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## Play Therapy: What it is and Why it Works

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### Early Development

The first five or six years of life are filled with major developmental milestones. By the time a young child is ready to attend school, they have learned to walk, talk, and feed themselves, but they have also learned a number of other crucial skills that make it possible for them to learn and grow. Typically, we hope young children are on their way to having the following skills:

- to trust and find pleasure in their close relationships
- to focus attention and plan
- to use their bodies confidently to play, to learn, and to relax
- to wait for what they want
- to show consideration and empathy for others
- to take pride in their achievements

Of course, these skills are a work in progress for nearly all young children—they can take years to completely master. But sometimes children can have significant problems in one or more of these skills areas. They may have trouble regulating their strong feelings and act out impulsively and with aggression; they may have a lot of anxiety or fears that keep them from exploring and learning; they may be defensive and distrusting of others. The grown-ups in their lives may see that they are unhappy, and worry that development doesn't seem to be headed in the right direction.

### What Causes Problems in Young Children?

Children's emotional and social problems can have a variety of sources.

Some problems might be caused by trauma. It is easy to see how a traumatic experience like physical or sexual abuse, having a parent die, or being in a car crash can interfere with a child's developing sense of safety. Traumatic experiences often lead to anxiety symptoms, which might include sleeping problems, irritability, aggression, difficulty separating or bouts of crying.

Other problems might stem from the child's neurological or developmental differences. For example, Steven had trouble trusting the sensory input he experienced: sounds were too loud, lights too bright, and touch was overwhelming. His lack of confidence in his body led to worries about the world being unsafe. Over time, he became quite fearful of new experiences and oppositional with his parents.

Some problems can be traced to an environment that makes it hard for caregivers to be sensitive and available to the child. Financial stress, community violence, or the parent's own mental health or medical concerns can all have a huge impact on parents, and on their children. For example, Rosalie was an angry toddler who threw many tantrums. Over time, it became clear that Rosalie was disconnected and fearful about her relationship with her mother due to the mother's preoccupation and mourning of the death of an older sibling.

Sometimes issues come up when the child's temperament just doesn't seem to fit well with the parents' own expectations or rhythms. A persistent, irritable baby who needs an unusual amount of patient soothing can overwhelm a fast-paced, active parent. This may lead to a pattern of mutual disappointment and lack of pleasure in the relationship. Eventually, the child may develop negative ideas about who she is and what she can expect from the world.

Sometimes the child's problems are nearly impossible to trace to a single event or circumstance. Still, it is clear the child is unhappy or functioning poorly and needs help.

### **What is Play Therapy?**

The goal of play therapy is to return the child to a normal developmental path. Children use play all the time—at home, at school, etc.—to learn about the world, and about their own capabilities. Play is where children practice integrating ideas, feelings, language, and the “rules” of being part of a family and a wider community. In many ways, play is the work of childhood. Play is important for therapy because children don't really have the words to fully describe their thoughts and feelings the way grown-ups do; play lets them show their concerns in a “language” that is at their developmental level. Play also helps them feel a little bit safer about expressing strong feelings: they can pretend that it's the doll who is worried or angry, not them.

The play therapist provides a safe, structured environment where the regular demands of everyday life can be momentarily set aside. The child is helped to understand that the therapist is a trusted person whose job it is to help kids work on their problems and worries in order to feel better. The therapist invites the child to lead imaginative play. When a child presents a play story or theme (often repeating it many times), the therapist comes to understand his or her concerns.

The therapist is often brought directly into the play and acts out a role given to her by the child. In the case of Steven, the child who was fearful of new experiences, the therapist was told to do the same thing over and over again in a strict tone: Steven was so fearful of loss of control that he needed to manage his therapist's every move. Over time, as he became more trusting of the therapist, he was able to tolerate her having a few ideas of her own about the play. Together, Steven and his therapist could develop new ways of managing fears without having to be so rigid. These ideas came out in the play first but eventually Steven was able to use them in other parts of his life. Steven was able to feel a sense of mastery: he could control his fears rather than being controlled by them.

Play therapy develops curiosity about the “why” of feelings and behaviors, which leads to greater self-control. Stacy, a child who was socially isolated, played out a story where a group of animals were repeatedly knocked down by the T-Rex. The play therapist might wonder aloud what is going on with the T-Rex, eventually helping Stacy understand that the T-Rex is angry about being left out, that he also feels sad and lonely, and that there are other options (besides aggression) for expressing these common emotions. For Stacy, that means knowing that feeling angry makes the T-Rex (and Stacy herself) want to hit, but that there are other options: saying “I'm mad!” stamping feet, asking for help, leaving the room, etc.

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Young children often get surprised and frightened by the intensity of their feelings, and they may feel ashamed of the things they do when they are extremely upset. When their sense of self-understanding and self-control goes up, their anxiety and behavior problems often go down.

## **What Play Therapy is Not**

The play therapist does not, and cannot, take the place of the parent. It is a special relationship that offers both unusual freedoms (kids play and talk about whatever they want) but it also has limits. The play therapist does not expect parents to try to duplicate the play therapy environment at home, where the rules and expectations are different. However, there may be important things parents can do at home to support their child's progress. Regular (at least monthly) parent-therapist meetings are critical to making play therapy most effective.

The play therapist is not the sole expert. Play therapists have special training and experience working with a variety of children and their problems. But the parents are the experts about their individual child. That's why it is so important to work together to come to a shared understanding about each child's own problems and ways to help him or her. Again, regular parent meetings are important for making sure everyone is "on the same page."

The play therapist is not a reporter. Depending upon the age of the child, some amount of confidentiality about the details of the therapy is often helpful. Children often worry about their parents' reaction to what they say and do in this special environment, which can have a restricting effect on their play. For instance, Rosalie, the toddler whose mother was emotionally unavailable, might show a lot of fierce anger in the play therapy session. This is helpful because it gives the therapist a greater understanding of Rosalie's problems. However, simply telling Rosalie's depressed and overburdened mother about the details of the sessions would cause more problems. Instead, the therapist would likely talk with the mother in general terms about the impact her unavailability has on her daughter. Parents should feel free to bring up any concerns they may have about what is going on in therapy. The therapist will be glad to address these concerns.

Play therapy is not (usually) a quick fix. Often, by the time a family arrives for play therapy, there have been a lot of upset feelings about the child's behavior. Parents are worried or worn out and hope for a quick fix. Unfortunately, many common child problems are the result of patterns that have developed over time, and it is difficult to change an established pattern quickly. We all have trouble letting go of old behaviors (if you've ever tried to change a behavior pattern—being late, stopping smoking, being absent-minded—you'll know what I mean). Kids need lots of practice with new ways of thinking, feeling and behaving before they make important shifts in their "outside" lives. Parents may see improvements that then seem to disappear. This is normal as the child tries to integrate these new ways of doing things.

The good news is that, because kids are developing and changing all the time, they are usually able to take advantage of play therapy and work hard, through play, on the obstacles to their development. This is one of the reasons it is so rewarding and fun to work with them.