

Play Therapy: Three Essential Skills



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Yes! Play Therapy is an EBP!

See <https://www.a4pt.org/page/EvidenceBased>



Effective June 2017, the following models of
play therapy are listed as EBPs:

- Child-Centered Play Therapy
- Child Parent Relationship Therapy
- Filial Family Therapy
- Adlerian Play Therapy
- Theraplay ©



Why Play Therapy Works!

- Children are not miniature adults. They don't talk, they do.
- Play occurs in all cultures, in all places, at all times.
- Play is complete in itself.
- "Play is the way children learn what no one can teach them" (Frank, 1982, in Landreth, 1991, p. 8).
- Adults have the capacity for symbolic expression with metaphors and similes, but children do not yet have the ability for abstract language.
- Adults are more comfortable talking, so we talk. Children are more comfortable playing, so they play.
- "Children's feelings are often inaccessible at a verbal level" (Landreth, 1991, p. 13).



Key Points about Materials



- Deliberately chosen—"Selected not collected."
- Developmentally appropriate
- The simpler, the better
- Respect your institution's policies/requirements about toys and materials.
- You may choose ONE toy to not have in your playroom.
- Don't put in toys you can't bear to see being hurt or stolen
- Broken 'real life' items can make great toys.
- You can spend as much or as little as you want on toys and materials.

Landreth (1991) recommends avoiding:

- ☒ Electronic toys
- ☒ Broken toys
- ☒ Board games
- ☒ Toys that require adult assistance to operate

(Kottman, 2001; Landreth, 1991)

Tracking—The Most Basic Skill of Play Therapy



Description: The therapist states in a non-interpretive and/or non-judgmental way what the child is doing in the playroom.

Parallel: There is no direct parallel in talk and/or adult therapy for the skill of tracking.

Purposes:

- To let the child know that the adult is paying attention to what they are doing and to what they might be feeling.
- To accustom the child to the adult's presence in the play session.
- To accustom the child to the adult's attention to their play, and hence, their thoughts, feelings, and behavior.
- To help the child learn that communication will be an important part of the play therapy process.

Family/Nurturing Toys	Scary Toys	Aggressive Toys	Expressive Toys	Pretend/Fantasy Toys
Purposes <ul style="list-style-type: none"> • Build relationships • Explore and express relationships • Represent situations outside the playroom 	Purposes <ul style="list-style-type: none"> • Express fears • Explore ways to cope with fears • Express the impact of fears 	Purposes <ul style="list-style-type: none"> • Express anger • Protect themselves from fears • Explore power struggles • Express and explore need for control 	Purposes <ul style="list-style-type: none"> • Express emotions and creativity • Practice problem-solving • Practice and enhance mastery • Practice and enhance self-control • Practice and enhance self-regulation 	Purposes <ul style="list-style-type: none"> • Express feelings • Explore roles with behaviors • Act out situations and relationships from outside the playroom
Examples <ul style="list-style-type: none"> • Dollhouse • Animal families • People puppets • Blankets • Pots, pans, dishes • Play kitchen • Baby dolls • People figures 	Examples <ul style="list-style-type: none"> • Fierce predators: dinosaurs, lions, monsters, sharks, insects, reptiles, wolves • Hospital toys • Cars and rescue vehicles • Weapons 	Examples <ul style="list-style-type: none"> • Toy soldiers and military vehicles • Shields • Weapons • Bat and balls • Pairs of adversaries: cowboys and Indians, pirates, astronauts and aliens, police figures 	Examples <ul style="list-style-type: none"> • Paints • Crayons, markers, chalk • Paper • Construction paper • Glue • Scissors • Clay 	Examples <ul style="list-style-type: none"> • Masks • Jewelry, crowns • Magic wand • Medical kit • Telephones • Blocks, toy tools • Trucks • Hard hats • Play kitchen • People figures



Two Methods of Tracking

1. Describe what the child is doing
2. Describe what the toy is doing

Deciding which tracking method to use involves a number of factors:

- Your awareness of the child and the presenting or observed needs OR strengths
- Your theoretical orientation
- Your personal style
- The timing of the session

In general:

- Track objects in the beginning and the child later
- Watch the child's reaction to initial tracking statements and adjust accordingly
- Keep in mind:
 - Avoid labeling toys or actions.
 - Good tracking is not easy.

Getting your tracking "in sync" with the child's play will take practice and constant adjustment.

(Kottman, 2001)

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Reflecting Content—Talking the Talk with Toys



Description: The therapist restates what the child and/or the toys said, in a way that is synonymous with the child's and/or toy's original statement.

Parallel: Reflecting content is a direct parallel to the skill of paraphrasing in talk therapy.

Purposes:

- To let the child know the adult is listening to them and the toys
- To build rapport by showing sincere interest

Keep in mind:

- This skill is much harder than it seems!
- Some children may find the therapist's statements unsettling, and may object verbally or nonverbally until they are more comfortable with the therapist and the play therapy process.
- Just as in talk therapy, vary your leads and the format of your reflective statements.

(Kottman, 2001)

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Foci of Content Reflection

Directly to the child—“Your friend didn’t want to play with you at lunch even though she said she would.”

About the toy—“That doll’s friend didn’t play with her at lunch even though she said she would.”

Through or with a toy—Use a doll to say to the child’s doll, “Your best friend didn’t play with you at lunch even though she said she would.”



Key Points

YOUR STATEMENT SHOULD MATCH THE CHILD’S MEANS OF EXPRESSION!

- ✓ Use an attentive body posture.
- ✓ Avoid parroting, but avoid using words that are above the child’s developmental understanding.
- ✓ Use your own conversational intonation.
- ✓ You can easily influence a child when using this skill based on what you choose to reflect.

(Kottman, 2001)

Examples of Reflection of Content

Heidi picks up the dog puppet and says, “This dog is going to bite your hand.”

“That dog is going to chew on me.” (not leading)

“He’s going to bite me.” (not leading)

“That dog is thinking about biting me.” (leading)

Jorge throws the mother and father dolls on the floor and uses a dinosaur to stomp on them, shouting, “That’s what happens when you tell me what to do! You get hurt!”

“He is hurting those people.” (not leading)

“People who boss that dinosaur around get hurt.” (not leading)

“Bad things happen when people push that dinosaur around.” (leading)

Nakeesha lies down on the floor, piles pillows around her and says, “Now no one can find me.”

“No one can see you.” (not leading)

“You know how to hide so no one can see you.” (may or may not be leading)

Response above when whispered may be very leading.

Setting Limits—“Please fence me in!”



Description: A system for the therapist to use in helping the child develop self-regulation, self-control, decision-making skills, and personal responsibility.

Parallel: The informed consent document, with the important distinction that limits in play therapy are NOT set in advance.

Purposes:

- ✓ Assure the physical and emotional safety of the child
- ✓ Protect the physical well-being of the therapist
- ✓ Help the child develop self-agency
- ✓ Keep the process of play therapy ‘in the real world’
- ✓ Safeguard consistency and structure
- ✓ Protect the room and materials
- ✓ Protect the professional, ethical, and social relationship

Landreth, 1991

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Therapeutic Limits vs. Restrictions (Ginott, 1979)

Therapeutic Limits	Restrictions
Focus on redirecting undesirable behavior	Focus on stopping undesirable behavior
Permit “all verbal and symbolic expression of feelings” (p. 282)	No emphasis on assisting with difficult emotions
Ways to express strong emotions are identified and allowed	Limited “safe channels” (p. 282) for emotional expression
Are stated “succinctly and impersonally” (p. 284)	May be stated by an angry adult during conflict
Goal is to support and redirect, not punish	May be punitive
Clearly and consistently stated—in place for all children	May be inconsistent
Stated in the passive: “Walls are not for painting” (p. 284)	Directed at the child: “You must not paint the wall” (p. 284)
Focus on redirecting undesirable behavior	Focus on stopping undesirable behavior

Ginott, H. G. (1979). Therapeutic intervention in child treatment. In Schaefer, C. E. (Ed.) *Therapeutic use of children's play*, pp. 279-290. New York: Jason Aronson.

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Limits in Place for Every Session

1. Physical aggression toward the therapist, family members, or the child toward him/herself is not allowed.
2. Toys from the playroom stay in the playroom.
3. Sessions last the set amount of time.
4. The session is over when it is over. The child and the therapist will leave the playroom at that time.
5. Personal items of the therapist are not for playing.
6. Make necessary noise restrictions as required for your setting.
7. Personal toys of the child are allowed only if they are similar to the toys already there.
8. Electronic toys, games and devices are not allowed.

Landreth, 1991

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Key Points About Limit-Setting in Play Therapy



- ✓ All feelings are accepted in the play room. All behaviors are not.
- ✓ Limits should be as short and simple as possible.
- ✓ Limits must be enforceable.
- ✓ Total limits work best. Limits are non-negotiable.
- ✓ Basic common-sense health and safety rules apply.
- ✓ "Limits are not needed until they are needed!"
- ✓ Guard against the tendency to put a question in your voice or state limits in a question format.
- ✓ Use a normal tone of voice.
- ✓ Avoid the use of "we" and "our" when stating limits.
- ✓ Inexperienced play therapists feel very anxious about setting limits, but learn that children will monitor their own behavior.
- ✓ The only way to get comfortable with setting limits is to have to use them in session.



Landreth, 1991

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Procedure for Limit-Setting by Garry Landreth (1991)

A = Acknowledge the feeling or desire expressed.
C = Communicate the limit.
T = Target alternative behavior(s).

A = "Looks like you are wondering if you can put clay in the sand."

C = "The clay is not for going in the sand."

T = "You can use the clay on these mats and you can go almost anywhere in here you'd like with your mat and clay."

OR

T = "You can put all these toys you see here in the sand."

These three steps will get you through 99% of your limit-setting situations. You may need to repeat these steps 3 or more times. Be patient. Trust the limit-setting process AND the child's ability to learn self-control.

Only as a last resort, and only when absolutely necessary, state the ultimate limit:

"If you choose to _____ again, you choose to not play with the _____ anymore today." Repeat A-C-T.

If the behavior continues, say, "I see you have chosen to not play with the _____ today." Then act, don't talk, and continue the session.

Selected Resources for Beginning Play Therapists

Websites

- Association for Play Therapy: www.a4pt.org
Evidence-Based Child Therapy:
<http://evidencebasedchildtherapy.com/>
Illinois Association for Play Therapy: <https://ilapt.org/>
Play Therapy Works! Video:
<https://www.youtube.com/watch?v=4owwAdxCs0>

Research Journal

International Journal of Play Therapy

<http://www.apa.org/pubs/journals/pla/>

Books

- Gil, E. (1994). *Play in family therapy*. New York: Guilford Press.
Kottman, T. (2001). *Play therapy: The basics and beyond*. Alexandria, VA: American Counseling Association.
Landreth, G. (1991). *Play therapy: The art of the relationship*. Bristol, PA: Accelerated Development.
Norton, C. C., & Norton, B. E. (1997). *Reaching children through play therapy: An experiential approach*. Denver, CO: The Publishing Cooperative.

For more information on materials, resources or becoming a play therapist, please contact me at lifelada@neu.edu, 773-442-5521, or visit the website of the Illinois Association for Play Therapy at <https://ilapt.org/>. THANK YOU!