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Play Therapy: Comparing and contrasting the different types and effects

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#### **Abstract**

When counseling children, it is important for therapists to get to know their clients so that therapist's can help children improve on their communication skills, recover from a tragic event, and express themselves in a way that the children feel comfortable doing so. It is also important for parents to understand their children and become familiarized in how play affects children and their development. The purpose of this paper is to identify the three types of play therapy that are commonly used by therapists. This paper then describes how each therapy method is used and with whom play therapy is best fitted for. Then, based on the research, this paper discusses how play therapy in child-based, family-based, and group based benefits a child's development.

Although research is limited among these three topics of play therapy, researchers have recommended and encouraged for other researchers to build upon their findings and create new research to expand on the area of play therapy.

## Play Therapy: Comparing and contrasting the different types and effects

Play therapy is not only a way to communicate with children, but also serves as a way to respond to children with mental health needs. According to Homeyer and Morrison (2008), in 2005, it was stated by the World Health Organization that 20 percent of children around the world suffer disabling mental health problems. Children with mental health problems such as depression, anxiety, and bipolar disorder are but a few of the most common cases in play therapy. However, play therapy is also effective for children who are at-risk of losing their homes and separated from their family, have autism, or have experienced domestic violence. Therefore, play therapy has proven to be highly effective for children with not only mental health

disorders, but also typical developing children who just might not know how to express themselves as well.

The importance of play therapy is that it allows children to express themselves in a way that is suitable for the children. Homeyer and Morrison(2008) state that by playing, children not only learn about themselves, but they also learn about the world and other children. As children play, they can also use their creative minds to play with stuffed animals and dolls while creating skits, which may or may not be real life scenarios that they face as individuals and struggle with how to solve a particular problem. For instance, a child might use the puppets as members of their family and create a scenario that has occurred at home. Children might also use their imagination to create made-up characters and re-play an event of situation that has happened to them. The purpose of this type of therapy is to expand on the child's creativity through play and allow them to freely express themselves about their thoughts and feelings. Most commonly, professional therapists in a clinical environment will use play therapy to communicate with children who may not want to or know how to talk about their feelings. Elementary school guidance counselors will also use play therapy if the counselor feels as though the child is uncomfortable or shy and quiet.

# **Child-Based Play Therapy**

The first type of play therapy is child-based play therapy. In child-based play therapy, the counseling involves only the child and the therapist in the room. The therapist provides a variety of toys for the child to not only play with, but also for them to find a connection with the toy so

that they are also expressing themselves as well. Therapeutically, providing puppets and a puppet show for children, allows children to freely express themselves verbally. Puppets will also help the children to understand their emotions and behaviors. Hartwig (2014) explains in her research that there two approaches when using puppets during therapy. The first approach to using puppets is directive play therapy. This approach allows the therapist to choose an appropriate activity to present to the child. The activity that has been chosen, must present the child's problem and a way for the child to work towards their goals. Using this approach provides structured play to gain information, encourage involvement, set limits, and interpret behaviors. The second approach is a non-directive play therapy. With this approach, the child decides what the toys represent and how they will be used. Meanwhile, the therapist sits back and observes what he child is reenacting.

Child-based is typically used for those who are at-risk, show disruptive behaviors, and who even might be depressed. In a study by Swank and Shin (2015), it was stated that child centered play therapy addresses both emotional and behavioral concerns and promotes academic achievement. Also, after participating in play therapy participants showed a decrease in disruptive behaviors. These authors also found in their study that by participating children learn a number of things. For instance, children learn to respect themselves and gradually learn to accept who they are as individuals. They also learn that their feelings are acceptable and how to express their feelings responsibly. Children also learn to be creative and resourceful in confronting problems; as well as learning self-control and self-direction. Child-based therapy also teaches children how to learn to independently make choices and to be responsible for their choices. In another study, Bratton, Ceballos, Sheely-Moore, Meany-Walen, Pronchenko, and Jones (2013)

found that if treatments were not available, for example play therapy, than children with disruptive behavior problems would stay the same or even worsen over time and become serious problems such as violence, delinquency and drug abuse. Play therapy also helps children with any type of disability. For example, in a study that was performed by Ray, Stulmaker, Lee, and Silverman (2013) on children who showed the following behaviors: withdrawn/depressed, aggressive, defiant, or even poor social skills. This study explained that play therapy is effective for participants who have some kind of disability, but further research in this area is recommended.

## **Family-Based Play Therapy**

The second type of play therapy is family-based therapy. In family-based, when counseling the sessions involve the client, the parents, the client's siblings, and the therapist. According to Willis, Halters, and Crane (2014), in the second type, play therapy is expanded play into therapy with families and allows everyone within the family to open up and during the sessions to help bring people together. Also, by opening everyone else up, the play therapy also increases the participation of the child in each session. As an example, in the Family Puppet Interview model (as cited in Hartwig,2014), therapists may ask children during family sessions to name the puppets, create a story from beginning to end and present the story to the therapist. The therapist will then allow questions from the parents at the end of each session. Family therapy is also used for those who have experienced any kind trauma and chronic stress in their life. Those who were involved in some type of trauma tend to express or hide a number of

emotions and thoughts. In a study by Kiser, Backer, Winkles, and Medoff (2015), they showed that by providing play therapy within family therapy can show effective outcomes. Diamond, Reis, Diamond, Siqueland, and Isaacs (2002) stated that when adolescents are depressed, they show attachment bonding that is disengaged and weak. Children can also show high levels of criticism and hostility, as well as expressing parental psychopathology, and ineffective parenting. Additionally, this successful research has been the first to show data on family therapy and treating adolescents with major depressive disorder. Lastly, children who suffer from domestic violence from their mother's can also have difficulty communicating with each other. Waldman-Levi and Weintraub (2015) state that when violence occurs between parents and the children, violence affects the child's sensory, motor, cognitive, emotional, and social development. In this case, play therapy provides a time for the child to express themselves using their sensory, motor, cognitive, emotional and social skills. Therefore, by providing play therapy in family therapy for young victims of domestic violence, research has shown, results have been successful.

# **Group-Based Play Therapy**

The last type of play therapy is group-based play therapy. In group-based play therapy, sessions involve a group of children that may be going through the same; if not similar situation. Another term for this type of play therapy is Theraplay; which helps children create better relationships and attachments with other individuals. Researcher, Siu (2014) states, Group Theraplay extends off of individual therapy and provides a way for children to relate to others. In her article, she addresses how group theraplay is effective for children with developmental

disabilities. Group therapy is mainly used on children to help improve their social skills. It is also used to help children connect with other peers that are going through the same experience and facing similar challenges. Those that express negative classroom behaviors can have a positive outcome from attending group therapy sessions. Therefore, group therapy can be most common in school settings. In the article by Allen and Barber (2015), children identified change as making better choices, decreased anxiety, and changing their misbehaviors. In addition, the children also experienced a sense of self-worth, and an increase in empathy for other individuals. Barber also explains that guidance counselors use different therapy techniques for a number of reasons. For example, schools use play therapy as intervention advantages to educate children on teaching them appropriate social skills, and how to express themselves in an appropriate manner. Play therapy is also used for rewarding counseling outcomes and empirical data. As a result from this study, those young individuals who attended group sessions at school not only showed success in school, but academic readiness and achievement as well. Finally, research performed by Perryman, Moss, & Cochran (2015), showed that adolescents who were at-risk tend to express self-consciousness and sensitivity towards peers. It was also found that those who face everyday struggles in their lives turn to some sort of art therapy, whether that is playing a musical instrument or painting, and using play therapy. Furthermore, when it comes to play therapy in group therapy sessions it is effective for both children and adolescents to help improve their social and behavioral skills, as well as academic achievement.

Although play therapy offers three different approaches, the therapist must understand what challenges the child faces and what makes the child feel comfortable during a session, in order to determine which type of play therapy will be a good fit for the child. Also, when

researching play therapy it is important to look at the several similarities and differences between each type of therapy. For instance, the similarities between child-based and group-based play therapy are that they both involve the child learning more about social and emotional skills, and how to appropriately express themselves. Child and group based also share similarity of providing therapy for those with disruptive behaviors and even developmental disabilities. Whereas, in family and group therapy both of these types of sessions involve more than one person in the room with therapist. To add, everyone in the room also is allowed to freely express themselves instead of just one person.

On the other hand, there are also differences that should be taken into consideration when providing services. For example, family-based therapy is where the therapist focuses on the child and the family members, and their relationships toward one another. After researching several articles, family-based is the only type of therapy that is better suited of those who were victims of domestic violence, and also showed greater outcomes in child participation throughout the session. Child-based therapy however, focuses on the client and their social and emotional skills for the appropriate age level of cognitive development. Individuals, who are at-risk, have anxiety, and disruptive behaviors |such as, Oppositional Defiant Disorder and Conduct Disorder| are most commonly put into child-based therapy. Even children with impairment such as, diabetes, Epilepsy, Tourette syndrome, and heart conditions are also well fitted for child-based therapy. Thirdly, group therapy allows children to feel connected and that they belong in a group of kids who maybe facing the same challenges. This also gives them the feeling that they are not alone, and are not the only one going through that specific challenge. The children who use group therapy are those who are involved in classroom behaviors, and Developmental

Disabilities |Autism, Cerebral Palsy, Attention Deficit Hyperactivity Disorder|. Therapy can play an important role on children with disabilities. The reason being is that it can be difficult for those children to make and keep friends, which can then make them feel depressed, and/or alone in life.

### **Discussion**

In summary, Play therapy is a highly effective technique for children who have difficulty expressing themselves. When considering play therapy, it is important to become familiarized with the three types |child-based, family-based and group-based| so that the parents can best help their child with the struggles and challenges that their child maybe facing. For those who participate in play therapy, will also improve both their social skills and academic achievement. They will also learn more about who they are as a person and how to appropriately manage their emotions. It is a time for children to be creative and freely express themselves through play. Children and adolescents can use play therapy individually in child-based therapy, in a group |Group Therapy|, and with their family |Family-Based|. Limited articles are provided in terms of each area of play therapy, after researching this topic. Therefore, in most of the previous articles it has been highly recommended to continue expanding on that specific topic. Because of providing play therapy as a service, not only does it show effective outcomes for typical developing children, but also with impaired children and children with disabilities.

### References

- Allen, K., & Barber, C. (2015). Examining the use of play activities to increase appropriate classroom behaviors. *International Journal of Play Therapy*, 24(1), 1-12. http://dx.doi.org/10.1037/a0038466
- Bratton, S., Ceballos, P., Sheely-Moore, A., Meany-Walen, K., Pronchenko, Y., & Jones, L. (2013). Head start early mental health intervention: Effects of child-centered play therapy on disruptive behaviors. *International Journal of Play Therapy*, 22(1), 28-42. doi:10.1037/a0030318
- Christian, K., Russ, S., & Short, E. (2011). Pretend play processes and anxiety: Considerations for the play therapist. *International Journal of Play Therapy*, 20(4), 179-192. doi:10.1037/a0025324
- Diamond, G., Reis, B., Diamond, G., Siqueland, L., & Isaacs, L. (2002). Attachment-based family therapy for depressed adolescents: A treatment development study. *Journal of the American Academy of Child & Adolescent Psychiatry*, 1190-1196. doi:10.1097/01.CHI.0000024836.94814.08
- Hartwig, E. (2014). Puppets in the playroom: Utilizing puppets and child-centered facilitative skills as a metaphor for healing. *International Journal of Play Therapy*, 23(4), 204-216. http://dx.doi.org/10.1037/a0038054
- Homeyer, L., & Morrison, M. (2008). Play therapy practice, issues, and trends. *American journal of play*, 210-228. Retrieved from <a href="http://www.journalofplay.org/sites/www.journalofplay.org/files/pdf-articles/1-2-article-play-therapy.pdf">http://www.journalofplay.org/sites/www.journalofplay.org/files/pdf-articles/1-2-article-play-therapy.pdf</a>
- Kiser, L., Backer, P., Winkles, J., & Medoff, D. (2015). Strengthening family coping resources (SFCR): Practice-based evidence for a promising trauma intervention. *Couple and Family Psychology: Research and Practice*, *4*(1), 49-59. http://dx.doi.org/10.1037/cfp0000034
- Perryman, K., Moss, R., & Cochran, K. (2015). Child-centered expressive arts and play therapy: School groups for at-risk adolescent girls. *International Journal of Play Therapy*, 24(4), 205-220. <a href="http://dx.doi.org/10.1037/a0039764">http://dx.doi.org/10.1037/a0039764</a>
- Ray, D., Lee, K., Meany-Walen, K., Carlson, S., Carnes-Holt, K., & Ware, J. (2013). Use of toys in child-centered play therapy. *International Journal of Play Therapy*, 22(1), 43-57. doi:10.1037/a0031430

Ray, D., Stulmaker, H., Lee, K., & Silverman, W. (2012). Child-centered play therapy and impairment: Exploring relationships and constructs. *International Journal of Play Therapy*, 22(1), 13-27. doi:10.1037/a0030403

- Siu, A. (2014). Effectiveness of group theraplay® on enhancing social skills among children with developmental disabilities. *International Journal of Play Therapy*, 23(4), 187-203. http://dx.doi.org/10.1037/a0038158
- Swank, J., & Shin, S. (2015). Nature-based child-centered play therapy: An innovative counseling approach. *International Journal of Play Therapy*, 24(3), 151-161. http://dx.doi.org/10.1037/a0039127
- Waldman-Levi, A., & Weintraub, N. (2015). Efficacy of a crisis intervention in improving mother—child interaction and children's play functioning. *American Journal of Occupational Therapy*, 69(1), 6901220020. http://dx.doi.org/10.5014/ajot.2015.013375
- Willis, A., Walters, L., & Crane, D. (2013). Assessing play-based activities, child talk, and single session outcome in family therapy with young children. *Journal of Marital Family Therapy*, 40(3), 287-301. doi:10.1111/jmft.12048