

**Section One:
Engagement and Assessment**

All About Me Show and Tell

Source: Katherine Arkell

Theme: Engagement and Assessment

Recommended Age Range: Six and Up

Treatment Modality: Individual

Goals

- Establish a positive and open therapeutic environment
- Gather information about the client
- Increase open communication

Materials

- 3" x 5" card
- Marker

Advance Preparation

The following should be typed on a 3" x 5" card or slip of paper and given to the client:

All About Me Show and Tell

Bring a few items to the next session that will help me learn more about you. Some examples include pictures; awards; collections; favorite books or CDs; artwork; or any other special objects you would like to share. There is no wrong way to do this. You decide!

Description

At the initial session, give the client the "All About Me Show and Tell" instruction card, and ensure the child understands this homework assignment. In the following session, allow the client ample time to show and discuss what he/she brought to the session. Ask process questions, such as:

- Can you tell me about the time you won this award?
- What led you to draw this picture? Does it have a title?
- How does this music speak to you/what does it remind you of?
- How did you become interested in collecting _____?
- Do you relate to any of the characters in the books you read? If so, which ones and how?

Discussion

Rapport building with clients is not only necessary but also crucial for successful treatment. This activity is engaging and helps build therapist-client rapport. Most children enjoy having the opportunity to talk about themselves and their interests to an adult who is truly engaged with what the child is saying. Much can be learned about clients through this activity, such as their interests, hobbies, abilities, etc. In addition, children may feel anxious about therapy. Talking about third party objects or ideas often alleviates distress or discomfort the child may feel about being in the “spotlight.”

Modification: This activity can be modified in later sessions with a focus on coping. Tell the client that he/she can bring the following items to the session: (1) something that makes you feel happy; (2) something that makes you feel proud; (3) something that reminds you that people care about you.

About The Author

Katherine Arkell, MSW, LCSW, RPT-S, has a private practice specializing in play therapy. She is a Registered Play Therapist Supervisor with the Association for Play Therapy. Her practice areas of interest include anxiety, depression, grief, and blended families.

Assessment Etch-A-Sketch Inquiry

Source: David L. Olguin

Theme: Engagement and Assessment

Recommended Age Range: Thirteen to Eighteen

Treatment Modality: Individual

Goals

- Establish a floor plan drawing to help clients develop insight into triggers exacerbating symptoms at home
- Gather information about the client's home situation
- Increase open communication

Materials

- Etch-A-Sketch
- Photocopy machine

Description

Provide clients with an example of what a floor plan looks like. Sample drawings of floor plans can be placed on a poster board for them to see. Then provide the clients with the Etch-A-Sketch, and ask them to draw as much of the floor plan of their current home as possible. Observe the clients' reactions while drawing the floor plan. Ask here-and-now process questions (listed below) during the assessment, then ask debriefing process questions (listed below) with clients after the intake assessment is completed.

Here-and-now process questions:

1. What is happening to you right now?
2. Are you having a hard time with the drawing?
3. What is it like for you to have to draw the floor plan?

Debriefing process questions:

1. What did you think of when I told you that you had to draw a floor plan of your home?
2. As you were drawing, what were some thoughts/feelings that went through your mind/body?
3. What thoughts/feelings went through your mind/body as you noticed that you were half way finished with the floor plan drawing?
4. What thoughts/feelings went through your mind/body as you finished the floor plan drawing?
5. Where is your room, and do you have to share it?
6. What is your favorite room in the house?
7. What makes that room your favorite room in the house?

8. When you do not feel like talking to anybody, where in the house do you go to get away?
9. When you are in the room, what thoughts go through your mind?
10. When you are in the room, what reactions go through your body?
11. If you could get rid of any room(s) in the house, which room(s) would you get rid of?
12. What would motivate you to get rid of the room(s)?
13. If you were to change or add anything to the floor plan, what would that be?

Carefully turn-over the Etch-A-Sketch (do not shake it) to make a photocopy of the sketch, write a brief narrative and attach it to the assessment so that it can be used in subsequent sessions.

Discussion

An Etch-A-Sketch can serve as a useful tool to make the assessment process more engaging for clients. It is important to process any connections (or lack thereof) clients have to particular rooms during the debriefing. Further discussion about the sketch will eventually increase clients' insights and lead to identifying which symptoms need to be targeted in treatment. This drawing will help clients identify triggers at home, gain senses of safety and belonging, and learn coping strategies. This activity can also be modified for adolescents who reside in group or foster care. With time permitting and developmental considerations of clients, the activity can be modified to have clients only draw the room in which they sleep.

About The Author

David L. Olguin, Ph.D., LPC, is an Assistant Professor at the University of New Mexico (UNM) and a Licensed Professional Counselor in Albuquerque, New Mexico. He was trained in play therapy at the University of New Orleans and uses play as a central modality in both school and mental health settings. His counseling specialty and research interests involve ethnically diverse children, adolescents, and families. He has authored and co-authored publications in referred journals and book chapters.

Calling the Opposite

Source: Mariela Novas

Theme: Engagement and Assessment

Recommended Age Range: Five to Eight

Treatment Modality: Group

Goals

- Establish a safe and open therapeutic environment
- Verbally identify feelings
- Assess executive function skills such as attention and impulse control

Materials

- Colored card stock
- Pictures that depict opposites, such as day/night, winter/summer, black/white, up/down, happy/sad, proud/ashamed, loved/unloved

Advance Preparation

Select images from the Internet or from magazines that depict opposites. Glue them onto colored card stock and laminate for extra durability.

Description

Have the group sit so that all the children can see the practitioner. Present the pictures and ask the children to call out the opposite to what is in the picture. Explain the activity to the group by providing an example: "If I show you a picture that shows daytime, you would call out nighttime."

Discussion

Children typically engage easily in this activity and laugh at their mistakes as well as enjoy their correct answers. When working with children with ADHD and learning disorders, this activity provides the opportunity to assess key skills such as focusing and impulse control.

This activity strengthens executive function as clients have to inhibit their first thought and replace it with the opposite. Moreover, the act of being attentive is exercised in a fun and engaging way.

Variation: Print numbers in different colors onto cards. Ask the group to call out either the number or the color. In subsequent sessions, groups can be asked to create new cards of their own, promoting peer interaction through the discussion of ideas and creativity.

About The Author

Mariela Novas is a Licensed Psychologist in Argentina with specialized training in neurodevelopmental disabilities and Pervasive Developmental Disorders and Neuropsychological Assessment in children. She currently holds a national grant in a program of Social and Community Health, working with children and families at risk for poverty. She is the Coordinator of Professional Internships and she presents on her research at conferences. She has completed Intermediate Training at the Theraplay Institute® in Chicago, Illinois, and has worked for several years in the United States at the Devereux Foundation.

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Can You Kazoo?

Source: Dawn Chalker

Theme: Engagement and Assessment
Recommended Age Range: Four to Ten
Treatment Modality: Individual

Goals

- Establish a positive and open therapeutic environment
- Increase interaction and communication

Materials

- Two kazoos
- Snacks (such as gummy fruit) or stickers

Description

The practitioner and client each choose a kazoo. The practitioner hums a rhythm or tune on one kazoo and the client tries to repeat it. If the client repeats it correctly, he/she chooses a snack or sticker. Then the client hums a rhythm or tune on his/her kazoo. The practitioner repeats it correctly and chooses a snack or sticker. The practitioner starts out with simple rhythms and increases the complexity as the client becomes more adept at repeating them. The practitioner sets a number of turns for each person or lets the client decide when to end the game.

Discussion

Clients are often shy or anxious and have difficulty interacting with the practitioner. This is especially true of children with Selective Mutism or separation anxiety. At times the practitioner will need to initiate an activity to put the client at ease in the playroom. The “Can You Kazoo?” activity engages the client and helps build a playful and trusting relationship without requiring the client to talk. Additionally, the Selective Mutism client will gain confidence in making sounds in the playroom. The added incentive of choosing a reward encourages the client’s interest in the game.

About The Author

Dawn Chalker, MA, LPC, RPT-S is a play therapist in private practice in the Ann Arbor, Michigan, area. She provides therapy for adults, children, and families; consults with parents and schools; provides play therapy supervision; and presents on play therapy at professional conferences. She has served as President-Elect, President, and Past President/Program Chair of the Michigan Association for Play Therapy.

Clay Sculpture

Source: Sharlene Weitzman

Theme: Engagement and Assessment

Recommended Age Range: Six and Up

Treatment Modality: Individual, Group, Family

Goals

- Establish a positive and open therapeutic environment
- Verbally identify and express feelings
- Identify themes to be explored in later sessions
- Increase self-awareness

Materials

- Colored clay or playdough
- Paper
- Pencil or pen

Description

Ask the child to build a sculpture that tells something about who the child is, what he/she likes, or something the child wants you to know about him/her. It is often helpful for the practitioner to make his/her own sculpture at the same time. It does not matter if it is realistic or abstract. The colors chosen will represent emotions, but do not inform the child of this until the end.

Once the sculpture is complete, ask the questions below, and write down the child's answers. Write the answers in a poetic format. The child does not yet know he/she is creating a poem so the language he/she chooses should be honored but can be embellished by using poetic license.

Ask the client to come up with a title for the sculpture.

Ask what feeling each color represents and make each answer another line of the poem.

Regardless of whether it is a person or thing, ask what it would say to it's/his/her mother, father, siblings, grandparents, best friend (or anyone else in its life).

Reinforce that whatever it has to say is okay because this sculpture can say what it feels without having to worry about other people's reactions or feelings.

Ask additional questions such as:

- What is the sculpture's favorite food?
- What/who does it like and not like? Why?
- What does it want the world to know about it?

Any other relevant questions that come to mind are okay to ask. Write the title at the top and repeat it at the bottom. Be creative in how the poem is visually created and only tell the child he/she has written a poem at the end of the exercise. The child will be surprised and excited that a poem was created. Read the poem back to the child and watch the delight when he/she realizes he/she has written a unique and special piece of work. The child can keep the sculpture that inspired the poem.

This exercise can be repeated in future sessions to evaluate change and progress.

Discussion

Many children, especially during the initial stages of therapy, do not want to or do not know how to express their inner feelings. As well, they need time to establish a therapeutic rapport and the accompanying trust that will allow them to directly speak about their feelings. This projective exercise places the feelings onto an external object and allows children to express their feelings through that object. This creates a safe way to tell the practitioner some of the key themes that will be present in sessions. The sculpture acts as a concrete representation of children's inner feelings and allows them to utilize the creative arts as a forum for expression while also having a three-dimensional, tangible representation of their therapeutic experience.

Reference

Weitzman, S. (2007), *7 Essential skills to teach children*. Belleville, ON: Self-published.

About The Author

Sharlene Weitzman, MSW, RSW, CPT-S, is a Clinical Social Worker and Certified Child Psychotherapist and Play Therapist Supervisor. She runs a private practice, Gowthorpe Weitzman Clinical Consultants, in both Belleville and Tweed, Ontario, and is a co-founder and the Executive Clinical Director of that agency. She is also the Director of Corporate and Clinical Consulting for GROWTH, a collaboration of clinical and residential treatment expertise in the areas of family dynamics, child welfare, children's mental health, and organizational relations specific to the social and human services. She is actively engaged as a member of the Board of Directors of Children's Mental Health Ontario and sits on the Evidence Based Practices Committee of that organization.

Colored Candy Go Around

Source: Katherine Arkell

Theme: Engagement and Assessment

Recommended Age Range: Six to Sixteen

Treatment Modality: Family, Group

Goals

- Gather information about the client and family/group
- Increase open communication
- Identify areas of change or improvement to be addressed

Materials

- Packs of candy with assorted colors such as SKITTLES® or jelly beans

Description

Distribute 10-15 candies to each group or family member. Have each member sort their candy by color with instructions not to eat them. Ask one member to pick a color and tell how many they have (i.e., two greens). Ask them to give two responses to the following questions or make up ones more relevant for current family/group goals or issues (i.e., anger management, social skills, etc.):

- Green: Words to describe self
- Purple: Ways you have fun
- Orange: Things you'd like to change/improve about yourself or family
- Red: Things you worry about
- Yellow: Good things about your family

After one person has answered a question, have them choose the next person to answer the same question based on the number of candies that person has. The activity is complete when each person has answered all questions. If a person does not have a particular color candy, they use the number of candies the person who went before them had. Candies can only be eaten after a question is answered.

Be sure each person has the floor when speaking and there is no interrupting or side conversation. Open the floor for discussion after each person has responded to all questions. Possible discussion questions are as follows:

- What did you learn?
- What was the most interesting or surprising response?
- How will you work towards making changes/improvements?

Discussion

This activity facilitates open communication and provides insight into individual and family dynamics. The family can be encouraged to try the activity at home with questions they generate either in session or on their own. A variation is to use colored beads or Lego® rather than candy.

About The Author

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Draw-Switch

Source: Sophia Labonté

Theme: Engagement and Assessment

Recommended Age Range: Five and Up

Treatment Modality: Individual

Goals

- Establish a positive and open therapeutic environment
- Increase open communication
- Gather information about the client

Materials

- Paper
- Pens or colored pencils

Description

The practitioner explains to the client that they are going to play a drawing game. Each will take turns drawing something on the same piece of paper to make up a story together. The story is to have a beginning, middle, and end. The client is encouraged to start the story so he/she can set the theme or choose a main character. The client is instructed to say “switch” when he/she wants the practitioner to take over. The practitioner then adds to the drawing and continues the story until he/she also says “switch” for the client to continue again. When it is the practitioner’s turn he/she can try to keep the same theme going or switch it so it becomes relevant or therapeutic for the client. For example, if the client starts the story by presenting a character and the practitioner knows the client is struggling with the birth of a new sibling, he/she can then add this character to the story. Incorporating a baby in the story can facilitate discussion about an issue that is clinically beneficial to the client. The game continues until the story seems to be waning or comes to an end.

Discussion

This activity can be used as an initial assessment tool or in later sessions to determine where the client is at in the treatment process. It can facilitate communication with clients who are resistant or who have a hard time talking. Drawing can help them express their feelings in a less threatening way. It also can be an engaging game to help establish therapeutic rapport.

By collaborating on the story, the practitioner can elaborate on treatment issues, highlight adaptive coping skills, or lead the story to a healthy conclusion.

Etch Assess

Source: Michelle Calvert

Theme: Engagement and Assessment

Recommended Age: Range: Six and Up

Treatment Modality: Individual

Goals

- Establish a safe and open therapeutic environment
- Gather information about the client
- Assess the client's impulse control

Materials

- One regular-sized or pocket-sized Etch-A-Sketch™

Description

The child and practitioner sit together, with an Etch-A-Sketch™ in front of them. Each person controls one of the knobs. Take turns moving each knob to create a picture. Observe the child's reaction while creating the drawing, the structure or randomness of the drawing, as well as how long the child is able to focus. After the child decides to stop, look at the picture and ask what the child sees. Letters and numbers may be found, as well as buildings, floor plans, and more. If the child views a building, floor plan, or other environment, ask the child to expand on his/her view and talk about what might be in the building and who might be there. The artwork can be copied for use in subsequent sessions if the Etch-A-Sketch™ is carefully turned over and photocopied.

Allow the child to shake away the picture after the art is completed and the discussion is over. This may be therapeutic to the child as it can demonstrate a safe way to release unwanted emotions.

Discussion

This activity is a useful tool that engages children. It promotes nurturing through closeness and encouragement as well as teamwork through collectively creating a piece of art. It also encourages open communication and creative thinking.

The practitioner is able to observe what the child needs and wants as well as how much control the child will take. The child's interpretation of the picture may provide insight into his/her thoughts and feelings.