SANDPLAY THERAPY

A Step-by-Step Manual for Psychotherapists of Diverse Orientations

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PREFACE

In a small tray of wet or dry sand the client arranges sand with or without miniature objects and creates a scene. The client, using the senses of touch, sight, sound, and smell, brings into physical form her/ his innermost conscious and unconscious thoughts and feelings. Sandplay, through the use of active imagination and creative symbolic play, is a practical, experiential tool that can create a bridge from the unconscious to the conscious, from the mental and the spiritual to the physical, and from the nonverbal to the verbal. Often a client does not have words or intellectual understanding of the source or solution of her/ his difficulties, pain, or conflict. When this dilemma occurs, sandplay provides an opportunity for the client to represent in images what is happening in the person's inner or outer world. That is, the images become a language through which the client can communicate unconscious material to the therapist and to her/himself, resulting in greater understanding and behavior change. Like art therapy, the visual form supplants verbal interchange and bypasses the defenses of the client. The additional advantage of sandplay is that it allows the client to create aspects of the entire issue with symbolic objects that can be touched and easily changed. This process of play helps the client move from feeling like a victim of experiences to being a creator of experiences. When the therapist trusts the unconscious mind of the client to reveal its own unique and perfect path to self-discovery, deep transformational work can occur for both the client and the therapist

Sandplay is now surfacing as a powerful tool for therapists of various

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therapeutic orientations. The World Technique, the predecessor to Jungian sandplay, was developed by Margaret Lowenfeld, a British pediatrician, in the late 1920s. Sandplay has found its place throughout Europe and the United States. Historically used primarily as a medium for children, sandplay is rapidly becoming a tool also utilized with adults, couples, families, and groups for healing, personal growth, communication enhancement, and problem-solving. Sandplay is utilized in outpatient and inpatient mental health facilities, hospitals, private practices, agencies, schools, and businesses. Although sandplay is typically practiced by mental health professionals, it can be very effectively employed for the same purposes by nurses, primary, middle and secondary school teachers, graduate school professors, supervisors and students, and organizational behavior facilitators trained in this approach.

As co-authors, we would each like to tell you how we came to sandplay.

Barbara: Before I tell you about my professional journey, I'd like to relate the story about the first sand world I created. A colleague had recently learned sandplay and asked if I wanted to construct a sand world in a tray. I had already been using sandplay with children, and I found the prospect of creating my own tray intriguing. But to my surprise, I was initially hesitant. In thinking about this afterwards, I realized that my experience with sandplay had come from the therapist part of me, not from the playful child. I had been a conscious observer and holder of the client's experience and, although my unconscious was actively involved as the therapist, I was not familiar with sandplay from the client's side of the tray. I sifted the sand through my hands, forming shapes and moving the sand in a variety of ways. I reexperienced the many hours I had spent building sand castles at the beach as a child. But choosing objects did not come naturally. Eventually, I became more centered and began feeling more relaxed, allowing myself to move from cognitive awareness to more unconscious functioning. I began choosing objects and creating a world unplanned by my conscious mind. The results were astounding to me. I created a scene of a frolicsome mermaid located in the center of the tray looking out at the world around her (see illustration #1). In talking with my colleague afterwards, I was profoundly aware that the child within me was awakened. I realized that, although I certainly enjoyed my life and was often playful, there was



Illustration #1. Barbara's Initial Sand World

a reserve that I had developed that inhibited the child in me. It was then that I understood on a deeper level the profound implications of the sandplay process, as well as its usefulness for myself personally and for my adult clients.

My professional career began as an elementary school teacher in the 1960s. I found that when I created opportunities for children to express themselves and to work and play in their own unique ways, the greatest learning and growth occurred. The constraints of the classroom with its limited focus on academic mastery, combined with the size of my classes (30+ at the time), interfered with my desire to work holistically with each child and nurture emotional as well as intellectual development. That desire led me to graduate school in counseling. My first counseling experience was in an urban school setting, where I used play as a primary modality to draw out the children and help them develop and move toward healing. After I completed my second master's degree in psychology, I began working increasingly with adults and couples in a university counseling center and in private practice. I utilized a diverse range of techniques, including Gestalt therapy, hypnotherapy, narrative therapy, and rational emotive therapy, still reserving play therapy for children. I found that I was often better able to acquire information, gain understanding, and facilitate change, growth, problem-solving, and healing when I interacted with clients of all ages employing the more indirect modalities. I was able to access hidden material not readily

available at the conscious level. These indirect, creative, imaginative methods were often less threatening and allowed the client to more naturally express her/himself. However, I continued to use appropriate direct and verbal approaches, depending upon specific client needs and situations.

In the 1980s, I became more familiar with sandplay as a therapeutic approach via colleagues, books, and sandplay workshops. After I created my initial sand world and continued to do my personal sandplay, I introduced the sand tray to adults in my practice. The results with these adults reflected the benefits that this modality provided. I increasingly experienced and trusted the power of the inner wisdom of my clients. When I think back to where this faith in others originated, I recall the unconditional acceptance that I received from my grandfather. It is this gift of acceptance that I want to share with my clients, honoring their uniqueness and trusting their process and inner wisdom. In the early 1990s, Anna, at that time an associate in the same group practice, participated in intensive workshops on the use of sandplay, which she shared with me.

Anna: There are many experiences in my life that have led me to adopt sandplay as an important modality for growth to be used with both clients and myself. I will mention only a few. My earlier nursing practice with children, involving both psychiatric care and medical surgical nursing, stressed the importance of the physical being and taught me how it interacts with the emotional, cognitive, and spiritual aspects of each person. At that time, and later as I watched my own children grow, I became increasingly aware of the value of play in the individuation process. I noticed that the senses of touch, sound, sight, smell, and taste greatly enhanced and facilitated this movement. I also realized that I could provide guidance, but that ultimately each child needed to determine and take charge of her/his life to become a healthy adult.

In the late 1970s I returned to graduate school to study child and adolescent counseling. Play and family systems therapy were the basic interventions taught, with an emphasis on treating the whole person and system. Although I was introduced to sandplay early in my career as a psychotherapist, I recognized it as an intervention for children only. From the first time I witnessed sandplay used with children, I realized that this was no ordinary technique. The children were drawn to the sand and figures like metal to magnets. They seemed lost in time and space, with no apparent memory of the present as

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they played. Never having used sandplay personally, I did not understand the power of this approach for adults. In my private practice I specialized in the area of physical and sexual abuse, working with children, adults and families. I became increasingly cognizant of the importance of respecting and trusting each client's inner wisdom, which could direct her/his unique healing process. I also realized that the child did not disappear as the adult emerged. Even as an adult, play remained essential to release creativity and feelings.

I found that using less directive, nonjudgmental techniques gave clients permission to be themselves and to fully explore their own processes. Gestalt, hypnosis, storytelling, and other play techniques were successful on the intellectual and emotional levels. However, there still seemed to be something missing. It became evident that adult clients as well as children had difficulty breaking through physical blocks related to body memories. After reading several books on sandplay, employing a colleague's sandplay room with selected adults and children, doing my own sand trays and studying extensively with Dr. Gisela De Domenico in Oakland, California, I realized that sandplay could indeed create that necessary physical link. Physically recreating, experiencing, seeing, touching and shifting the symbols that reflected the client's issues and traumas facilitated dramatic movement.

Barbara and Anna: In the late 1980s and early 1990s, we began to co-facilitate workshops for therapists and educators on innovative approaches to working with children including sandplay, as well as a variety of play and storytelling techniques. After a few years, it became clear to us that greater benefits would derive from an in-depth, focused workshop on sandplay therapy. Initially we concentrated on sandplay with individuals, both children and adults. By the mid 1990s we expanded the trainings to include how to use sandplay with families and couples, finding it an invaluable tool to enhance communication around problem areas within relationships. We continue to use sandplay extensively for ourselves and our clients, teach workshops, present seminars, and consult with university faculty, training them in the use of sandplay and in the creation of a sandplay room. We also present demonstrations and professional development workshops for therapists in Montana and at conferences throughout the United States.

The conception of this book originated from suggestions of therapists who attended our sandplay therapy workshops. There is a paucity of books published on sandplay therapy, although the number is slowly increasing. The books and articles that are available successfully describe the history, theory, and value of sandplay and present in-depth case studies. However, we know of no book that delineates the specific step-by-step *mechanics* of how to use sandplay. We decided that to fill this void we would write a practical guide to doing sandplay.

In this book we do not adhere to any one theory or approach. We have, however, adapted Gisela De Domenico's phases of a Sandtray Worldplay session and find them very useful. Although our theoretical tenets may differ somewhat, we have found her philosophy of working with clients very similar to ours and her paradigm of conducting sandplay very effective. The methods she developed directly served as a foundation for our format. Much of the seminal sandplay work as developed by Dora Kalff and perpetuated by Jungian analysts has come from a Jungian perspective. We comply with the distinction that Harriet S. Friedman emphasized in her presentation at the Association for Play Therapy International Conference (San Francisco, 1995), referring to Kalffian Jungian Sandplay with a capital "S" and sandplay which has diverged from a strict Jungian approach with a lower case "s." For those of you who prefer a strictly Jungian approach or would like to review extensive case materials, there are several books annotated in the suggested readings list at the end of this book. We do not present complete cases and analyses of clients' work. However, we do illustrate aspects of the sandplay process by sharing experiences of clients' journeys in their sand trays. We have altered the names and particulars about the clients to conceal their identities. The examples reflect our successes and mistakes. In the interest of clarity, we have chosen to remain simple and directive in our writing. We have struggled with the use of a masculine or feminine pronoun when referring to clients and therapists. Taking into account both readability and fairness to both sexes, we arrived at: s/he, her/himself, and her/his, etc. We use we when describing work that either of us has done as therapists individually instead of identifying which one of us worked with the illustrated client. When we give instruction to the reader, we directly address the reader as you; in other instances, we write in the third person. A glossary is appended at the end of the book in order to elucidate how we use particular terms.

We do not propose that this book replace training. We believe that firsthand experience is the most efficacious method to learn and internalize knowledge and skills. For that reason our workshops are primarily experiential. Although experience is the best teacher, a guidebook can be very helpful in introducing, reviewing, and strengthening a skill. Sandplay Therapy: A Step-by-Step Manual for Psychotherapists of Diverse Orientations is such a guidebook.

OVERVIEW OF SANDPLAY

What Is Sandplay?

Before we begin, we would like to relate the story of a sandplay experience we had with one of our clients. Alice, a 40-year-old divorced woman, had come to see us when she began to remember severe childhood sexual and physical abuse by her grandfather. Using hypnosis, Gestalt, and cognitive therapy, she worked through many issues. However, she remained resistant to the idea of play as a form of therapy. Play had not been a part of her life, and the idea was threatening.

Near the end of her therapy process, she stated that there was one traumatic incident with her grandfather that continued to follow her into her daily life. As a young child, Alice was very willful. Her grandfather, in his rage over her lack of adherence to his demands, shoved Alice into a small cage filled with little birds and locked the door. Alice lay silently shaking at the bottom of the cage as the terrified birds fluttered, scratched, and pecked at her. That was where her memory ended. Throughout her life she had been unable to be near birds without a feeling of dread. She would become pale and begin to shake even at the sight of feathers. In the session she relived the memory, but the power of the incident had only been slightly diminished. We suggested that sandplay might be able to help her with this trauma in ways that other therapies had not, because it would allow her to actually physically see and touch the objects that she feared. Because she trusted us at this point and was anxious to rid herself of this phobia, she decided to try sandplay.

As she entered the sandplay room and began looking at all the objects, she suddenly froze. She became very pale and began to shake, unable to speak. However, she pointed at two bird wings lying on the shelf. Finally she turned her head away from the wings and burst into tears. When she calmed down she shook her head, repeatedly saying, "I just can't touch them. I can't even look at them!" After a minute of silence we finally asked, "Would you like to continue if we place the wings and feathers where you want them?" "Yes, I think so," she said. "I really want to finish with this. I don't want my grandfather continuing to ruin my life." We gently took the wings and feathers she identified and placed them into the specified positions in the tray. As she continued working in the tray on her own, memories of the incident crystallized. She realized that the association between the birds and her grandfather was what caused this phobia. The birds had meant her no harm (see illustration #2).

Toward the end of the session, Alice tenderly picked up one of the wings and held it to her heart. Tears spilled onto her cheeks and onto the wing as she stroked and whispered to it. She stood there for some time, crying and talking. When she was done she smiled, laughed, and then said, "I'm done." In our discussion with Alice at the end of the session, she indicated that it was important for her to mourn for her past so that she could leave it behind. We asked how she might be



Illustration #2. Alice's Sand World