PLAYING WITH CHILDREN

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INTRODUCTION

Play is part of living. We all play; however for children play is particularly important. When children play, the consequences of their actions are minimized and they feel more relaxed and free to explore their environment. They can experiment and explore new behaviours, feelings and skills with minimum threat.

Play therapy is based on the fact that play is one of the child's natural mediums for self expression. The child is given the opportunity to play out his feelings and his problems.

Susanna Miller (1968) says that Play Therapy can vary depending on whether the therapist is active or passive, the extent of parent involvement, how the child's environment is changed, how frequent the treatment is and how play is seen to function in the treatment. Some therapists such as Anna Freud (1959) and Virginia Axline (1969), stress the child's relationship with the therapist as the most important agent in successful therapy. In addition to this, these writers have noted that play therapy can be directive or non-directive. Historically, most therapy approaches with children have been non-directive in structure, that is, free play without direction intervention from the therapist.

Virginia Axline (1960) in her book states that "…non-directive is based upon the assumption that the individual has within himself, not only the ability to solve his own problems satisfactorily, but also a growth impulse that makes mature behaviour more satisfying than immature behaviour". She says that non-directive play therapy offers the child an opportunity to experience growth under the most favourable conditions. By using the natural medium of play the child can play out his accumulated feelings and express them, learn to control them or abandon them. The child is accepted completely, and can do or say anything he likes. The therapist leaves the responsibility and direction to the child, assuming a passive but approving, permissive role.

Compos (1986) and Axline (1969) state that when play therapy is directive in form, the therapist takes responsibility for guidance and interpretation and actively makes interventions. The writers believe that in directive play therapy the therapist will identify script messages and make active interventions to facilitate change.

Within the confines of these overall approaches to play therapy, the actual, specific play techniques must be considered. This paper is a statement about these play techniques which the writers have used with children. It is therefore not a general statement about an overall therapeutic approach. As a consequence, the goal of the paper is to provide parents and child therapists with some of the psychological consequences of different types of child play.

OUTLINE OF TECHNIQUES

<u>ROMP PLAY</u>: This is free, boisterous, rough-and-tumble play composed of jumping, falling over, wrestling, tugging and tumbling around with a lot of physical contact. This is different from aggressive, hurtful contact in that it is non-hurtful and we have rules which we insist are followed.

Controls are introduced in the form of an 'intermission' during the play, when children have to stop when asked. The children are encouraged to say "stop" when another child is being too active, or when they simply want to stop. No child is allowed to hurt another child or to be destructive to non-expendable materials. Apart from being fun, Romp Play is a way to release built up energy, which is especially useful after children have been in school all day and physical activity has been limited.

By the use of 'intermission', the children learn to control Free Child behaviour when asked, and so internalize this control. Thus, later in life free behaviour can be used appropriately and in a controlled way. The children learn it is not acceptable to hurt others and it is not acceptable to let others hurt them. By the use of the word "stop" they learn they can protect themselves and take charge, which is important for both the passive, Victim-type child or the aggressive child. The use of permissions and stroking for new ways of behaving is used, offering encouragement protection for the child while practising new ways of playing.

The importance of this type of physical contact cannot be over-estimated as it can be the basis for the development of a warm, friendly relationship within which much can be achieved. For some children it is the only way they are willing to make contact, and as such its value in therapy is great. The writers have in fact given Romp Play first priority in their list of techniques, because of its usefulness in treating children's problems and they have found its therapeutic effects to be quite pronounced.

<u>PILLOW FIGHTS AND BATACAS</u>: We have a plentiful supply of foam pillows and we invite the children into equally-balanced 'pillow throwing' fights. We use the pillows for throwing or alternately we use 'batacas', large soft bats which the children use to exchange hit for hit with other children and/or the therapists. Again, as in all our play, there are rules and children are expected to stop hurtful behaviour and also not allow themselves to be hurt.

The advantages of these soft hitting games is the sociable expression of aggression and anger. The child is given permission to be angry and is shown how to do this in an acceptable, non-hurtful way. By joining in the play, we, the parent figures, show acceptance of the child's anger. Afterwards we demonstrate how our relationship with the child has been unaffected by the child's anger. This is an excellent way to encourage passive children to be active and for shy children to become part of a group. As in Romp Play this activity actively invites and encourages direct contact between us and the child, thus permitting potent and direct interventions. By joining in the play we are able to model the behaviours we consider desirable.

<u>VERBALIZING FEELINGS</u>: The children are asked in turn about a feeling—the following being a typical example. "What do you feel angry about?", "What happens after you do that?", i.e. "How do people around you respond?". We invite participation by having a 'lolly jar' and for each

question answered a lolly is given from this special jar. We give feedback and strokes highlighting healthy, appropriate expression of feeling.

Initially the lolly jar was intended to gain cooperation as well as making the day fun. We soon found however, many ulterior gains from its use. The focus is taken off the child revealing his feelings and being vulnerable and makes the exercise fun and non-threatening. We learn how each child responds to taking turns; whether they hang back until last or push in first. We can then intervene to teach healthier or more productive ways of behaving.

Through the questions about feelings, the child learns an appropriate, healthy feeling for a situation, how to express it and then how he or she can best get that feeling acknowledged. They learn that what they feel is OK, what others feel is OK, and their right to get needs met is affirmed. Contact at a feeling level is made between both of us and the children. We learn to recognize a child has a problem with a particular feeling, or the expression of this feeling, and can then focus on this area to assist the child in developing emotional literacy.

DRAWING ON THE WHITEBOARD: We have a large whiteboard with pens and an eraser supplied. The children are asked to draw different things on the board—sometimes as part of a game, sometimes for a lolly, and other times just as part of the day's play. The drawing can be related to the child's feelings—which would include requests such as "…draw something that scares you", or "…draw someone who is angry". This helps the child to align his feelings with appropriate body language. We learn if the child is experiencing confusion about feelings; for instance, some children draw a person crying and say they are angry. This child can then be taught that feeling angry and looking angry in fact fit together. Drawings about feelings on the board also help to show the children they are in charge of their feelings, as a feeling can be created and seen in a picture and then dealt with. We also draw on the board, giving the children a chance to learn from us about other's feelings with pictures. This adds a further way to make contact with the child by letting them be active in what we do, and providing another way of relating at a feeling level. As part of this technique, we ask children with physical symptoms to draw them on the board. A child with a headache is asked to "draw a headache". In our experience this is easy for the child to do. Both the child and we learn a great deal about the headache from the picture, and it becomes something to be owned and dealt with instead of an intangible, uncontrollable problem.

TEARING UP THE PHONE BOOK: This is chaotic play and involves the tearing up of an old telephone directory. We and the child tear pages out singly, screw them up and throw them at each other. Once again, unsafe, hurtful behaviour is not accepted and limits are enforced, such as one page at a time, and staying inside a set area.

This play, apart from being lots of fun, allows the child to release large amounts of energy that may otherwise be used destructively. The children learn that they can behave in an abandoned Free Child way and then can stop when asked to. Thus, a healthy combination of spontaneous, chaotic play, followed by firm Controlling Parent behaviour, is demonstrated and is internalized by the child.

After the release of energy in play such as this, the child is often available for some warm, close contact and this greatly enhances the therapeutic relationship, while the play itself offers plenty of opportunity for physical contact which is non-threatening and enjoyed by most children.

BALLOON GAMES: This form of play usually commences with blowing up balloons and tapping them around the playroom. Few children can resist a balloon and once in possession of one they are asked to draw faces on them. An example of this is "…draw someone you are angry with". The child is then encouraged verbally, or by example, to jump on the balloon face till the balloon pops as a way by which children can express this anger towards others. It encourages both bodily movements and direction with the expression of anger, and when coupled with the noise made, it forms a satisfying and active way of expressing anger. The children learn it is OK to be angry, and also, most importantly, that no one gets hurt when anger is expressed in certain ways.

BOARD AND CARD GAMES: During quiet times, or as an initial introduction to the group, short board or card games are played. We have found these need to be simple, suitable for a wide age-range, and finish quickly.

Games give us an opportunity to introduce the child to the group and to us, and it is a chance for the child to settle in to the group while doing something simple and non-threatening. The children respond more freely while occupied in playing a game and problems and fears can be discussed at these times.

We can observe many things about a child playing. Some children expect to be rescued (let win), others must win at all costs, and others set it up so that they always lose. The reactions of the children to winning or losing give us insight into areas that may be a problem in their lives and we can begin encouraging different responses and behaviours.

While playing games, areas of difficulty for the child can be discussed. We will often ask at this time why the children think they are with us, and what they feel about being there. The children learn that we will meet them on an equal level and spend time with them and listen. We can give necessary permissions, stroke the children and make good contact while the focus is seemingly on the game.

ROLE PLAYS: In this play activity, we nominate specific people or feelings for the child to 'role play'. For example, we may invite the child to "…be your sister", "…be your mother when she's sad", or "…be a scared person". A wide range of people and feelings are called upon for the child to act. We have discovered there is much value in asking them to role play each other. We are flexible and creative as to who or what we ask them to role play, fitting each request where it will be most helpful to the child. For example, with one very active child in the group who did everything very rapidly, we asked him to role play a slow person—which allowed him to experience (perhaps for the first time) a significant slowing down. Once again, this is an activity that facilitates the emotional development of the child—following the process in self of identifying the feelings of others, accepting those feelings and expressing them. During this play the children can experience directly a wide variety of feelings and with our help, learn what behaviours accompany certain actions and feelings. Role plays also frequently conclude with lollies from the jar—inviting participation and fun. In role plays we also learn how the child reacts to being the centre of attention. A shy, withdrawn child will not be willing to 'role play' and a conforming, pleasing child will copy others while checking to see whether we are approving his or her performance. From their role plays of parents and important people we learn more of their perceptions of these people and we can then teach them how to respond in healthy ways.

Children are very perceptive and from their role plays of each other they learn much about how they appear to others. Like adults, children are often unaware of the way in which they 'come across' and their concept of self may he very different to the way others perceive them. This is a non-threatening way of reflecting a child to himself, and our relationship with the children allows for acceptance and discussion of their feelings and reactions of significant others.

The role playing may involve more than one person—for example, we may ask the children to form a group or a pair to act out a situation that is difficult for them at school or home. A favourite one represents peer group pressure on teenagers at school. The children act out the situation while we intervene with options of ways to deal with both the problem and the feelings involved.

COFFEE MACHINE: The coffee machine provides a situation similar to an adult afternoon tea-break. The children have a drink from the coffee machine and we all sit down and discuss whatever we need or want to. The children are allowed a great deal of creativity and freedom with their choice of drinks—there are no restrictions on their choice of soup, coffee or chocolate. There is acceptance of their decision whether it be soup mixed with chocolate, or whatever, but there are limits that drinks must be handled safely and the furniture and drink machine protected. This is a time of sharing and making contact during which communication is very open and good and at this time many important issues are brought up and discussed.

The children experience acceptance for their choices and the right to make them. They enjoy a sense of responsibility and learn to choose with care and enjoyment, free from restraints. At the same time, the conforming behaviour of waiting in line or waiting for a turn are highlighted, as well as learning to act within limits of self protection and safety of others. The child learns that inappropriate behaviour is not acceptable although he himself is. Thus, the child who has problems conforming at home or school, learns ways of doing this. At the other extreme, the child who has little self-confidence often finds it hard to deal with freedom of choices and we can encourage this child to be less conforming and more relaxed.

THE QUALITY OF PLAY

Over the years that the writers have been working with children, a subtle and interesting change has occurred. Initially, each group was provided with seven or eight boxes of toys, make-up, clothes, Plasticine, dolls houses, etc. Over time the number of toys has slowly diminished to the two boxes we now usually provide for each playgroup. The toys have become largely irrelevant to the play that we do with children, which is the reason behind the title of this article—"Playing *With* Children".

To clarify this point, consider the example of a parent and child playing a game of cards. We would invite such a parent to consider the following question: Are you playing cards with your child, or are you playing with your child and that just happens to be cards at the moment? Toys, games or play activities can provide an effective way of *avoiding* contact with a child. They can allow the child or parent to become side-tracked into the activity and avoid closeness, contact or openness with each other. Parents who provide children with expensive toys particularly need to consider how they play with their children. The writers have found that as our number of toys decreased, our number of therapy successes have increased, because more contact is being made.

CONCLUSION

In conclusion, toys and play games provide an excellent medium through which a child can develop his or her creativity, motor skills, intellectual functioning and knowledge about the world. Playing a game with a child does not mean one is communicating or relating to a child. It depends on the way in which one plays the game and how comfortable one is in making contact with a child.

The techniques outlined in this paper can of course be used either way. That is, as a way of avoiding contact, or as a way of making contact with a child. We have found that the techniques listed above permit psychological contact between parent and child. Children spontaneously want to do this, which leaves the ball of response in the parent's or therapist's court. Self-analysis of one's level of 'comfort in making psychological contact', is essential for parents and therapists if they wish to play with children.

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