third edition

Partners in Play

An Adlerian Approach to Play Therapy
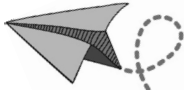
Terry Kottman and Kristin Meany-Walen

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Partners in Play

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As usual, to Jacob and Rick, my permanent partners in play.

To the memory of Byron Medler, who gave me permission
to be myself.

To Jeff Ashby, who continues to help me figure who that is.

—With love, Terry

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From Kristin:

To Skyler—for inspiring me become a better person, and for giving
me lots of opportunities to practice Adlerian play therapy!

To Terry Walen—for being my partner in life.

To Terry Kottman—for believing in me and trusting me with this book.
I hope to make you proud.

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Preface

I (TK) have spent the last 3 decades "making up" Adlerian play therapy—a method for integrating Adlerian concepts and techniques into the practice of play therapy. Helping professionals (mental health counselors, school counselors, social workers, psychologists, psychiatrists, day-care workers, teachers, principals, and any other professionals who interact with children in therapeutic ways) 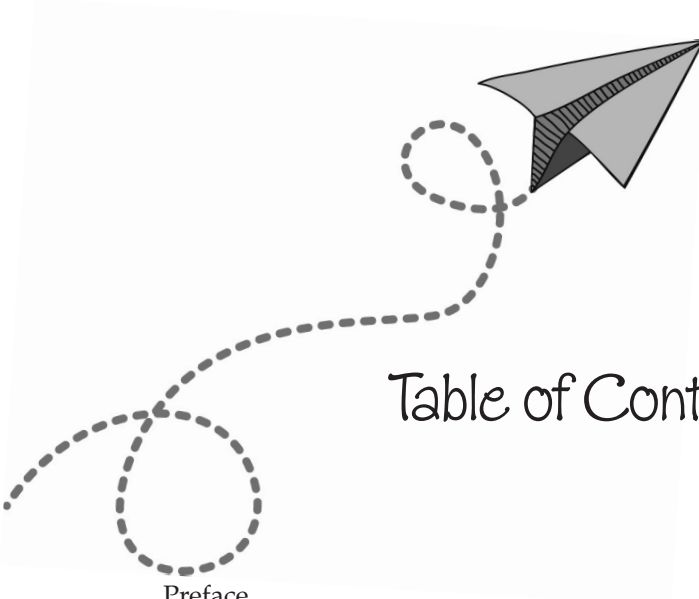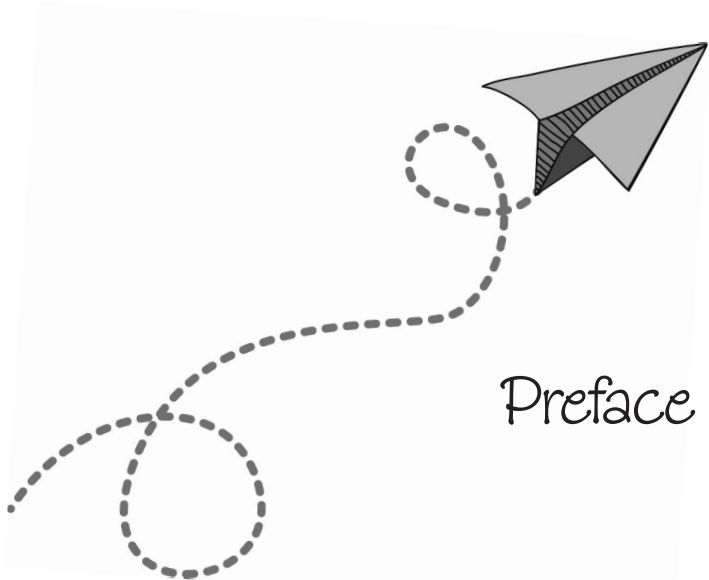can use Adlerian play therapy in their work with children who are experiencing emotional, behavioral, or academic problems. (Because there are many different professionals who wish to pursue training as play therapists, we simply use the term *counselor* or *play therapist* interchangeably throughout the remainder of the book.) Actually, the book can be adapted to help anyone (including adolescents and adults) who is able and willing to use play as a vehicle for communication, but this book is dedicated to working with children.

Adlerian play therapy is a process in which the counselor (a) builds an egalitarian relationship with the child client; (b) explores the child's lifestyle; (c) develops hypotheses about the intrapersonal and interpersonal dynamics of the child's difficulties (from the perspective of the child and from the perspectives of other people in the child's life); (d) designs a treatment plan for the child and for any other individuals who have a strong influence on the child (e.g., parents and teachers); (e) helps the child gain insight and make new decisions about self, the world, and others; (f) teaches the child new skills for relating to others; (g) helps the child practice new skills for interacting with others; and (h) consults with parents and teachers, working with them to develop more positive perspectives on the child and to learn encouraging strategies for interacting with the child.

There continues to be increased concern about the mental health of young children. Many helping professionals are recognizing a need for increased ability to communicate with children using children's language—the language of play and metaphor. Consequently, the field of play therapy is expanding rapidly. The Association for Play Therapy has grown from a

tiny group of friends who got together to talk about working with children to an organization with approximately 6,000 members. The association has established criteria for registration of play therapists and play therapy supervisors. Many professionals who work therapeutically with children all over the world have expressed a desire to acquire the requisite training and supervised experience to become qualified play therapists.

This increased interest in the field of play therapy was one of the primary reasons why I wrote the original version of *Partners in Play: An Adlerian Approach to Play Therapy* (1995). I believed then that practicing counselors and counselors-in-training need practical application-oriented guides for using play to communicate with and help children grow in positive directions. I still believe this. In the ensuing years, I have continued to learn more about children and families (from my son Jacob, from other children, from parents, from teachers, from other counselors, from my students, from workshop participants, and from books describing new, and sometimes old, ways of thinking about and interacting with children and their families). On the basis of these ideas and experiences, Adlerian play therapy has continued to evolve. Since I wrote the first edition of this book, I have added many strategies for conceptualizing children, piloted new techniques for working directly with children and with parents, and developed a systematic method for designing a treatment plan for both children and parents (and for working with teachers and other school personnel when appropriate). This evolution prompted me to write a second edition of *Partners in Play* in 2003. As time has passed, the world of play therapy has continued to grow and evolve, as have Adlerian play therapy and my understanding of children, families, and schools. In the past several years, I have been repeatedly asked to write a third edition of *Partners in Play* but was reluctant to do so—I was afraid I didn't have anything new to offer even though I have relentlessly (obsessively?) studied a wide-ranging plethora of subjects (leadership, life coaching, dance and movement, sand tray therapy, trauma and its effects on children, and energy, just to name a few). I approached one of my former students (now colleague), Kristin Meany-Walen, an amazing young woman who has already made a significant contribution to the field by conducting research studies and writing about Adlerian play therapy. I asked her if she would be willing to collaborate with me on a new edition of the book. And she said, "Yes!" Hint: She wrote the chapter in this book on research, which is not my forte. Writing this book with Kristin has been a delightful experience, with Kristin inspiring me, grounding me, keeping me moving toward completion. In addition, it has turned out that the two of us have a lot to offer. (Who knew?)

Development of Adlerian Play Therapy

Now . . . before we get into the meat (and potatoes for those vegetarians out there), I wanted to include a small story about the genesis of Adlerian play therapy. When I was taking my doctoral practicum class, clients were sparse. One day, the professor asked, "Who in this class has taken a

course in play therapy?" We all stared dejectedly at him. None of us had taken a course in play therapy. Next he asked, "Who has taken a course in counseling children?"—still no reply. Finally, looking a little desperate, he asked, "Who has experience working with kids? Aren't any of you teachers?" I raised my hand, rather timidly, having realized that I really did not have the kind of background he wanted me to have. I said, "I used to teach elementary school. Now I counsel in a high school. I have some background in working with young children but not counseling them."

He replied,

> It will have to do. We need this client. We just don't have enough to go around this semester. I'll have a doctoral student who has a lot of experience and training in play therapy supervise you by watching every session. It will be like on-the-job training. You'll do fine.

With that comment, I started on a learning process that I hope will never end. I began to learn about using toys and play to communicate with children.

This particular client, Claire, was a child who lived in a foster family. Her birth parents had decided the previous year that they no longer wanted the responsibility of caring for a child. They had dropped their 7-year-old daughter off at the local shopping center and left town. Child Protective Services had placed the little girl with a foster family. Claire was dealing with her abandonment and her grief and hurt by being aggressive toward the other children in the family. During the years she had lived with her birth parents, Claire had not experienced a great deal of structure and supervision. She had pretty much gotten to do whatever she wanted to do. Now that she was living in the foster home, she was having difficulty adjusting to having structure and rules. She was verbally abusive to her foster parents and blatantly violated all of the family rules.

Although Claire's foster parents wanted her to participate in some form of counseling, they had neither the time nor the resources to get her to the clinic. Part of my responsibility in having Claire as a client was to pick her up at her day-care center and drop her off after we were finished.

Quite truthfully, when I read the intake form on Claire and her life, I was terrified. This reaction was not necessarily rational. I had taught emotionally disturbed children with problems much worse than those described on the intake form. However, teaching them and being their counselor seemed worlds apart, and I was afraid that I would not be able to help Claire. Even worse than that, I was afraid that my lack of training, my not knowing how to do play therapy, might even hurt her.

I spent that entire week trying to become an instant expert on play therapy. I stayed up late every night and spent the entire weekend reading books on play therapy. I borrowed class notes from students who had taken play therapy courses from Dr. Garry Landreth and memorized them. I spent several hours on the telephone talking to the doctoral student who was going to supervise me. I observed experienced students at the counseling center doing play therapy with children. Almost all of the information I gathered was about *nondirective* play therapy, an approach in which the

counselor focuses on reflecting what the child is saying, doing, and feeling in the belief that when children's feelings are expressed, identified, and accepted, they can accept their feelings and that frees them up to deal with them (Landreth, 2012). This was 1984, and there was little written in the field, and almost all of it was focused on nondirective strategies.

By the time I drove over to the day-care center to get Claire, I was a walking (driving) encyclopedia on nondirective play therapy. However, I was a little concerned about two things: my personality and my theoretical orientation. From what I had seen in my observations and read about nondirective therapy, I was not sure whether my personality and the way I usually interacted with people—especially children—was consistent with this approach. I tend to be rather bouncy and loud. My interpersonal style and my counseling style tend to be directive and active rather than nondirective. I was also having cognitive dissonance in that I had already decided that Adlerian theory fit the way I conceptualized people and I believed therapy helps people to make changes in their lives. I was not sure how I was going to reconcile those beliefs with the nondirective perspectives on people and change.

I had anticipated that Claire might be hostile and unwilling to go to the university center with me. Contrary to my prediction, she was jumping up and down with anticipation. She was feeling very special about coming to the university. Claire and I had a nice chat in the car on the way to the center, getting to know each other and being a little silly. She told me some about her "real" family and her foster family—who she liked best in each and what she liked to do with them. I think I was more nervous than Claire. We were both going on an adventure, but she was more confident than I was that the adventure would be a positive one.

When we got to the clinic, I took her on a little tour so that she could get used to the facility. We continued to talk and laugh together. Then I took her into the playroom, and I said, "This is our playroom, and you can do many of the things you want to in here." I sat in the chair and watched her explore the playroom. I tracked her behavior and restated the content of the statements she made to me. Whenever I noticed her expressing a feeling, whether it was verbally or nonverbally, I reflected that feeling to her. When Claire asked me to play with her, I told her that I could tell she wanted me to play with her, but this was her time to play by herself. When our time was up, we walked down the hall and back to my car, laughing and talking. We repeated this routine five or six more times.

The feedback from my supervisor and my professor was positive, but I was rather uneasy. I felt uncomfortable and stilted in the playroom, as though I was trying to play a part. I felt that my rapport with Claire was better outside the playroom than it was in the playroom. In the playroom, I felt tense—trying to always say the right thing, the right way—and bored. I was watching her, trying to follow her lead and understand the thoughts and feelings she expressed, but it seemed as though she never allowed herself to show very many of her thoughts and feelings in the playroom.

I was also not always comfortable with letting Claire lead the way. She avoided revealing any thoughts or feelings about her family, her abandon-

ment, or her present situation in both her play and her conversation. She seemed to want to pretend that none of the sad or scary things in her life had ever happened. She liked to pretend that she was a fairy princess who could control all those around her with her magic wand. Even though her foster parents reported that her behavior was still out of control at home, she acted in the playroom as though everything in her very chaotic life was perfectly under control. Although I realized that the play therapy process was gradual, I had a certain sense of urgency. If Claire's behavior did not improve, this foster family was also going to abandon her, and then she would face another rejection and upheaval in her life. I was not sure how to get to all of these problems simply following Claire's lead.

One day, on a drive back to the day-care center, all of my doubts crystallized when Claire said,

> Terry, why do you act like a funny, fun person on the way to the playroom and on the way back to day care, but you act kind of weird in the room with the toys? You don't smile very much, or laugh, or ask any questions. All you do is sit there and tell me what I am doing and saying. It's like you're not a real person in the playroom.

I realized at that moment exactly what the problem was. I was not a real person in the playroom. I was what I thought a nondirective play therapist should be, and that was not the real me. I was leaving my personality and my beliefs about people, my most valuable tools for helping people, outside the door of the playroom. I decided then and there to figure out a way to use both my personality and my beliefs about people in the playroom.

Because I already knew my personality and the way I viewed people fit with Adlerian theory when I was working with adults, I started researching Adlerian views about children. The majority of Adlerian therapists worked with children in the context of the family or schools, in the form of family therapy, parenting information for parents, or classroom management programs for teachers (Bitter, 2014; Lew & Bettner, 1998, 2000; Nelson, 2011; Sweeney, 2009). There were books, chapters, and articles on working directly with children, but none of the authors discussed in detail how to use play therapy from an Adlerian perspective (Adler, 1930/1963; Bordon, 1982; Dinkmeyer & Dinkmeyer, 1977, 1983; Lord, 1982; Nystul, 1980; Yura & Galassi, 1974).

I began to try out ways of bringing my personality and my beliefs about the nature of people into the playroom with Claire and with my subsequent play therapy clients. I took courses and workshops from professionals who were experienced in different approaches to play therapy. I also received extensive supervision in my counseling with children and their parents. Adlerian play therapy evolved from this process. Over the years, I have continued to experiment with ways of integrating the practice of play therapy and the concepts and strategies of Individual Psychology. Adlerian play therapy is not a finished approach; it is still evolving. Kristin and other professionals are helping fuel this evolution. I hope that reading this book helps you to be more real with your clients

and that you take the ideas that make sense to you and use them to better understand and help the children with whom you work. It is essential to get training and supervision from experienced professionals, whether you are developing skills in a new area of counseling or perfecting the skills that you have already. Consultation with other therapists can help us continue to grow, both personally and professionally.

Overview of the Chapters

The primary focus of Chapter 1, "So, What Is Play Therapy and Why Should We Care?" is an explication of the various elements of play therapy, such as the rationale for using play and toys as a part of the therapeutic process, toy selection, arrangement of the playroom, and types of clients appropriate for play therapy.

Chapter 2, "How on Earth Can You Combine Adlerian Theory With Play Therapy?" contains a discussion of various concepts essential to the understanding of Individual Psychology, including social embeddedness and social interest, lifestyle, purposiveness of behavior, Crucial Cs (connect, capable, count, and courage), personality priorities, feelings of inferiority, mistaken beliefs, private logic, and creativity and self-determinism. In Chapter 2, we briefly introduce the four stages of Adlerian therapy and the way these phases are operationalized in Adlerian play therapy, the goals of Adlerian play therapy, and the role of the counselor in Adlerian play therapy.

Chapter 3, "What Is Up With This Kid? Using Adlerian Concepts to Understand Children," is a guide to the various Adlerian concepts used in this approach to play therapy to help the counselor gain an understanding of children and their dynamics. The emphasis is on the Crucial Cs, goals of misbehavior, and personality priorities. We use case study vignettes to illustrate concretely how the counselor can apply these concepts with children in play therapy.

In Chapter 4, "Consulting With Parents and Teachers? Oh Dear!" we start with an explanation of the importance of including parents and teachers as active participants in the Adlerian play therapy process and a discussion of techniques for involving parents and teachers and keeping them involved. We explain methods for (a) building a relationship with parents and teachers; (b) exploring the lifestyle of parents and teachers and gathering information about their perceptions of the child's lifestyle; (c) helping parents and teachers gain insight into their lifestyles and into the child's lifestyle; and (d) reorienting and reeducating parents and teachers by teaching encouragement skills, behavior management skills, and communication skills. Personality priorities and Crucial Cs are key elements in this process, so this chapter includes descriptions and examples designed to illustrate how these concepts can be applied to consultation with parents and teachers.

Adlerian therapy depends on an egalitarian relationship between the therapist and the client. Chapter 5, "Where Do I Begin? Building an Egalitarian Relationship With the Child," presents ideas on how to build

a democratic relationship with the child in play therapy. It contains a discussion about how you can use (a) tracking, restating content, and reflecting feelings to help the child feel comfortable in the playroom; (b) metacommunicating and returning responsibility to the child to convey understanding and respect to the child; (c) questioning strategies to communicate interest in the child's life; (d) actively interacting with the child, including role-playing techniques and other relational tools to make a strong connection with the child; and (e) cleaning the room together to strengthen the relationship with the child. In the last section of this chapter, we include a case example to illustrate how to use these skills to build a relationship with the child.

Encouragement and limiting are essential elements in Adlerian play therapy. In Chapter 6, "Just Say 'Yes!' Just Say 'No!'? Encouraging and Limiting," you will learn how to use encouragement to build the relationship with the child, help the child gain self-confidence and a sense of self-efficacy, and help cement changes the child has made in his or her behavior and attitudes. This chapter provides an explanation of how you can tailor encouragement strategies on the basis of the Crucial Cs and personality priority of the client. In the second half of this chapter, we provide Adlerian techniques for setting limits, an explanation of appropriate limits, and methods for helping the child learn to generate alternative appropriate behaviors. This chapter closes with case examples designed to illustrate how to integrate the steps in the limit-setting process and a discussion of how to tailor strategies for limiting on the basis of the child's Crucial Cs, goals of misbehavior, and personality priorities.

Adlerian therapists view lifestyle as the individual's characteristic way of understanding situations and interacting with others. As you explore the child's lifestyle, you will begin to understand how the child views self, the world, and others. Chapter 7, "Who Is This Kid, and How Did He Get This Way? Exploring the Child's Lifestyle," contains various strategies you can use to investigate the child's lifestyle, including exploring the atmosphere and birth order in the child's family and early recollections. The case example begun in Chapter 5 is continued, illustrating a practical application of this phase of Adlerian play therapy.

In Chapter 8, "What Do I Do With All This Information? Developing Adlerian Lifestyle Conceptualizations and Treatment Plans," you will learn to take the information gathered in the exploration of the child's lifestyle and the exploration of the parents' lifestyles (and sometimes the teacher's lifestyle) and integrate all of these data into a formal conceptualization of the child (and parents and teacher when appropriate). This chapter also contains an explanation of how you can use this conceptualization and a systematic understanding of the intrapersonal and interpersonal dynamics of the child to develop a treatment plan for the child (and for the parents and the teacher when necessary). Conceptualizations and treatment plans for the child and her parents from the case study begun in Chapter 5 and continued in Chapter 7 help to make these processes more concrete.

Adler believed that clients will not change their behaviors until they gain insight into their lifestyles. The third stage of Adlerian play therapy

uses various strategies to help children gain insight into their lifestyles and behavior. Chapter 9, "Lions and Tigers and Bears, Oh My! Helping the Child Gain Insight," details ways to use metacommunication and tentative hypotheses, mutual storytelling and other metaphoric techniques, drawing and art, sand tray activities, dance and movement experiments, and adventure therapy techniques, immediacy, confrontation, and humor to help children begin to understand how they view self, the world, and others and how these perceptions affect their behavior. To help children generalize their learning, you will often point out connections between what happens in the play session and what happens in other places. A continuation of the case example from Chapters 5, 7, and 8 illustrates a practical application of this phase of Adlerian play therapy.

The purpose of the last stage of Adlerian therapy, described in Chapter 10, "How Can I Wind It Down and Wrap It Up? Reorienting–Reeducating," is to help the client learn new ways of viewing self, the world, and others; new ways of behaving in various situations; and new ways of interacting with other people. In this stage, you might use brainstorming and problem-solving strategies to help the child generate alternative perspectives and behaviors. You might also actively teach skills that the child does not possess, such as social skills, negotiation skills, and ways of sharing power. The playroom becomes a laboratory in which the child can practice these new perceptions and skills in a safe, nonthreatening environment. This chapter also contains information about introducing a second child into the play therapy process and terminating the play therapy. A continuation of the case example from the earlier chapters illustrates this phase of Adlerian play therapy.

Chapter 11, "Who Me? Conduct Research?" is designed to encourage you (and anyone else who might be interested) to consider conducting research into Adlerian play therapy. The chapter contains information about the research support for play therapy, in general, and about research supporting Adlerian play therapy. We also explore considerations for conducting research and provide a detailed description of the skills needed in each phase of Adlerian play therapy.

We have compiled some supplemental materials for you to be able to use in your work with children, families, and schools. We have included some of the appendices from this volume and some handouts for parents on working with children with specific goals of misbehavior and those who struggle with specific Crucial Cs. We also included a "cheat sheet" to remind you of what you need to be considering as you conceptualize and develop treatment plans. If you want to do research, we have provided you with the checklists you can use for measuring treatment fidelity. (You could also use them for supervision of Adlerian play therapist if you want.) You can find these supplemental materials with the book in the ACA Online Bookstore at www.counseling.org.
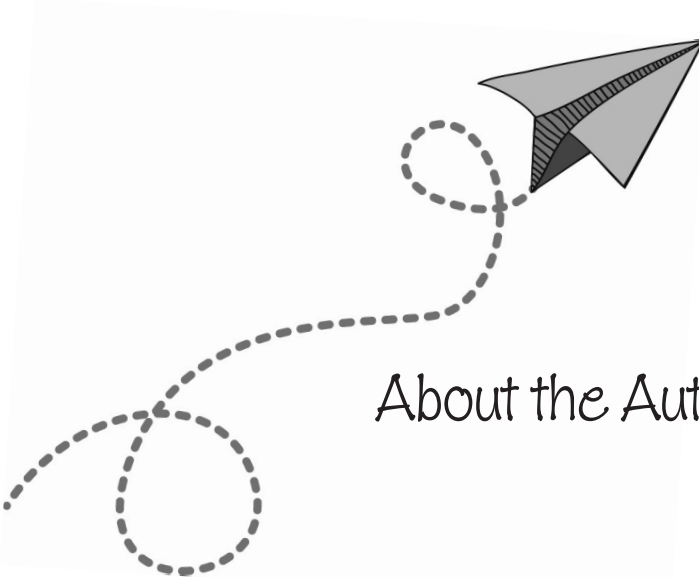
Acknowledgments

Thanks to:

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About the Authors

Terry Kottman, PhD, NCC, RPT-S, LMHC, founded The Encouragement Zone, where she provides play therapy training and supervision, life coaching, counseling, and "playshops" for women. Dr. Kottman developed Adlerian play therapy, an approach that combines the ideas and techniques of Individual Psychology and play therapy. She regularly presents workshops and writes about play therapy, activity-based counseling, school counseling, and life coaching. She is the author of *Partners in Play*, *Play Therapy: Basics and Beyond*, and several other books.

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Kristin Meany-Walen, PhD, LMHC, RPT-S, is an assistant professor of counseling at the University of Northern Iowa. Kristin actively researches and publishes articles that explore the effectiveness and implications of Adlerian play therapy. In addition to researching and teaching, she works with children and adolescents in school-based settings and private practice.

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