know the rules of a game so that a child does not catch us off guard by saying the rules are one way when in reality they are another.
- Sometimes children will make new rules that are their own and will follow those this is being creative.
- When a child pulls out a game, ask them how they want to play.
- Rather then alter our moves, give children choices such as "If you move there, you leave a double jump for my checkers." Or, "I know the [Clue] answer, should I say it or keep playing?" (Bellinson, 2002. pg. 75).

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## FEELINGS FACES AND EMOTIONS

- Many children will not respond when asked how they feel about something.
- Offering pictures of faces that depict simple emotions from which they can choose better enables the child to express feelings.
- You can ask children to tell a story about a certain face that you select for them.
- Young children often do not understand that you can have two conflicting emotions at the same time such as love a parent while being very mad at them – hence why children yell "I hate you"!
- Use the cards to model the presence of multiple feelings as well as the communication of feelings.
- Have the outline of a head have child draw the face with the emotion.

- Also, using a mirror, model for children how to express an emotion and than have them do it.
- Use story books that depict certain emotions as well.
- Look at the picture and have the child identify what the emotion is. Then have them talk about a time that they felt that emotion. You can use this to help them in regards to empathy – have them tell a story of when someone they know felt that emotion (Phil).
- Make a Feelings Mask the face is how they feel. You can also do a two sided mask where on one side is how people see them and the other is how they really feel.
- Emotions Hangman
- Emotions Charades
- Great website: <u>http://consciousdiscipline.com/</u>
- And <a href="http://www.momendeavors.com/2015/06/printable-emotions-sorting-game-disney-pixar-inside-out.html">http://www.momendeavors.com/2015/06/printable-emotions-sorting-game-disney-pixar-inside-out.html</a>
- http://jamonkey.com/inside-out-emotions-wheel-printable/



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## MAKE IT REAL

- For many children, coping with intangible issues is hard such as illnesses or irrational thoughts.
- Have the child draw what it is and make it real.
- This way the child has something that they can get mad at rather then some abstract intangible concept.
- Example: D and his cancer.

# Specific techniques for specific issues

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## Anger (OCD)

- Have children draw what makes them angry
- Draw safe ways to get/express their anger
- If you need to make it more fun, draw a volcano and in the volcano write what makes them angry.
- Also you can draw a bomb and on the fuse, write what makes them angry.
- Role play so children can practice what they can do when they get angry – purposefully role play situations where the child typically gets mad.
- Have the child draw up to four people in their life and what they do/look like when they are angry.

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•Have the child draw where they feel their anger or what there anger looks like – make it go away by drawing over the picture such as covering it with a crayon.

•Use foam noodles – like from a pool. Have sword fights.

## ADHD

- Impulsivity: How do you make Time Out Fun?
  - A short break to stop and think
  - In sports it is used to stop the action and allow the team to regroup then go back to playing. Usually teams use this
- when things are not going well. • Example: Vince and Football
- Allowing children to have a fidget toy can be very useful.
- This can help to keep their hands busy and thus they focus better.
- Mouse Trap
- Run Yourself Ragged:

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## Depression and self-esteem

- Often children have self-esteem issues because they are being bullied or picked on in school.
  - Talk with children about where their feeling are and have them draw a picture of their heart with the feelings they have written in it.
  - Then talk to the child about how they have a shield. Not only can they hold that shield and see it in their mind which will protect them from the hurtful things others say and do have the child draw the shield in session as well.

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## Trauma/PTSD

- According to Gil (1991): "Because posttraumatic play often occurs in secret, the therapeutic environment must create a climate for this type of play. Once the play begins, it must be carefully monitored for alterations, and at some point interrupted with suitable interventions" (pg. 72).
- Children will often recreate and act out the traumatic event.
- You must develop a strong therapeutic relationship first.
- Play is usually very literal and repetitive.
- They can be active and take control of the situation in the office.

## Trauma/PTSD (cont..)

- If play remains totally repetitive over time (8-10 times), intervene:
   "Ask the child to make physical movement such as standing up, moving arms or taking deep breaths. Physical movement can free up emotional constriction.
  - Making verbal statements about the child's posttraumatic play, suspending the self-absorption and rigidity of play.
  - Interrupting the sequence of play by asking the child to take a specific role, describing the perceptions and feelings of one of the players.
  - Manipulating the dolls, moving them around, and asking the child to respond to 'what would happen in...'.
  - Encouraging the child to differentiate between the traumatic event and current reality in terms of safety and what has been learned.
  - Videotaping the posttraumatic play and watching the tape with the child, stopping it for discussion for what is observed (Gil, 1991, pg. 74).

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- There needs to be a resolution.
- Do not hesitate to take an active role.
- Use guided imagery of deep relaxation exercises to help debrief.
  If the play seems totally unorganized, it may be too non-direct and
- need more structure.
- According to Perry and Hambrick (2008), in order for children who have experienced trauma to build trust and bond with you, often experiences need to be repeated – this can be done with music, dance, movement etc.
  - Perry, B. D. & Hambrick, E. P. (2008). The neurosequential model of therapeutics. *Reclaiming Children and Youth*, 17(3), 38-42.
- Other techniques include:
  - Therapist using a puppet and telling a story in which the main character experiences the same kind of traumatic event as the child.
  - Use material that relates. For example, a child that was raped in a park you
    might have them color a picture of a park, play with dolls in a park scene,
    make a park in the sand tray etc.

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#### Play Therapy with families and couples

- Drawings can help for many of the same reasons previously discussed.
- Drawings can be used as an assessment/evaluation tool as well as a therapeutic tool with families and couples.
- For the first drawing, have each family member do a free drawing promotes an opportunity to introduce self to therapist and express self.
- Then have them each do a family drawing. This enables the therapist to see the differences in how each member perceives the family.

Have couples and families use the emotions poster to help express feelings – positive and negative. Give them a copy of it to take home.
Do scribble drawings and have them each make it into a picture. Next have the family do one together.
All of these promote discussion.

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## Group Play Therapy

- •Using Board Games:
  - •Watch the dynamics
  - If you do not intervene if rules are broken or stretched, than you are sending the message that it is ok to cheat. However, if you do than you are policing which is not therapeutic either.
  - •Use games where no one wins but everyone plays.
    - •Use the cards from Talking, Feeling and Doing game without the board.

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### Group Play Therapy

Charades

- No teams and no points
- One child acts something out
- Write what you think it is on a piece of paper or guess and discuss
- Assign things that the children can relate to such as (Bellinson, 2002):
  - You are taking a test and the teacher calls your name and claims you were cheating
  - You won the lottery
  - You are walking down the street when a stranger walks up to you and says "hello"

#### Groups

- Drawings can be great methods for communication in the group treatment setting.
- Often drawing is an easier means of communication for adults in a group setting.
- Can be used individually or as teams.
- When beginning a group, self-portraits can be a great way to do introductions.
- A unique tool is to have each member add to a drawing, pass it, add to it and pass it. Another is a group mural. All helps to develop group cohesiveness.
- The younger the group members, the more detailed the instructions need to be.

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### Groups

- Using emotion cards: put on various pieces of paper, different difficult situations – personalize them to the group. Have members randomly select a situation. Then they have to pick the emotion card(s) that correspond to the feelings they would have if in that situation. You can do this by having them draw the feelings as well. The therapist can give a situation to the group as whole, too.
- Draw an emotion card (unseen) and make up a story that could evoke that emotion. You can also have group members share a true personal story for that emotion.
- Use the emotions cards and play telephone except use facial expressions.
- Emotions charades is great for social skills groups.

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#### The Play Therapy Space

- There are no hard and fast rules to setting up a play therapy space. However, you want the child to have choices, for it to be comfortable and to appear fun.
- What a child selects to play with can be very telling. Here is a list of toys and perceived meanings similar to dream interpretation:
  - Airplane = escape, distance, speed, freedom
  - Animals (wild) = aggression, fear, survival, power, strength
  - Animals (domestic) = protection, family, compliance, dependency
  - Baby bottle = regression, nurturing, dependency, babies, siblings
  - Ball = interaction, relationships, trust, competition
  - Binoculars = perspective, finding, searching, intimacy

- Blanket = regression, security, protection, boundaries
- Blocks = defenses, boundaries, construction, limits, rigidity, closure, structure, barriers, protection
- Boats = support, balance, security, balance
- Books = secrets, past, future, present, identity, knowledge
- Box = secret, hidden, control, boundaries, containment, gift
- Broken toy= loss, defeat, adjustment
- Camera = evidence, change, memory, knowledge
- Cars = mobility, power, escape, conflict, safety, protection, travel, defense
- Chalk/Dry Board = environment, world, creation, emotional expression, integration, creativity
- Clay = aggression, manipulation, creation, self-esteem, expression, pressure

- Costumes = communication, fantasy, impulses, disguise • Gloves = avoiding, distance, safety, control
  - Hats = identity, expectations, fantasy, power, denial
  - Masks = relationships, communication, anonymity, fantasy, impulses
  - Sunglasses = hiding, avoidant, distant, safety
    Wigs = relationships, communication, anonymity, fantasy, impulses, disguise
- Dinosaurs = past, history, death, power, extinction, fear, survival, loss
- Doctor's Kit = healing, repair, respect, power, life/death, pain, body image, crisis, change
  - Syringe = intrusion, violation, pain, healing, fear, contact
  - Stethoscope = internal feelings, validation, undisclosed
  - Thermometer = internal feelings, need for help, crisis
  - Blood Pressure = internal issues, anger, state of mind,
  - internalized feelings, need for change
  - Operation = crisis, intervention, intrusion, risk, control, vulnerability, healing

- Dishes/Cooking = nurturing, security, attention, neglect
- Dolls = self-identity, regression, sibling, competition, friendship, closeness
- Family Figures = authority, power, nurturing, protection, perpetrator, competition
  - Male = issues with father, modeling, male figures (teacher, brother etc.)
  - Female = Issues with mother, modeling, female figures (sister, aunt, teacher etc.)
  - Girl = self, sister, identity, image, friend, peer, social
  - Boy = self, brother, identity, image, friend, social
  - Baby = nurturing, sibling, competition, regression, needs, past
- Finger Paints = contact, involvement, impact, grounding, regression, security
- Flashlight = control, secrecy, fear, searching, dependency
- Games = control of life, competition, compliance, structure, resistance, change, competency, cooperation
- Grooming = self-image, self-concept, change, thoughts, caring

- · Guns = aggression, control, anger, hostility, power, death, pain, protection, boundaries
- · Keys = secret, control, containment, unknown, boundaries
- Kitchen Set = home, nurturing, care, neglect, sibling conflict, family
- Knife = utensil, aggression, power, defense, protection, sexual, pain
- Lights = control, power, secret, escape, hiding, denial, change
- Magic Wand/Crystal Ball = fantasy, wishes, goals, change, desire, future • Mirror = self-image, self-concept, memories, past, change, thoughts, validation
- Models = consistency, completion, motivation, focus, persistence, goal, validation
- Money/Poker Chips = security, power, control, loss, cheated
- Monster Figure = fear, secretive, power, fantasy, aggression, conflict, revenge, attack
- Musical Instruments = self-expression, internal, communication, creativity, contact
- · Paints = distance, expression, inaccessible needs, view of world

- Pillow = bed, safety, territory, throne, parent, aggression, relaxation
- Playing Cards = money, control, power, secret, spontaneity
- Puppets = relationship, communication, anonymity, fantasy, impulses, disguise
- Puzzles = problem solving, decisions, completion, accomplishment, integration, solving
- Sand = construction, destruction, environment, community, feelings, change, creativity
- Bo Bo Doll = aggression, conflict, perpetrator, power, revenge
- Shark = aggression, fear, perpetrator, power
- Soldier = conflict, attack, aggression, force, life/death, struggle
- Sword = aggression, distance, conflict, defense, protection,
- power • Tape Recorder = self, relationship, evidence, existence,
- validation, consistency, control, observation
- Teddy Bear = warmth, nurturing, security, companionship, self, protection

- Telephone = communication, distance, safety, control, power, disconnect
- Tinker Toys/Legos = structure, construction, completion, closure, goal attainment
- Tools = resources, change, construction, security, authority, confidence, decisions, problem-solving
- Water = flexibility, freedom, enuresis, anxiety, sadness, depth, internal, regression, unconscious.

## AREAS OF CAUTION!!

- Be prepared to work with the family/parents. You need to assess their function and dysfunction. Especially in cases of abuse, there will be individual, family, couples etc. work that is likely needed.
- With children you want to work with any other possible resources and people in the child's life. This promotes success. Work with the school, grandparents, foster parents, Child Protective Services, pediatrician etc.
- Have realistic goals especially for lower functioning families.
- Remember the environment that they child lives in. If you are working with a child to learn to speak up for themselves knowing that this will result in punishment at home, you are setting the child up for failure.
- Sometimes coping skills for dealing with the dysfunctional family is the most vital thing you can help a child learn.

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### AREAS OF CAUTION!!

- Acting out and Sexualized behaviors
   Be careful using touch you can be miscommunicating or making the
  - child uncomfortable
  - Talking/using emotions cards can be very useful in order to help the child to learn to associate proper feelings with experiences.
- Selecting the right medium
  - For some children with tactile issues, some mediums such as play dough and finger painting can be too stressful
- Countertransference:
  - Always be aware of our feelings. It is common for children to evoke strong responses in us as we watch them suffer perhaps because of talking to police etc.
  - Watch so that no behaviors arise outside the therapeutic boundaries.
     With abused children especially, boundaries as very important. We need to make sure to strictly adhere to them no matter how much a child may unknowingly pull on our heart strings.

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### AREAS OF CAUTION!!

• Children who have been abused:

- "Any plan for the treatment of child abuse must be designed to create a safe environment for the child and to modify the potentiating factors underlying the maltreatment...An effective treatment program must deal specifically with the parental abuse-proneness, the characteristics of the child that make him vulnerable, and the environmental stress that triggers the abusive interaction" (Green, 1988, pg. 859).
- When the child is still living with the abuser, it is good to assess what triggers the abuse and work with the parents in order to address these.
- If the parents are working with their own therapist, collaborate with that therapist.
- Be prepared to provide other resources and information from shelters and safe houses to other resources for families experiencing abuse.

## AREAS OF CAUTION!!

• Take care of yourself. It is so important to practice good self-care. Working with children involves a great many elements and can be very draining. Make sure to take care of you so that you are at your best when taking care of others.

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### Resources

- Association for Play Therapy • http://www.a4pt.org/
- The Child Anxiety Network
   www.childanxiety.net
- Children's Center for OCD and Anxiety
   www.childocdandanxiety.org
- National Institute of Mental Health
- Bethesda, MD
- •(301)496-4812
- •www.nimh.gov

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#### Resources

- Association for the Advancement of Behavior Therapy
  - New York, NY
  - (212)647-1890 or 800-685-AABT
  - mailback@aabt.org
    www.aabt.org/aabt
  - www.aaut.org/aapt
- American Psychological Association
   Washington, DC
  - vvasnington, DC
     (202)336-5700
  - <u>Public.affairs@apa.org</u>
  - www.apa.org
- American Psychiatric Association
- Washington, DC
- (202)682-6000
- mbennett@psych.org

#### Resources:

- Happy Seeds Gluten Free Products:
- http://happyseedsglutenfree.com/index.php/?SID=34df7b242370bebfc2555 1e166a3e64f
- Center on the Social and Emotional Foundations for Early Learning: http://csefel.vanderbilt.edu/
- Conscious Discipline
  - <u>http://consciousdiscipline.com/</u>
- Child Therapy Toys
  - http://www.childtherapytoys.com/store/index.html Use coupon code: Christine

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 <u>http://www.momendeavors.com/2015/06/pr</u> intable-emotions-sorting-game-disney-pixarinside-out.html

•www.jurassicsand.com

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#### • THANK YOU VERY MUCH!

- I truly hope that you have found this presentation informative and useful. If I
  can be of any further assistance, please do not hesitate to contact me.
- Sincerely,
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