

**Child Counseling Paper**

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### **Abstract**

In early June 2021, I held a one-hour mock play session in order to demonstrate play therapy counseling skills I learned during the course of my Counseling Children class for this semester. During the course of the mock play therapy session, I demonstrated a number of skills, such as tracking, restating content, reflection of feelings, returning responsibility to the child, and setting limits. The goal of the session was to try and display as many basic play therapy skills as possible and demonstrate my development as a future mental health counselor.

In addition to demonstrating my skills in play therapy, I wanted to ensure I could conduct a full, one-hour play session successfully. One thing I learned about play therapy is that it appeals to many different and diverse groups of children, and play is the primary language of children under 10 years of age. As I continue to develop as a counselor, I plan to incorporate child-centered play therapy into my skill set to best able to help counsel young clients.

### **Introduction**

On Wednesday, June 2, 2021, I held a one-hour mock play session with “Emma” (not her real name) in order to demonstrate counseling skills learned while in the Counseling Children class this semester. I chose Emma as I know both of her parents and, at 7 years old, she is in the age range of a child with whom I wished to demonstrate my counseling skills. Her parents gave permission for the mock counseling session and allowed it to be recorded. In working with Emma, I demonstrated a series of counseling skills, which were appropriate to child-centered play therapy and to the ideas of Gestalt Therapy. The mock play session was also designed to show how my skills are developing as a counselor in the early stages of my counseling career.

“Play therapy is an evidenced-based approach for children who experience multiple presenting concerns.” (Parker et al, 2021, p.4). Play therapy is appropriate for children under the age of 10 who have a number of problems and issues which cannot be resolved through other methods of therapy. Children can use play as a way to learn, develop communication skills, and process their emotions. “Play therapy is a mental health invention that uses play and toys to meet the developmental needs of children” (Landreth, 2012, as cited in Parker et al, 2021, p.4).

During the early years of child’s development, the child passes through a number of development phases. In the case of Emma, she is classified as being in middle childhood having successfully passed through infancy, toddlerhood, and early childhood. For many children, “middle childhood is a joyful, vigorous time” (Newman & Newman 2018, p. 272) when many children develop close friendships and “the need for peer approval becomes a powerful force toward conformity” (Newman & Newman, 2018, p.276).

During early childhood, concrete mental operations develop and children start to think logically and develop rational thinking skills.

When working with Emma, I employed child-centered play therapy from a Gestalt theory perspective. Gestalt theory is my chosen theoretical orientation based upon previous classes I have completed in the counseling program. Gestalt theory states the client needs to focus on the present rather than the past or future and, by focusing on the present, an individual can achieve unification and integration.

### **Play Session**

The play session began with Emma wanting to play with her tea set. Emma was willing to be involved in the mock play therapy session and was open and outgoing during the entire period of the session. In the role of counselor, I allowed Emma to direct her own play and express her own thoughts and feelings, which is a key characteristic of child-centered play therapy. Another goal of the play therapy session was to help Emma explore problem-solving strategies and develop relationship-building skills.

During the time Emma played with the tea set I began by saying “you are playing with the tea set” and “you are giving me a cup of tea.” This demonstrates the basic therapy skill of tracking in which I as the counselor describe the child’s behavior and play. The main goal of tracking “is to build a relationship with the child by communicating a caring and connection” (Kottman, 2011, as cited in Vernon & Schimmel, 2019, p. 121). While using tracking, I tried not to label objects so the child could decide what the objects were in their play. I was not always successful. It is

important when using tracking to let the child “project their own meaning on to toys” (Vernon & Schimmel, 2019, p. 121) and not impose the meaning onto the child.

Another skill I employed was restating content. I used restating content many times during the play session as a way of “paraphrasing the child’s verbalizations” (Vernon & Schimmel, 2019, p. 121), including when we began playing with the tea set. When Emma wanted to play with the tea set, I stated that she was “now going to play with the tea set.” When Emma began to play with her cooking set and said she was going to cook, I said, “you want to cook and now you are going to cook.” This is another example of restating content, which is designed “to build a relationship with the child,” (Vernon & Schimmel, 2019, p. 122). After Emma finished cooking, she when stated she wanted to play with her toy farm and animals. I responded by saying you want to play with your toy animals.” This helped me to build a relationship with Emma.

When Emma was playing with the toy stove and the farm animals, I also used reflection of feelings. This was a difficult skill for me to use, but I employed it in order to try and demonstrate all of the basic play therapy skills. When Emma was using the toy stove I made reference to how “cooking makes you happy.” She responded by saying she liked cooking. This was an attempt by me to use reflection of feelings. I also tried to use reflection of feelings when Emma was playing with the toy farm animals because she said she loved her animals and I said “the animals make you happy.” This was another attempt to convey reflection of feelings, which is designed to deepen the relationship between the therapist and child.

Another skill I used during my mock play therapy session was returning reasonability to the child to increase a child’s responsibility, self-reliance and develop self-confidence

(Vernon & Schimmel, 2019). When Emma was finished playing with her toy stove, she stated “I am going to put these away now.” I replied to this saying “you are going to put those away now.” By making that statement, I was returning responsibility to Emma to put the stove away. In addition, when playing with the toy animals Emma said she was going to build the farm. I returned responsibility to Emma by responding with “you are going to build the farm.” The purpose of returning responsibility to the child is to give them a feeling of control in their situation and give them the opportunity to show the counselor the things they can do. If during a play session a child is unable to perform an action the counselor can suggest they work together to accomplish a goal. They can also ask the child “how to do it” (Vernon & Schimmel, 2019, p. 121).

One final skill I employed was setting limits. This particularly applied when Emma wanted to leave the room. I suggested we had better stay where we were at because her mom and dad were getting dinner ready for the family. I had to state this several times in order to get Emma to stay in the playroom. Additionally, when our one-hour time period was over, I suggested gently “that it was almost time to return to the kitchen were your mom and dad are making dinner.” By setting limits I brought the mock play therapy session to a close and Emma joined the rest of the family in the dinning room for dinner.

### **Goals of Session**

The main goal of the session was to try and display as many basic play therapy skills as possible. It was also designed to show my development as a counselor and how effective I am at using play therapy in a mock counseling setting. I also wanted to try and conduct the mock play therapy session using Gestalt Theory in my technique. As much as possible, I was focused on the present during the mock therapy session. During the time I

was with Emma, she was allowed to play freely with as little guidance and interference as possible.

Another goal of the session was to demonstrate I would be involved in a play therapy session for an entire one-hour period of time. Since I have had limited contact with young children, I was concerned I would not be able to complete an entire hour. By allowing Emma to take the initiative, it was relatively straightforward, allowing Emma to play while demonstrating my skills as a counselor. During the one hour period I was able to demonstrate my skill set and better understand how child-centered play therapy functions the child is at the center of attention, the child takes the initiative in play therapy, the counselor is, at best, a guide who allows the child to play and allows the child to use “play as the language and toys as the words” (Carnes-Holt, 2021, BHECN Conference). By allowing Emma to play, I was allowing her to express herself and communicate using play instead of words. For a child under 10 years of age, play is considered to be their primary language and not verbal communication.

### **Applicability to Diverse Populations**

Child-centered play therapy can be used with diverse populations. In this regard, play therapy can be more effective than talk therapy as it cuts across language barriers and allows children of different cultures to communicate effectively. “Play therapists can add to the playroom neutral toys, which represent a variety of cultures,” (Ceballos et al, 2020, p.219) is also appropriate.

With the growth of multiculturalism in American society, every child therapy playroom should be geared towards serving diverse populations. When placing toys in



the playroom, it is important not to choose toys, which are based on stereotypes. Instead, toys should be neutral and not stereotypical. There should be a variety of toys, which will appeal to children of all backgrounds and cultures, and therapists “must be careful to choose toys representative of the children's or families specific countries of origin (Ceballos et al, 2020, p.219).

When using the playroom, it is also important for the therapist to be aware certain toys may convey a different meaning when compared to children from the dominant culture. Children can ascribe different meaning to different toys and the child must be allowed to convey whatever meaning they feel appropriate to toys they may be using in the playroom. While this may be true of all children, it is even more important when working with children from diverse backgrounds. In general, play therapy is a great way for children of different cultural backgrounds to communicate and express their thoughts and feelings instead of possibly struggling to convey what they are saying through talk therapy in a language they may struggle to understand.

### **Reflection for Future Use**

In the future, there will be a place for play therapy in my counseling sessions with children. While I do not see myself exclusively working with children, when the opportunity arises I see myself using play therapy in working with young clients. Child-centered play therapy is much more effective in helping to treat children under the age of 10 than other forms of therapy. For children play is their primary language and is more effective than other forms of therapy, such as talk therapy.

As I continue in my counseling education, I will work on developing my play therapy skills so I can work with young clients. If I work with young children on a regular basis, I would consider becoming certified in play therapy, so I would be as well-trained as possible.

### **What I Would do Differently and What Went Well**

The play therapy session went well and I did the best I could with the limited skills I currently have in play therapy. I interacted with Emma in an appropriate manner by using a variety of basic play therapy skills. When using certain skills, such as tracking, I would have done a better job of using pronouns to describe items instead of the specific noun. This was my biggest problem during the mock play session and something I will have to work on as I develop my skills.

What also went well was the fact I was in a room with Avia that was filled with toys. While it was not what I would consider an ideal playroom, it was sufficient for me to have a productive play session with Emma and gave me the ability to practice my skills. One drawback to my play therapy session is, because it was my first time in a play therapy setting, I was nervous, which affected my performance. As I participate in more play therapy sessions, I will become more comfortable and better able to work with clients. As I proceed through the program, I anticipate this will change and I will garner more experience and become a more effective counselor.

### **Conclusions**

Based on my experiences, Child-Centered Play Therapy is something I would utilize in the counseling environment. Play therapy is more effective with children under 10 years old than talk therapy and allows the child to express thoughts and feelings through play. If I were to work with younger clients, I do not see myself using talk therapy, I would use play therapy, which, from the evidence, is more effective than other forms of therapy.

When participating in play therapy with a client, it will be important to have an appropriately furnished playroom with a diverse set of toys. This will ensure the playroom appeals to children of all backgrounds and cultures. In order to work with children in play therapy effectively, I would have to be properly certified and trained, which is something that is worth pursuing. In the future, I plan to develop my play therapy and counseling skills, so I can be an effective counselor to all groups of individuals, including children.

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