Specific Cases, Techniques and Approaches

No Small Change: Process-Oriented Play Therapy For Children of Separating Parents

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This article looks at a process-oriented play therapy for children adversely affected by parental separation. Process-oriented play therapy is a therapeutic method that involves the therapist directly entering the ‘world of play’ with the child, by amplifying various modes of expression and helping underlying meaning to emerge, in order to help children access aspects of their life they feel they have no say in. One particular case has been used as an example, involving ‘Jim’ (pseudonym) and his mother, who attended the play therapy session.

Keywords: child therapy, sand tray therapy, process oorientated psychology, family separation, expressive therapy

It’s nothing new. Play therapy and art therapy are two well-known approaches in helping children to express themselves. And it is no different for children who are suffering the effects of their parents’ separating. This large change in the family can create fear, anger and a sense of helplessness in children who are grieving for a home that once was (Harland, 2002; Hetherington, 1989, 1992). As a therapist, I have worked successfully with children affected in this way using a process-oriented approach. Process-oriented sessions produce astounding results, and bring new meaning to the term ‘the art of conversation’. Process-Oriented Psychology (also Process Work), developed by Arnold Mindell (1985), is a holistic and experiential therapy, which addresses the totality of a person’s moment-to-moment flow of experience. Mindell’s philosophical background is in Jungian Psychology, and Taoism, which assumes that whatever happens is part of a meaningful process of change and transformation. This means that even problems and disturbances in a relationship may contain value that, when explored, can bring new potential for growth to all involved.

Parental Separation

Parental separation changes a child’s world and demands a huge adaptation from the child. This adaptation can be to a new living situation — possibly moving house, living with a single parent, or living in two homes at different times of the week. It can also mean adaptation to new people in the family — stepparents, and step- or half-siblings. These changes can be demanding for all concerned, but particularly for children who haven’t been part of the decision-making process. It is not uncommon for the child to start having temporary symptoms such as nightmares, fear of monsters or other phenomena, as a consequence of feeling overwhelmed by these changes. Children’s visions, frightening in themselves, often involve experiences of being chased or pursued by big threatening things or animals. These nightmares and terrors show how their sense of powerlessness can lead children to feel completely outside themselves in this separation process (Mindell, 1987).

But not all children feel like this. Some show incredible resilience in adaptation and an acceptance of their new situations. Many children find strong support in their friends, peers, neighbouring families, uncles, aunties and family friends. When asked, some children reveal that for them, ‘family’ can include friends, pets and close neighbours with whom they feel a connection and support. The idea of family is clearly a subjective concept and its boundaries can be set differently by children and adults (Moore & Beazley, 1996).

Gary Reiss (2001) highlights how each instance of separation and divorce is an individual process, and how valuable it can be when all the family members are sympathetic to each other during the transition. Reiss quotes his six-year-old daughter, who describes her new family
situation as 'not too close and not too far'. When asked by her friends about her parents’ relationship, she answers, ‘My parents are very close and will always be friends, but they aren’t as close as they used to be’ (2001: 53).

**Play Therapy**

In a safe environment, a child’s concerns can surface while playing, or being encouraged to play. Offering the child a world of stories, magic and play invites open expression of these concerns. Various play therapy methods focus on the value of following the child’s natural process of play — creating stories through fantasy and visual expression. When the therapist uses imagery and imaginative interpretations, the child’s natural ego development and healing powers can be strengthened (Linden, 2003).

Heins (1988) explains how through relearning ‘child-think’ we can understand more about how children perceive their world, and through play create new ways for them to communicate their perceptions. A child’s play reveals both the child’s concerns and his/her preferred way of working with them. Externalising inner conflicts and feelings through play, for example using figurines to create the story, is fun and helpful for children and adults alike. Similarly Larner (1996) integrates play and spoken narratives to reveal the child’s understanding of certain family issues and how best to approach them.

Play and art can often provide a storehouse of energy, symbolic meaning and creativity. Assisting children to create stories with interacting characters can be a window to their feelings, needs and concerns (Schuitevoerder, 1993). When children express their understanding of their experience this can lead to changes in their behaviour and feelings. Initially, these changes in their play can appear either subtle, or overt. Later on, interpreting to the child the meaning of his/her shifts in play and behaviour can help to anchor and develop these changes. The work then depends on the child taking the next step in transferring the new behaviour in his/her play characters to his/her real life circumstances, both enjoyable and conflicted. This process reinforces the internal changes that the child is experiencing.

Children are likely to resist adult interpretations at these ages; for example, ‘I see you are feeling more powerful as a lion here, than in your life at home’ but it is more helpful to enter their story and say, ‘Ohoo this lion looks pretty strong and makes some wild sounds, I wonder what it might want to say …’

The work often leads to shifts in the child’s play, which operates on the symbolic level. In many instances children find meaning by staying in the ‘world of play’ and the meaning is experienced through the child’s identification with the figurines or toys and through the therapist’s interaction. This helps the child experience new aspects of him/herself, find a voice or access power in a safe way. Some children just laugh and feel relieved at the end of a session, not wanting to be bothered by integrative comments or questions. Others ask lots of questions and create new meaning from linking the ‘play’ story back to their lives. Either way, symbolic action in therapy can recreate the child’s realities and reshuffle his/her internal psychology in a meaningful, positive and creative way.

**Symbols and Conversation**

Play is the natural language of children. Adults who engage through play with children’s symbolic world can share their language. And in that language, using toys, names and actions, adults can assist a child to find new ways of dealing with fears and concerns. More specifically, *process-oriented* play helps children to communicate their experience by ‘playing’ in both verbal and non-verbal modes. Non-verbal modes are particularly helpful with smaller children who may have little opportunity to express their emotional and physical feelings, and have them acknowledged as meaningful. Process-oriented play therapy differs from other play therapy approaches in the way the therapist helps by amplifying sounds, movements or other signals played out through a figurine (secondary process aspects), in order to help the underlying meaning emerge and to assist in creating a new identification process (primary process).

The symbols and themes can be teased out therapeutically in different modalities; for example, a drawing or painting; drama and role-play with puppets and toys; or choice and use of figurines in a sand tray. The therapist can enrich the work with dialogue if appropriate (Schuitevoerder, 1996). Watching two figurines attack each other in the sand tray might suggest an unresolved relationship interaction, (possibly between parents or siblings). As the therapist ‘sprinkles’ in some sounds and verbal content, the child can develop a conversation in the role-play, and the story can become a conversation about the child’s issues with parents, siblings and stepparents.

Seeing which figures the child chooses to represent his/her family members and observing how they interact can be enlightening for parents, and gives them information far beyond what they could glean in an ordinary conversation. For example, one boy in my therapy session used a scorpion to represent his father, explaining, ‘Because he yells a bit and I don’t like it’. The father, who came into the room at the end of the session to see what the boy had created, was shocked. His way of communicating with his son seemed to change after that. The next time the boy made a sand tray story, he chose a lizard as his father. ‘Dad is a lot better now … he’s a lizard now… a lounge lizard’, the boy said. He laughed, while setting the lizard on a toy seat. Similarly Arad (2004) described a story-telling method in family therapy, asking children what animal they would choose to represent their parents and other family members. This helps family members to view dynamics in a more symbolic way and through the child’s eyes.

Not only through play with figurines, but also through symbolic actions in the therapy room, children give powerful messages that create shifts in their family. Scott describes parents trying to decide who should come to the therapy
session next time. ‘Just when negotiations reached an impasse, the infant took his first independent steps from his mother to his father.’ A moment later the child walked to the therapist. His mother said ‘That’s it, we all come here together’ (1999: 92).

**Process-Oriented Psychology and Family Therapy**

Process Work’s underlying principle is that nature has an implicit drive towards wholeness. Arnold Mindell, the founder of process-oriented psychology, created a theoretical framework using the opposite of psychoanalytic terms ‘primary’ and ‘secondary’ process to track the flow of experience and change. The ultimate purpose of this tracking is to allow that natural sense of wholeness to be created.

The terms primary and secondary were originally Freud’s; ‘primary process’ originally meant the primal aspects of the subconscious (unconscious), and ‘secondary process’ the ‘conscious/egoic’. Mindell (1985) reverses these terms. For Mindell, ‘primary process’ relates to all the aspects of our experience we identify with (conscious aspects). ‘Secondary process’ relates to aspects we don’t personally identify with, experiences that are somehow separated from us, such as accidental, unintended events, slips of the tongue, relationship issues such as interpersonal conflict, difficult behaviours, somatic symptoms, etc. (unconscious aspects).

We can recognise primary process statements by the use of ‘I’. For example: ‘I have red hair, I am feeling tired, I am a child/man/woman’. With secondary process, the experiences that happen to us that we don’t identify with are often expressed through the use of ‘it’. For example: ‘it irritates me, it (the headache) is draining me.

Primary process (our more conscious identity) and secondary process (the less conscious aspects of ourselves) are divided by what Mindell calls ‘the edge’. The edge is often created by our belief systems and can be experienced as a resistance to exploring secondary process. You might be discussing an issue and find that you are getting bored, feeling distracted, or discover that you are trying to change the topic. This might mean that you are at an edge, or a block to exploring unconscious aspects of yourself.

Whereas many therapeutic approaches find ways to get rid of a problem or an unwanted experience, Process Work goes the other way and sees value in exploring unintended, accidental or scary experiences. Whereas psychoanalytic thought is causal and sees these experiences as products of repressed material from the past, Process Work has a teleological view and sees these disavowed experiences as potential for the future development of the self.

Much like the Jungian idea of dreams assisting the conscious mind in understanding the unconscious (so a natural wholeness can then express itself), Process Work sees disturbing and disavowed experiences as a message from the secondary process to the primary process. Through exploration of disturbances and problems in a non-judgemental and careful way, new meaning, strengths and potential for change can be uncovered. This can lead to growth and expansion for the individual, couple or family.

Reiss (1993) explains that a child’s behaviour is often seen as ‘the problem’ and a disturbance to the rest of the family. Process Work sees a family system as a whole and the disturbance of one member as carrying a symptom or secondary process to the whole family system. Very much in line with systemic thought, Process Work sees the symptom as an indication of potential for positive change and growth.

When a child’s difficult behaviour is explored through play and interaction, the unfolded information can be a meaningful message, challenging the whole family to grow to a new level.

As Heins observes, children in family therapy often pick up cues to an adult’s distress even when no relevant words have been spoken (1988: 144). Reiss illustrates this fact when describing a family situation where divorcing parents both put painful feelings aside and made an effort to be kind to each other. They brought their child to therapy because of his aggressive behaviour towards his brother. Through the therapy it became clear that he was acting out the suppressed aggression felt by both of the parents towards one another. Once the parents got in touch with their own hurt and anger, and expressed (in an empowering way), how hurt and angry they were with each other, the divorce could progress, and the child no longer needed unconsciously to perform ‘acts of power’, like hitting his brother (1993: 64).

**Process-Oriented Play Therapy**

Process-oriented play therapy contributes to therapeutic work with children in several ways. One of its most important contributions is the use of therapist awareness to track thematic information found in communication signals embedded in children’s play (Mindell, 1987). These signals and themes often occur recurrently throughout the play and often embody a great deal of information about the child’s concerns.

Schuitevoerder (1992) sets out ways to invite light-hearted interaction between the therapist and child while playing with a sand tray. At times, the therapist aims to expand on the play that the child is creating in the tray. Schuitevoerder describes how one of her ten-year-old clients was creating a war with the use of warrior figurines. The therapist started to pace the child by making ‘war noises’ herself, to which the child reacted positively. She then encouraged him to play the warrior himself — using the therapist (protected by a pillow) as a target. The child was delighted and within the play found new energy and a release of pent up emotions and frustrations. In further sessions, the child was able to connect with internalised feelings of anger and sadness about his father’s death.

Young children roughly up the age of nine or ten easily follow their theme or story through different modes of experience (channels). For example, a child may start out by drawing of an airplane (visual channel), then make sounds for the airplane (auditory) and then make flying movements (kinaesthetic) as well as sounds, and eventually the child
moves around like an airplane himself. The process-oriented therapist follows the natural flow of the child’s interest through theme changes, impasses and ‘hot-spots’, or ‘edges’.

**Case Example: Jim**

When Jim came into therapy, it was play, rather than discussion post-play, that directly assisted his self-esteem and approach to others. But the effect didn’t stop there. This process-oriented approach also empowered his mother and became a pertinent message for Jim’s entire family.

In an initial session Jim’s mother, Jane, told me some family background and explained why she wanted to bring Jim to counselling. Jane had divorced her husband four years before. Their three children were living in both homes: with the mother during the week and the father for weekends. The children had adjusted well to this arrangement, but recently the father wanted more time with all the children during the week, and suggested they spend alternate weeks with each of them. While Sabrina (12), Milan (10) and Jim (6) had been trying to adapt to their new situation, Jim had become upset and clingy, as well as suffering from ‘bad scary dreams’. Jane asked me for advice. She was aware that the child should not be used in an argument with her husband, but believed Jim would rather go back to the old arrangement.

I asked Jane what held her back from talking things through with her ex-husband. She replied that she was nervous about creating more arguments with him, as there had been incidents of domestic violence some time ago. She talked about her feelings of insecurity and expected her ex-husband to say it was ‘unreasonable’ to return to the old arrangement. Jane was also worried that he would think she had influenced Jim.

Bringing Jim to counselling was Jane’s way to help her son express himself in the hope that he could say what he wanted to his father.

I explained to Jane that I didn’t think it appropriate for Jim to make such a decision, as he might feel divided in his loyalties. Instead, I suggested that she, as a parent, talk this matter through with her ex-husband, while keeping Jim’s best interests in mind. I also offered to help her, or both parents, to process this issue.

In the meantime, I offered to help practise her talk with Juan, and suggested a role-play. Initially she took Juan’s role and I spoke for her. Then we swapped roles. I noticed that Jane smiled as she took Juan’s role. When I asked her about her smile — she said: ‘It makes it much easier to say what I want. With his Portuguese accent and background, he just says what he wants. And I am so English and go along with everything.’

Reiss (1995) mentions the value of articulating the impact of cultural differences in relationships, because people’s cultural heritage often holds important information. My interest in Jane and Juan’s cultural differences was not in any way dismissing the impact of past domestic violence. Jane found some power in this role-play that she associated with Juan’s cultural background and she saw an aspect of her own Anglo culture that held her back from speaking her mind.

She said that this exercise helped her to clarify her own role and find her voice. She later told me that she had the interaction with her ex-husband, and didn’t become paralysed by his yelling and screaming on the phone, but managed to state a point of view that she thought good and reasonable.

**Session with Jim**

Jim came into the counselling room with his mother and walked straight to the toys on the shelf, picking some up. I decided to let Jim choose his figures and play for a while without asking him any specific questions. He chose figures including the fire-breathing dragon, a warrior on a horse, some trees, a dog, a princess. But the main interaction he played was between the dragon and the warrior:

The warrior is attacking the dragon, who keeps moving forward to counterattack, but the warrior keeps on attacking again and again. This movement back and forth goes on for a while, with sounds and no words: ‘Chhhhh, whoofff, zaapp! Zapp! Chhh!’

Silvia: ‘Oh this looks like an interesting story happening here!’ [In order to amplify the play and move it along, I join in with the sound effects myself, copying his sounds]. ‘Chhh, chhh!’ [And adding some new ones]. ‘Whooooaa zapp!’

Jim laughs and responds for the dragon: ‘Chchchhhhh’.

I take his laughing as positive feedback and now amplify the interaction by picking up the warrior to unfold the play further.

Silvia: [Aiming to find out more verbal and relationship information]. ‘Whoooooaaa zapp! What are you saying? I don’t speak Dragon language?’

Jim laughs and speaks about the dragon: ‘He is not saying anything. He is just breathing fire, ‘Chchchchohhh’.

I then enquire: ‘And who is the dragon?’

![Figure 1: Pictorial genogram.](image-url)
Jim laughs and putting his hand over his mouth (edge: he is touching on something 'disowned', an aspect of 'secondary process') in a shy way says: 'My dad!'

Silvia: 'Aha! and who is the warrior?'

Jim: 'Me!'  

Silvia: 'Ahaaa, and what is the dragon saying to the warrior?'

Jim: 'Nothing. He is still breathing fire and smoke …'

Silvia: 'And how does the warrior feel? Or what does he say?'

Jim: Shyly giggling again (edge), putting his hand on his mouth: 'You could be doing better than that!' Jim cracks up laughing, his hands over his mouth.

Silvia: [Encouraging, supporting the secondary process] 'Wow, that is what the warrior says? That is a courageous thing to say, isn't it? Tell me some more about it all …'

Jim: 'My dad, he is always angry. I don't like it. [Shaking his head vigorously but looking sad] 'I don't want it any more.'

For both Jim and his mother, feelings have been unexpressed or 'separated from self'. Through his play, Jim has been able to move his feelings from secondary to primary process — in fact, he has 'spoken his mind'. In order to unfold the relationship process further (relationship channel) I suggest that we swap roles so Jim can be the dragon (to get him to access some of his father's energy and use it more).

Silvia: Okay — how about you have the dragon and I have the warrior … [speaking as the warrior] 'I don't like it! Stop it! Go away!' [sneeringly shly to himself on the edge].

Jim: [As the dragon, with a smile, quite loudly] 'Chchchch chchchchchchchch!!'

Silvia: [As the dragon] 'Swoop! Chchch raaaaaaaaaaa raaa raaa chchch!!'

Jim: [As the warrior] ‘Stop it! Go away! ’[snickering shyly to himself (on the edge)].

Silvia: [As the dragon] ‘Do as I say! Chchch!'

Jim: ‘No! No! Don’t want to!’ [giggling (on the edge) to himself].

Silvia: [As the dragon] 'What do you mean—no? That is a cheeky thing to say to a serious dragon' [winking at Jim, to assure him that I am only playing a role, lest he mistake me for an authoritarian adult].

Jim: [As the warrior] ‘Don’t always yell so loud! Please! Don’t yell so loud! I can hear you anyway! Don’t scare me, please’ [new empowered voice, over the edge].

Silvia: [As the dragon] ‘Okay. Oooh, I am sorry I didn’t realise I yelled. Did I yell? It must be the fire in my breath … I forgot to turn off the fire this morning! Sorry. I didn’t mean to scare you.’

Both Jim and I laugh and giggle for a while. Then Jim gets earnest again and tells me that his dad gets mad pretty quickly and that he, Jim, doesn’t like it, but he doesn’t know what to do. Jim then said it makes him not want to go and visit dad sometimes. He is scared his Dad might be in a bad mood.

Then Jim decides to make a drawing of the dragon.

**FIGURE 2**

Dragon and warrior.

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**Discussion: Jim’s Case**

Being a powerful person is a role (resource) in the family system and in this case, Jim's father seems to have the most access to it. If all members feel more empowered and share this power around more, the family system will change. When Jim's mother speaks out and stands up for herself, the family system alters. This relieves Jim from the task of doing that for her. Since, up to now, Jim was unable to confront his father, he used his child ‘power’ to disrupt his school, playing up and drawing attention to himself, displacing his wish to rebel against the authority of his father, to a context where it was safer for him to rebel.
In the scary dragon, Jim found a voice in the play interaction I have just described, and thus, found his power to ‘speak out’. He could ‘be the scary thing’ and also ‘defend himself against the scary thing’, taking both sides of the relationship.

In Figure 3, we see a lot of fiery, angry red in the dragon. Surprisingly, the dragon’s breath is blue. When I asked Jim about that he shrugged his shoulders and said ‘Maybe the dragon is spewing water now, so it can cool down’. I suggested that it would be a big change if the dragon would ‘cool down’ a bit. Jim smiled and nodded.

At the end of the session, Jane and I talked alone for a minute. She said that Jim’s play interaction had been most enlightening, that she had learned something about her son and how he found his own voice. Later on, Jane told me that being part in this session and seeing her son’s play had encouraged her to speak up to her ex-husband even more, so Jim didn’t have to fight this battle, but just be a boy who has a voice.

In process-oriented terms, Jim’s primary process identity, the behaviour with which he identified at the time he first came to my office, was shy and quiet. (Once he accesses his power (secondary process), he is able to identify with his new, more outspoken behaviour (secondary process now becoming primary). Jim learns to speak out.

And, similar to how Schuitevoerder (1993) works in her case, I interact with Jim to elucidate the ‘underlying conversation’, which is ‘My father yells at me, and I am afraid. I wish I could tell him to stop.’

The sand play shows that Jim has fears of his father, who seems to be somewhat authoritarian. Jim seems to think that his father makes a lot of noise. In a playful way, he learns that he can start to confront his father by saying: ‘You could do better than that!’ The child left the therapy session strong enough to voice his own opinion to his father. At the same time, his mother also made a stand, going over her own ‘edge’ (boundary between secondary and primary process) in order to speak out. It was immediately clear for Jane that Jim’s ‘getting in touch’ with his strengths and self-assurance was a message for her to speak out herself. She understood that if she didn’t speak out, she burdened her six year-old son with that responsibility.

A process-oriented approach to play therapy is a useful and enriching method for working with children in a separation situation. It quickly and playfully accesses underlying concerns and helps the child to find a voice and new meaning.

References


Guidelines for Writing a Case Study for Publication in the Australian and New Zealand Journal of Family Therapy

The case study is both a time-honoured method of outcome research and a way of demonstrating the translation of clinical theory into practice.

For publication in ANZJFT, the case study may be written in whatever style best allows the author to convey the details of the case and their experiences of it. The case study should contain adequate detail in order that the reader gains an understanding of the client's situation, the therapist's thinking and the unfolding therapeutic process.

The identity of the client in the case study must be protected by changing names and any other identifying information. The alteration of key detail needs to be noted just once, when the client is introduced, or in an end note.

The following is a suggested guide for the development of a case study for publication. Authors preparing vignettes for other papers may also find these pointers useful:

1. Title, followed by brief abstract
2. Introduction, (or setting the scene) — this may include:
   - What was it about the case that was of interest?
   - What therapeutic issues did the case demonstrate?
   - How did the client experience the therapy? (The client's own words should be used if available.)
   - What were the successful aspects of the case?
3. Client details:
   - Name/s, age/s, race/ethnicity, family composition, family dynamics and any other demographic data that is relevant to an understanding of the case
   - The problem/s that brought the client to therapy
   - Brief description of any previous therapy or relevant history
4. The key elements of therapy:
   - Individual, family and wider system issues in the case
   - Successes and struggles (for both therapist and client)
   - Follow up and outcomes of therapy, including the client's perspective
5. Discussion:
   - Includes a description of the author's theoretical stance or understanding in relation to the process of therapy (e.g. models of therapy used, relevant literature on the presenting problem, etc.) There is no need for a full literature review.
   - How this case has influenced or changed your clinical practice
   - How the case has influenced the 'person' of the therapist
6. References

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