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PREFACE

101 Favorite Play Therapy Techniques, published in 1997, has been considered a wonderful resource for practitioners, teachers, and students involved in conducting play therapy. *101 More Favorite Play Therapy Techniques* once again brings together new play therapy techniques by therapists across the world. We have invited leading authorities in play therapy to write either their favorite original technique or one that involves an innovative modification of a well-known procedure.

We have separated the techniques into seven categories for easy reference. Each author has also included a description and/or application of the technique to illustrate how the therapist used it in practice. The sections follow a grouping similar to the first volume: Storytelling Techniques, which illustrate the use of different methods to enhance verbalizations in children; Expressive Arts Techniques, which include the various mediums used in art to help children cope with psychological difficulties; Game Play Techniques, which use games to help children express themselves in a nonthreatening playful environment; Puppet Play Techniques, which help in the expression of conflicting emotions; Toy and Play Object Techniques, which illustrate the use of various toys and objects in playroom and how they can be useful in therapeutic play; Group Play Techniques, which include methods and play techniques to use in group settings; and Other Techniques, which are a group of miscellaneous techniques that are useful in many settings.

Psychiatrists, psychologists, social workers, nurses, child life specialists, therapeutic recreation specialists, teachers, and counselors at all levels of training and experience will find *101 More Favorite Play Therapy Techniques* very informative and clinically useful.

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Section One

Storytelling Techniques

1

Garbage Bag Technique

Heidi Gerard Kaduson

INTRODUCTION

Children hold in a lot of their problems instead of communicating them to adults or even to other friends. Whether children are too frightened to reveal their problems or not consciously aware of what is bothering them, they feel bottled up with these feelings and have difficulty communicating and releasing their emotions. Several times parents might ask their children what the problem is, and many times the answer will be "nothing" or "I don't know." The garbage bag technique was developed to help children release problems they are holding on to and then to follow up with playing out those problems in order to find some resolution or solution.

RATIONALE

It is very therapeutic for children to focus on their problems and find solutions to those problems to help them cope with everyday issues in their life. With the implementation of the garbage bag technique, children

write down things that bother them (at home and at school) and then focus on playing out the solutions to those problems. This empowers the children to feel more in control of their lives and be more responsible to themselves. Communication is very difficult for children to do through words. However, through the therapeutic power of play, children are able to see how to “tell” what their problems are and how to “fix” them so that they can be relieved of the pressure that holding in these problems could cause.

DESCRIPTION

Materials Needed

Two brown sandwich bags

Colored pencils or markers

Twelve strips of paper to write problems on

Process

The therapist introduces the technique by giving the child the paper bag to draw anything the child wants to draw on it. The therapist also draws on his/her own bag. While the drawing is taking place, the therapist talks about “garbage” in the following manner:

You know what garbage is? It's that stuff you put in the garbage can when you are done with it. It's stuff that turns green in the back of the refrigerator when it's been left there too long. You know how things grow on top of it and it looks all yucky?

The therapist continues to do descriptors of garbage until the child hooks on to the image and is going along with the comments of the therapist. Once that is accomplished, the therapist continues:

Well, what if all the garbage we threw out in the garbage cans was never picked up? What if weeks and weeks and months and months of garbage were left in your home? Then there wouldn't be any place to walk or sit, and we would have to carry our

garbage around wherever we went. We'd have to take it to school, to birthday parties, to bed with us, and we would never get rid of the garbage. Well, we keep garbage inside of ourselves as well. Things that bother us. Things that we can't stop thinking about. Stuff like that. So, let's finish drawing on our bag, and then I will give you six pieces of paper so that we can each write down six pieces of our own personal garbage and put them in our garbage bags. Let's start with something from home. Something that really bothers you that you can write on your piece of paper.

The therapist writes down a problem that s/he knows the child is having and says what is being written. This will guide the child on how to start putting his/her own "garbage" down on paper as well. After three problems have been written about by the child, the therapist guides the child to write things about school.

Now that we each have three pieces of garbage from home, let's write three pieces of garbage that we might feel at school.

Once again the therapist starts writing one and leads the child to do the same.

Now we'll close up these garbage bags and leave them closed until next time. Then you can pick from either garbage bag, and we will play out what we could do about that garbage.

The therapist puts the bags away. The next session starts with the child picking out one piece of garbage to play out in miniatures or in role play. The therapist should be prepared to play out any of the items written in the previous session. If there aren't the appropriate miniature toys to play out the "garbage," then the therapist should provide the child with clay so that s/he can make whatever is necessary to bring the play session as close to reality as the child chooses. Many times the child will come up with a solution to the problem or "garbage," but sometimes the therapist will have to be more directive and intervene with some suggestions for the miniatures or in role play. The therapist should not directly relate the problem to the child once the play begins. Keeping everything in the third person is important to allow the child to have enough distance from the problem to help solve it.

APPLICATION

The garbage bag technique can be used with children ages 4 through 16. It can be used with clients who have trouble verbalizing their problems in talk therapy. By allowing the “garbage” to be written down, the children can externalize their problems and relieve the pressure inherent in holding on to problems.

Samantha was a 6-year-old girl referred for treatment of anxiety. She had difficulty falling asleep at night, and she was extremely shy in school, which resulted in her not participating in class. Her parents and teachers were concerned about her behavior, as she was chewing on her clothing, biting her nails incessantly, and withdrawing from friendships. Samantha could never communicate to her parents or teachers what was bothering her. When she entered therapy, she was very reserved and self-conscious. The garbage bag technique was introduced, and she immediately understood the “garbage” metaphor. When she was asked what she would do if she had to walk around with her garbage every day, she commented that she would look like the Hunchback of Notre Dame. As the therapist started to print out “garbage” by writing, “I hate when I’m called on in class,” Samantha followed with “I feel stupid when I don’t know the answers.” Two other school-based issues were reported and written by Samantha: “I don’t like working in groups,” and “My friends think they are smarter than me.” When the therapist initiated home issues by writing “I can’t fall asleep at night,” Samantha reported, “I hate having bad dreams.” The two other issues for Samantha were “I hate when my parents fight” and “My sister is always getting more attention than me.”

The following session, Samantha picked out a piece of her garbage from her own bag. She had the therapist read it. “I feel stupid when I don’t know the answers.” The play began with Playmobile’s school. She set up everything just the way her class was set up. She played the role of the students and gave the role of the teacher to the therapist. In her play it was clear that she felt that other students were smarter than she, and the teacher had to modify the students’ behavior. With some cognitive restructuring, Samantha was able to play out a resolution to the problem by stating that her doll was smart at a lot of things, and not knowing the answer was not being stupid.

During the rest of the therapy, a problem a week was played out, and in most instances Samantha was able to solve her own problems. She began to improve behaviorally, joining in class situations, asking for play dates, and showing more assertive behavior.

2

TV Show Storyboard

Loretta Gallo-Lopez

INTRODUCTION

Most children are resistant to openly discussing and revealing their feelings about disturbing issues or events. Children who have experienced trauma are especially cautious and guarded in therapy, often finding it difficult to trust adults. However, these children have been found to respond positively to play and expressive therapy techniques. The TV show storyboard technique, which I present to children as "The _____ Show" (child fills in the blank), provides traumatized children with a fun, nonthreatening way to explore significant issues.

RATIONALE

By utilizing strategies that provide emotional distance as well as structure, the threatening nature of traumatic events can be reduced. The TV show storyboard offers children and adolescents a safe vehicle for confronting these issues. Children connect easily to the TV show theme, and older children and young adolescents tend to see this activity as more age appropriate, and they therefore offer less resistance.