

CLAIR MELLENTHIN

# ATTACHMENT CENTERED PLAY THERAPY



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## FOREWORD

The field of play therapy has sorely needed a book detailing the contributions of attachment theory, as articulated by John Bowlby in England, and how to integrate the groundbreaking theoretical concepts into a practical guide for child therapy. This book by Clair Mellenthin meets that need and more. More, because it is written in jargon-free prose and absent the mechanistic language of objects-relations theory, which, in my judgment, has stunted the growth of attachment theory's influence in the United States. Although Bowlby was noted for his work on attachment dating back to the 1960s, it has only been in the last two decades that it has received the attention it deserves and to a large extent due to the contributions of neurobiological research, especially the remarkable synthesis of neurobiological and attachment research by Daniel Siegel.

*Attachment Centered Play Therapy* builds on the pioneering contributions of Helen Benedict and her research program at Baylor University that for decades studied the play therapy themes of young attachment-disordered children. What Clair Mellenthin has uniquely contributed is the masterful integration of prior attachment-based approaches, notably Theraplay, with family systems approaches; Filial Therapy; and Family Play Therapy, pioneered by Eliana Gil, who was originally trained as a Marriage and Family Therapist. By including consideration of the attachment needs and styles of individual family members, and the nature of the family system itself (enmeshed vs. disengaged, for example), the play therapist is guided to cast a much larger net. The casting of the larger net by inclusion of the family is evidence-based and increases the efficacy of the play therapist's work.

The emphasis on *attachment wounds* and engagement in family play therapy to heal the ruptures in primary relationships is crucial and is not always emphasized in play therapy writings. Repairing ruptures, broken connections, and cut-offs in families is supported by the findings of seminal attachment researchers, such as Edward Tronick, well known for his "still-face" experiments, which demonstrated that the repair of a rupture in attachment strengthens the bond, not just restores it to its previous relationship status. Mellenthin gives practical examples of family play therapy interventions to accomplish these repairs and to restore through the powers of play the broken connections. The playfulness naturally embedded in play therapy creates a

healing context for the connections to be restored or, in some cases, built for the first time.

A thread that is weaved throughout the beautiful tapestry of this heart-driven book is the understanding, exquisite skill, sensitive attunement, and compassion of the therapist. Mellenthin rejects the “one size fits all” approach and carefully assesses the specific needs of each child and family seeking her help. The author’s clients are fortunate because her deep caring and commitment to her therapy clients are evident on every page of this book. She is the kind of therapist I would hope to find when my family needs a therapist. Reading the stories of her healing journeys with even the most complex cases, such as Charlie in the chapter on trauma, was particularly heartwarming for me. Charlie is a good example of the kind of children that I call “fawns in gorilla suits,” who are so often misunderstood and too often receive shabby treatment in the systems of care available to them. Not in this case: the dedication of the therapist, the caseworker, and the Treatment Family all played a key role in this child’s turnaround.

The organization of the book lays out in logical sequence the basis of secure attachment, which is the most robust contributor to resilience, and the different forms of insecure attachment displayed by those who due to no fault of their own miss out on the incomparable blessings bestowed by consistently loving and protective parents in the early years. The descriptions of forms of insecure attachment are spelled out in language that laypersons, such as teachers and parents as well as mental health professionals, will find highly readable and intuitively sensible. What follows is a focus on the implications of disruptive events that can threaten the attachment bonds of a child and the family, including separation, divorce, developmental stresses or transitions, poverty, death, and trauma. While the practical techniques for intervention to address attachment wounds resulting from adverse childhood experiences will be appreciated by play therapists, this is not a cookbook detailing an endless variety of possible techniques. In contrast, the interventions at the end of each chapter follow extensive discussions of the clinical issues surrounding each of these developmental challenges, including divorce, grief and loss, death, and trauma. I commend the author for her thoughtful and developmental research-informed reviews of each of these important adverse childhood experiences that can derail healthy childhood development but will not necessarily do so if proper intervention is offered. The discussions around grief and trauma were particularly comprehensive, rich, and informative. Another compelling feature of this book is the lively, interesting, and illuminating stories of children and

families in the case studies that detail both the challenges and the creative and resilient resources for healing in each of these children and their families.

The play therapy field has been waiting a long time for this book to arrive. I couldn't be happier that it was written by someone I deeply respect and consider a valued friend as well as colleague. Clair, because of her natural warmth, empathy, and compassion, is a powerful healer of the broken connections and disrupted attachments that, unhealed, can create havoc for generations to come.

David A. Crenshaw, PhD, ABPP, RPT-S

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Artwork: Rebecca Romney King

All identifying details, including names, have been changed. This book is not intended as a substitute for advice from a trained professional.

# INTRODUCTION

What we are all seeking and yearning for in this life is the chance to be truly seen by another – and then celebrated, comforted, and accepted for what is witnessed and observed. This place of honor in relationships is paramount to a person's sense of *Self*, the inherent dignity of a person, rooted in mutual respect, and self-love. Throughout my many years as a clinician and play therapist, I observed time and time again that this experience of harmony and homeostasis – this beautiful dance of delight in one another – was missing from too many of the clients who entered my office.

*Attachment Centered Play Therapy* was developed to assist the many parents and children who desired a closer connection but lacked the knowledge and internal resources to create this. Many of the parents of my child clients would often comment “*I just don't know how to reach my child*” or “*I decided I am not going to be the type of parent like my parents were to me*” and “*I just don't know what else I can do.*” These parents desired and needed not only parenting strategies and behavior modification plans, but to have *their* stories heard and validated just as much as their child did. By creating a secure base for the parent, change started occurring in the parent-child relationship. I realized over the years that by excluding the parent in the child's therapeutic journey was like trying to solve a jigsaw puzzle with only half of the pieces.

Throughout the writing of this book, it has been astounding the many stories others have shared with me about their own attachment wounds and losses. It is most often a stranger stopping by to ask what I am writing and as soon as the words come out of my mouth, describing attachment and trauma, their story starts pouring out of theirs. These stories came from the barista pouring my drink, the bellman holding the door open, the grocer and the bagger, the couple strolling down the sidewalk, and my children's friends and their friend's parents. There are so many people walking around with invisible wounds leftover from early childhood traumas, particularly within the parent-child relationship.

Each of us is yearning to be seen in our story – not blamed or belittled or ignored – but truly seen for who we are. For who we were in that moment of terror or triumph, for who we are now standing before you, waiting for the chance of vulnerability and trust to unfold. It is my hope that in these pages of

this book, you will not only find helpful play therapy interventions and resources, but a new framework for understanding and assessing family relationships through the lens of attachment theory integrated in play therapy. For if we are to truly create lasting change – our work needs to be centered in healing the most important of relationships, the parent and child.



# 1

## ATTACHMENT THERAPY DEFINED

### Introduction

Attachment is an idea core to human social and emotional development. It's a phrase that is used quite often in the world of clinical psychology and has been described as "*a lasting psychological connectedness between human beings.*" This lasting psychological connectedness describes why and how we can still feel connected to people, even if there have been long periods of space and time since the last time we've been able to see them or spend time together. Consider loved ones from long ago who may have passed away. If you were particularly close to them, you can probably still feel the tender pull of your heartstrings and remember standing close to them or hearing their laugh. This is what it means to have a *lasting psychological connectedness*.

Throughout this book, you will learn how attachment patterns are created, why attachment is so necessary in human relationships, and how you can develop a healthy *interdependence* in your relationships with others. You will also walk away with a toolbox of useful play therapy interventions and an understanding of why and how to use each intervention with your client populations. For the purposes of clarity, throughout this book, the word "parent" will be used to describe whomever may be acting in the parental role of child-rearing - regardless of if it is a biological, adoptive, foster, step, or kinship placement; grandparent; etc. Also, the phrase "attachment figure" refers to someone who provides support, protection, and care (usually the parent).

### The Origin of Attachment Theory

Attachment theory has been in existence for several decades. Many refer to British psychiatrist John Bowlby as the father of attachment theory; in the 1960s, he was one of the first to recognize and study the importance of the bond between parent and child. Around the same time, American psychologist Mary Ainsworth began studying infants and mothers, specifically how their interactions (or lack of interactions) impacted the child's development and emotional regulation. Since these early days of theory, we have come leaps and bounds from just theorizing about the importance of attachment to understanding the innate biological need of attachment. We also know that this is not just a developmental milestone and need in childhood: early attachment is crucial to laying the foundation for a lifetime of strong attachment in relationships.

Bowlby described attachment theory as "an attempt to explain both attachment behavior, with its episodic appearance and disappearance, and also the enduring

attachments that children and other individuals make to particular others” (Bowlby, 1988, p. 29). Attachment behaviors are the seeking out of others for the comfort of security and/or maintaining proximity to one who is “better able to cope with the world” (Bowlby, 1988). Both children and adults engage in these behaviors when faced with fear, a sense of threat, loss, or abandonment. They are most observable when a person is experiencing fatigue, fear, loneliness, illness, or is overwhelmed by caregiving. The attachment figure being sought after may be a parent, a teacher, a caretaker, a friend, or even a perceived better-abled peer if there are no adults available who are perceived to be emotionally and physically safe. Depending on the nature of the child’s patterns of engagement, these attachment behaviors may be highly adaptive or maladaptive, from seeking out reassurance and touch in a healthy, secure relationship to dramatically acting out with behavioral and emotional outbursts when the relationship is insecure. The wide range of attachment behaviors that children can exhibit all have the goal of seeking connection and proximity to someone who can protect and care for them.

### **Spectrum of Attachment**

Traditionally, mental health clinicians were taught to view attachment as relational patterns fitting into four neat little boxes: Secure, Insecure, Avoidant, and Disorganized. In reality, however, attachment, like humans, tends to be messy and not so easily categorized. Instead, it flows along a spectrum and is unique to each individual relationship. This is why it is not atypical when working with a client family to find that a parent has a secure attachment with one child but a more ambivalent attachment with another child. Between parents, there may be an avoidant attachment, where they avoid uncomfortable feelings or situations and move away from one another emotionally instead of pulling closer.

As clinicians, we must be aware and mindful of the uniqueness of each relationship and their individual attachment patterns as well as the attachment pattern that the family system manifests. These patterns of attachment ebb and flow along the lines of the attachment spectrum depending upon the developmental stage of the child and family, the impact of trauma upon the system, as well as the nature and individual characteristics of each individual member of the family (Figure 1.1).



*Figure 1.1* Spectrum of Attachment.

It is important to note that no one is 100% securely attached or, on the other side of the spectrum, 100% chaotically attached or unattached. We all land somewhere in the middle or tend to fluctuate within the same scope of the spectrum in most of our relationships. For example, an individual who has a relatively secure attachment will likely weather life's storms and the impact of trauma while maintaining their relative secure base. Their attachment patterns may waver and move toward the less secure area of the spectrum as they are healing from trauma, but they will be much more likely to be able to retain some secure level of attachment, even through the trauma process, and repair and rebound much easier than an individual without this foundation.

Individuals who typically fall under the more severe avoidant or chaotic side of the spectrum are more likely to remain within this scope of the spectrum and may even become more relationally disorganized, especially when experiencing grief, loss, and trauma. However, they still manifest attachment needs and attachment-seeking behaviors – these just may be more maladaptive than a child whose emotional needs have been consistently met.

## **Hermit Joe**

Consider the following factitious example of an adult manifesting attachment-seeking behaviors: imagine a town long ago, where settlers had established homesteads. Everyone in the community worked together to provide for their families. Everyone except a hermit named Joe. Joe lived far away from the town in a small cabin and kept to himself. But every Tuesday at 1:00 pm, Joe made the journey to town. When the townspeople saw him approaching, they would avoid him and quickly shuffle their children away from such a strange and unkempt man. Joe went to the general store to buy a bottle of whiskey. He would grunt and glare at the shopkeeper as he helped him purchase his item. He would then leave without a word. However, Joe came to the store every single week at 1:00 pm on Tuesday without fail and repeated this ritual over and over. What the shopkeeper didn't know (and Joe himself most likely didn't understand) was that Joe was trying to get his attachment needs met through their interactions. Joe wasn't polite or friendly, and he certainly did not have strong people skills, but even still, he wanted to connect with someone.

I sometimes wonder how many Hermit Joes in our world go unnoticed or unrecognized. Individuals who may not have strong communication skills but still ache to be connected to others (as we all do) and attempt to meet their attachment needs. Is there anyone in your life that you can think of who fits this description?

## **Key Concepts of Attachment**

The four key concepts of attachment theory come from the work of Dr. Susan Johnson (2004), who developed Emotionally Focused Therapy™ (also known as EFT). In EFT,

identifying the attachment patterns between partners and within families is crucial to the healing process. Dr. Johnson refers to these attachment behaviors as “the dance” between romantic partners as well as between parent-child relationships. Interestingly, these types of attachment behaviors look similar across ages and relationships. For example, a young child may have learned early that the only way to receive attention from an emotionally unavailable parent is to act out or throw tantrums. The parent gives the child his/her full attention, if only momentarily, and regardless of if this attention is negative, the child’s attachment need of being *seen* (more on this in Chapter 3) has been met. This same child may carry these attention-seeking behaviors into adulthood and use them in adult relationships, possibly acting out when feeling threatened or afraid of abandonment. This grown adult may tantrum just as a younger child would until the attachment is available to them.

The key concepts work together like building blocks in forming healthy attachments in our relationships. One of the ways I like to teach these key concepts is to visualize this as the framework for building a home.

### *Secure Base*

The first key concept is a secure base. Let’s visualize this as the foundation to a home. A foundation is crucial for the house to be able to withstand the wind and rain, much less the pressures from the ground it is built upon. Our relationships are similar in that a secure base is the attachment figure’s ability to serve as a home base for a child to explore the world around them. There is an inherent message that *“the world is safe, and I will be here for you, to help you and protect you.”* This is a beautiful dance to witness between parent and child; the child has the permission to go out and explore the world, knowing that their attachment figure will be there when they need to return for comfort and acceptance. When a secure base is not present, the child is taught the opposite – *“the world is not safe, and you are not safe without me.”* If a parent believes the world to be scary or dangerous and believes the only way to protect their child is to refuse permission to explore on their own, the child comes to believe similarly. This has the potential to create significant insecurity within the child and leaves them feeling emotionally paralyzed and scared to go out and explore the world. The child learns that the world is scary and that others cannot be trusted to keep him/her safe.

### *Safe Haven*

A safe haven is the second key concept. I like to think of the safe haven as the floor of the house, giving us something firm to stand on. To create a safe haven, the attachment figure can give comfort and soothing to the child in the face of anxiety or threat. Renowned child psychologist Daniel Siegel also refers to a safe haven as a “safe harbor,” which is a beautiful metaphor (2011). A harbor is a shelter that protects the ships coming into port, shielding them from the waves and rough water. A harbor also provides a safe place to refuel, rest, and repair before the ship sets sail again. Isn’t this what we want all of our