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**The Power of Play Therapy**  
**By Lindsey Getz**  
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*Despite our culture’s shift away from playtime, the field of play therapy is growing. Discover why children may need play therapy now more than ever.*

Social workers and other therapists have long used forms of play to communicate with younger clients, but to actually be trained in play therapy means following a prescribed model to help meet the needs of those clients. It’s a field that many social workers may be considering.

Still, in a culture where play is becoming less valued—for myriad reasons that are not limited to busy parents and the advent of high-tech video games—can a field focusing on therapy through play survive? The experts say the answer is not only “yes,” but that these reasons are why play therapy may be so successful—and so important today. And as more social workers and other professionals begin to take note of its importance, the field of play therapy is poised to grow.

There’s a lot more to playtime than fun and games. While that’s what it should be about for a child, it’s also an opportunity for adults to reach children on their own level.

“Freud believed he could understand children by watching them play,” says Theresa Aiello, PhD, coordinator of the Child & Family Focused Learning Opportunity Program and codirector of the Advanced Certificate in Child and Family Therapy at New York University Silver School of Social Work. “Play is a form of free association for children, but it’s also a way of understanding how the child develops a sense of self.

“Play therapy is a specialized area of practice and a way to relate to clients who are unable to verbalize their feelings. Because of this, therapy happens through play,” says Lynn Notestine, MSW, who oversees Temple University, Harrisburg’s continuing education programs and special projects, including the postgraduate certificate in play therapy program. “It gets to the emotional functioning of children and that expression of emotion through play.”

More specifically, the Association of Play Therapy (APT) describes play therapy as “the systematic use of a theoretical model to establish interpersonal process wherein trained play therapists use the therapeutic powers of play to help clients prevent or resolve psychosocial difficulties and achieve optimal growth and development.”

There are many forms of play therapy. In child-centered play therapy, the therapist observes as the child is allowed to select from an array of toys and play whichever way he or she likes. In sand tray play therapy, which is becoming increasingly popular with registered play therapists (RPTs), the child may use figurines to develop scenes in the sand. In filial play therapy, the parents get involved and the therapist actually teaches the parents how to interact with the child through play—hopefully closing a communication gap that may have existed.

Filial therapy can be especially important once the client ultimately leaves play therapy. “Some traditional play therapists may say that play therapy should just be about working with the kids, but I have found filial play therapy, which essentially teaches the parents to be play therapists, to be very helpful,” says Sheri Mitschelen, LCSW, RPT-S, owner and clinical director of Crossroads Family Counseling Center in Fairfax, VA. “I’ve let the parents just play with their kids and observe how they play together. This is important because most of the child’s time will be spent at home, not in play therapy.”

**Communication Through Play**  
Though some children may benefit from play therapy more than others, most play therapists argue that the practice would be suitable for any child.

“Any child that has any sort of problem they need to discuss or be able to process would make a good candidate for play therapy,” says Elena Mazza, MSW, LCSW, an assistant professor in the play therapy program, coordinator in the School of Social Work at Monmouth University in West Long Branch, NJ.

“Children don’t have the same cognitive ability as an adult to say what’s bothering them. The problem could be a behavioral issue, psychological issue, or maybe even medical. No matter what the problem is, they need a way to discuss it. “The uses of play are very important,” adds Aiello. “Children can work on issues that are distressing to them, can play out issues of what the future will be, and can talk about trauma. If it’s too hard to put into words, they can work on it with play.”  
  
Mazza uses divorce as an example. “A young child who is under 12 years old can’t express what they’re feeling or really even be able to ask questions about what they’re feeling,” she says. “They just know something is different and upsetting. Play therapy might be a way for them to express what they find troubling without using any verbal language. You can’t stick the child on a couch and ask them to start telling you what’s on their mind. Instead play therapy builds upon their normal communication level using play.”

Mary Anne Peabody, LCSW, RPT-S, deputy director of national services at the Children’s Institute associated with the University of Rochester in New York, says it’s young children who will benefit most from play therapy, as they are the ones who don’t have well-developed abstract thinking skills to process issues or the verbalization skills to discuss them. But she says play therapy can change with the age of the child and still be quite successful with older children as well as into adulthood.

“Play therapy is a large treatment modality under which there are many theoretical approaches,” Peabody says. “The range spans from a very nondirective, child-centered play to a mixed approach and even a very direct approach such as cognitive behavioral play therapy—[they] all make up the modality as a whole. As children get older and become more verbal and able to think abstractly, they may be more able to use techniques common in cognitive behavioral therapy.”

The setup of a playroom used for a play therapy session makes a difference. Mazza says the idea is that it should be like the child’s own world. “They can control that world to some degree, and that’s important,” she says. “The biggest thing is that they should feel safe there.”

The idea of being in control of the play can help give a child confidence. Since the child may feel out of control with the events playing out in the rest of his or her life, that sense of control during playtime is important. Aiello says the play itself can also be helpful.

“The playing of games is fun, but it also allows a child to gain a degree of mastery,” she says. “They master the rules and the regulations. That’s true of sports and outside games as well. You’re using your brain, and you’re thinking of how you’re going to coordinate your body.”

And you don’t need to have a fancy set of toys to make play therapy work. “That’s a misconception,” says Mazza. “You don’t have to have this ready-made, fancy dollhouse. Students learn other things they can do with their clients, such as games to play. You don’t necessarily have to buy a bunch of specific games or toys to become a successful play therapist. There’s a lot of creativity involved.”

**The End of Recess**  
As play therapy becomes more respected among social workers and other professionals, there’s a simultaneous shift away from play in other areas of our culture. Educational toys in elementary classrooms are being replaced by computers, and some schools have cut recess short or even eliminated it. But it’s not only schools that are eliminating play opportunities—it’s happening at home, too. According to a 2010 survey by the Kaiser Family Foundation, children spend an average of 7 hours and 38 minutes a day in front a screen.

“The changing culture of childhood play cannot be attributed to any one single factor,” says Peabody. “As the author Joe Frost writes, it’s a ‘perfect storm.’ It’s the increase in cyberplay and screen time, whether that’s computers, television, or texting. Screens are taking over many children’s playtime. There’s also a lack of outside places to play, and there may even be safety issues in playing outside in some neighborhoods. All of these factors are impacting the way kids play today.”

Peabody says while play may seem to be disappearing in some areas of a child’s life, it ironically makes play therapy even more important. “How these changes impact play therapists is that all of these factors are increasing the stress levels of children and their families,” she explains. “I think the mental health needs of kids are increasing, and the kids in need of help are getting younger and younger.”

The movement away from play at school and at home is also affecting how parents let their children play. At home, working parents are often too busy for playtime and may not be willing to deal with the mess that imaginative play creates. Sometimes television seems easier. Mitschelen says this makes filial play therapy incredibly important so that parents can learn how to play with their kids.

“Because of the way our society is today, a lot of parents are in the habit of turning play into an educational or learning experience,” Mitschelen says. “I see parents correcting their kids as they play, such as making them say ‘please’ or making them count items. There’s this pressure on parents to use every opportunity to be a learning experience instead of just sitting and enjoying that playtime with the child. It can be hard to break that habit, but parents see how much kids value uninterrupted playtime at play therapy and we hope they’ll bring that experience home. For children to come to a place where they get to sit down and not only play but get 45 minutes of an adult’s complete attention is a rare thing.”

**Becoming an RPT**  
While the experts say the field of play therapy is growing, there’s still a need for understanding.

“It’s not only the general public who may not understand play therapy but even the mental health field,” says Peabody. “And that’s because they may have a different connotation of the word ‘play.’ To be a play therapist, you are using play for its therapeutic factors but are trained in a specific theoretical model that uses play. Yes, play is therapeutic in itself. You can go out and build a snowman and that may be therapeutic, but it’s not play therapy.”

Many are still not aware that the training to become an RPT is fairly extensive. The individual must have earned a master’s or higher in a mental health field and have completed at least 150 hours of play therapy-specific instruction as well as at least 500 hours of supervised play therapy experience, among other requirements.

“Our program provides those 150 hours that are required in play therapy-specific content,” says Notestine. “Our first three courses cover the history of play therapy, theories of play therapy, and the very specific techniques and skills. The next course you’d take addresses special populations of clients you may serve as a play therapist as well as the range of diagnoses.”

Though the credentials are out there, not all therapists are pursuing them. “There are therapists who say they offer play therapy, but they haven’t been formally trained,” says Mitschelen. “But you really do need that formal training to be practicing this. You can bring out a game and engage a child, but you may miss some of what it means for the child to play the way he or she does, how he or she moves from different forms of play and what that means. There’s a symbolic element that you need to understand.”

**Looking Ahead**  
So what’s the future of play therapy? The field seems to be growing as more enroll in the advanced certificate programs being offered at universities and more universities begin offering such programs.

“The amount of training available both across our country, internationally, and online has greatly increased,” says Peabody. “And the credentialing process through the APT has been instrumental in increasing public awareness, not only for the general public, but for professionals as well as insurance companies who now typically accept play therapy as a covered form of treatment. More universities are offering programs, and the research on play therapy continues to get stronger in rigor as well as quantity.”

“The last 20 years have been amazing,” Mitschelen says. “The field has really exploded. I think people are realizing the power of play. We’ve become such a structured and overscheduled society, and people see the need to go back to playtime. It helps that play therapy has become backed up by empirical evidence that shows it is effective treatment that can be really powerful. I think that’s really given the play therapy field a lot of creditability and it’s only going to grow from here.”

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