



## Mining Report – November 2016

Which *change drivers* might rock the play therapy world? APT *mines* recent mental health *intelligence* (i.e. publications) and disseminates quarterly Mining Reports with cutting-edge trends, emerging wisdom, and other information to play therapy practitioners, instructors, and supervisors. Consult the publications or links displayed for answers to the questions.

### Intelligence

#### How do four patterns of peer play behavior affect academic trajectories of Head Start children?

“The present study employed a person-centered approach to identify profiles, or subgroups, of children displaying early patterns of peer play behaviors in an ethnically and linguistically diverse Head Start program, and examined the academic trajectories of these children during one school year.” (Bell, Greenfield, Bulotsky-Shearer, & Carter, 2016, p.740).

- Identifies four major patterns of peer-play behaviors.
- Indicates children with patterns of high engagement and average engagement with above average disruption have highest academic gains.
- Suggests children with patterns of low engagement and low engagement with high disruption have lower academic gains.

Bell, E.R., Greenfield, D.B., Bulotsky-Shearer, R.J., & Carter, T.M. (2016). Peer play as a context for identifying profiles of children and examining rates of growth in academic readiness for children enrolled in Head Start. *Journal of Educational Psychology*, 108(5), 740-759.

Contributor: Elizabeth R. Taylor, PhD, LPC-S, RPT-S, Fort Worth, TX

#### Is an outdoor behavioral healthcare program effective in eliciting change in adolescents?

“This study is the first to examine trajectories of change in outdoor behavioral healthcare, to find diagnostic variables to be relevant, and to examine self-report outcomes past 12 months post- discharge” (Combs, Hoag, Javorski & Roberts, 2016, p. 3322).

- Reviews outdoor behavioral healthcare and current most common applications.
- Discusses treatment outcomes for outdoor behavioral health programs, including using feedback from participants during treatment

Combs, K.M., Hoag, M.J., Javorski, S. & Roberts, S.D. (2016). Adolescent self-assessment of an outdoor behavioral health program: Longitudinal outcomes and trajectories of change. *Journal of Child and Family Studies*, 25, 3322-3330.

Contributor: Amie Summers, LGSW, SEP, CCLS, Wayzata, MN

#### How can play therapists utilize the Child Attachment and Play Assessment (CAPA)?

“The CAPA provides a reliable means of assessing children’s attachment strategies” (Farnfield, 2016, p. 217).

- Presents a sentence-stem assessment measure for use in play therapy.
- Provides initial validity evidence for the Child Attachment and Play Assessment (CAPA).
- Discusses the benefits and limitations of the Child Attachment and Play Assessment (CAPA).

Farnfield, S. (2016). The Child Attachment and Play Assessment (CAPA): Validation of a new approach to coding narrative stems with children ages 3–11 years. *International Journal of Play Therapy*, 25(4), 217-229. doi:10.1037/a0038726.

Contributor: Vanessa Gaona, MEd, NCC, LPC-S, RPT-S, Houston, TX

#### Can a play intervention help young children with sleep problems?

“These preliminary results suggest that CBPI (Cognitive Behavioral Play Intervention) may be effective for decreasing anxiety and child distress when added to behavioral treatment, thus increasing the breadth of treatment approaches available for young children with sleep problems” (Fehr, Russ, & Levers-Landis, 2016, p. 306).

- Outlines a methodology for conducting a brief cognitive-behavioral play intervention for children with sleep problems.
- Discusses effects of CBPI, specifically improvements in the areas of anxiety, bedtime resistance, and fears.
- Identifies CBPI as an intervention with promising results for children with sleep problems.

Fehr, K. K., Russ, S. W., & Ievers-Landis, C. E. (2016). Treatment of sleep problems in young children: A case series report of a cognitive-behavioral play intervention. *Clinical Practice in Pediatric Psychology, 4*(3), 306-317. doi:10.1037/cpp0000153.

Contributor: Stephanie Pratola, PhD, LCP, RPT-S, Roanoke, VA

### **How can psychodynamic play therapy be utilized in treating selective mutism?**

"Psychodynamic play therapy, when used in treating selective mutism, focuses on how a child utilizes materials, which help in understanding the child and the mute behavior through symbols" (Fernandez & Sugay, 2016, p. 203).

- Discusses the use of psychodynamic play therapy in treating selective mutism.
- Discusses a case of a 9-year old child with selective mutism.

Fernandez, K.G. & Sugay, C.O. (2016). Psychodynamic play therapy: A case of selective mutism. *International Journal of Play Therapy, 25*(4), 203-209. doi:10.1037/pla0000034.

Contributor: Vanessa Gaona, MEd, NCC, LPC-S, RPT-S, Houston, TX

### **How does Child-Centered Play Therapy impact Hispanic children dealing with grief?**

"Children may experience traumatic grief when trauma symptoms interfere with their ability to grieve the loss of a loved one. Child-centered play therapy (CCPT) is appropriate to use with culturally diverse clients and with children experiencing trauma and grief" (Gonzalez & Bell, 2016, p. 146).

- Discusses cultural adaptations for counseling Hispanic children while using CCPT.
- Discusses impact on traumatic grieving of children and features of post-traumatic play.
- Presents a case study with play therapy session content and outcomes.

Gonzales, C., & Bell, H. (2016). Child-Centered Play Therapy for Hispanic children with traumatic grief: Cultural implications for treatment outcomes. *International Journal of Play Therapy, 25*(3), 146-153.

Contributor: Ryan Holliman, PhD, LPC-S, RPT-S, Dallas, TX

### **How does a child's play change during the course of psychodynamic play therapy?**

"Even though there is substantial evidence that play based therapies produce significant change, the specific play processes in treatment remain unexamined. For that purpose, processes of change in long-term psychodynamic play therapy are assessed through a repeated systematic assessment of three children's "play profiles" (Halfon, et al., 2016, p.1).

- Outlines varied in-session play profiles as conceptualized from a psychodynamic framework.
- Presents a model for linking play profiles to possible play therapy treatment outcomes.
- Discusses findings regarding play profiles and children with anxiety.

Halfon, S., Cavdar, A., Orsucci, F., Schiepek, G., Andreassi, S., Giulianai, A., & De Felice, G. (2016). The non-linear trajectory of change in play profiles of three children in psychodynamic play therapy. *Frontiers in Psychology, 7*(1494), 1-15.

Contributor: Ryan Holliman, PhD, LPC-S, RPT-S, Dallas, TX

### **How might using a narrative approach with parents of young offenders provide more information than a traditional needs assessment?**

"It is clear from the stories that it was not just the children who were experiencing the distress but the whole family" (Knowles, Eccles, Daiches, & Bowers, 2016, p. 451).

- Indicates that parents report traumatic histories similar to the traumatic experiences of their children.
- Reports that parents are less likely to be responsive to the needs of children in the midst of traumatic situations.
- Identifies critical transitional events which parents felt were important in the development of their child's offending behaviors.
- Emphasizes the importance of professionals having specific characteristics when working with families of young offenders.

Knowles, S. F., Eccles, J.R.F., Diaches, A., & Bowers, M. (2016). Exploring parents' understanding of their child's journey into offending behavior. *Clinical Child Psychology and Psychiatry*, 21(3), 447-460. doi: 10.1177/1359104515614876.

Contributor: Kenisha Gordon, PhD, NCC, LPC-S, ACS, RPT-S, Clinton, MS

### **What psychological features are protective factors in childhood development?**

"Researchers have noted the need, particularly when working with young people, to examine positive processes of development and how they can be considered protective factors of child development under adverse conditions" (Marques, 2016, p. 377).

- Investigates the relationships among hope, life satisfaction, and children's mental health problems and academic difficulties.
- Suggests hope and life satisfaction are protective factors in the transition from childhood to adolescence.

Marques, S. C. (2016). Psychological strengths in childhood as predictors of longitudinal outcomes. *School Mental Health*, 8, 377-385. doi:10.1007/s12310-016-9195-y.

Contributor: Yih-Jiun Shen, DEd, NCC, CSC, Edinburg, TX

### **How is the sleep of children with Autism Spectrum Disorder (ASD) impacted by bedtime media use?**

"Children with ASD who used media as part of the bedtime routine showed significantly greater sleep onset latency than those who did not (39.8 vs 16.0 minutes). Similarly, children who were exposed to media with violent content within the 30-minute period before bedtime experienced significantly greater sleep onset delays and shorter overall sleep duration" (Mazurek, Engelhardt, Hilgard, & Sohl, 2016, p. 525).

- Discusses the current understanding of the impact of electronic media use on sleep in children.
- Presents evidence that children with ASD spend more time on screen-based media than children without ASD.
- Explores group differences and implications for children's sleep patterns.

Mazurek, M., Engelhardt, C., Hilgard, J & Sohl, K. (2016). Bedtime electronic media use and sleep in children with Autism Spectrum Disorder. *Journal of Developmental & Behavioral Pediatrics*, 37(7), 525-531.

Contributor: Amie Summers, LGSW, SEP, CCLS, Wayzata, MN

### **What are the main concerns for parents when discussing their mental health issues with their children?**

"There is a general view from these studies that most children wanted more information and that having an accurate understanding of their parent's mental health problem (MHP) could be helpful" (Nolte & Wren, 2016, p. 731).

- Explores helpful responses of children based on information provided about their parents' mental health issue.
- Identifies qualitative themes of mutual protection when parents are experiencing mental health symptoms.
- Provides information to guide discussions with families regarding the impact of mental health issues.

Nolte, L. & Wren, B. (2016). Talking or keeping silent about parental mental health problems – a grounded theory of parents' decision making and experiences with their children. *Journal of Marital and Family Therapy*, 42(4), 731-744. doi: 10.1111/jmft.12177.

Contributor: Kenisha Gordon, PhD, NCC, LPC-S, ACS, RPT-S, Clinton, MS

### **How might fathers of at-risk children be engaged in fathers-only attachment-focused parenting groups?**

"The article aims to contribute to ongoing dialogue about the best way to successfully engage fathers in children's well-being, and raises the question as to whether working with fathers requires different skill-sets and approaches from the more familiar social work territory of working with mothers" (Scourfield, Allely, Coffey, & Yates, 2016, p. 260).

- Examines an intensive parenting group consisting of fathers from families with substantiated child protection concerns.
- Indicates participants value building relationships with facilitators and group members.
- Explores implementation of specific, practical changes in parenting skills.
- Suggests participants value feedback on videos of play sessions with child(ren).

Scourfield, J., Allely, C., Coffey, A., & Yates, P. (2016). Working with fathers of at-risk children: Insights from a qualitative process evaluation of an intensive group-based intervention. *Children and Youth Services Review*, 69, 259-267.

<http://dx.doi.org/10.1016/j.chilyouth.2016.08.021>

Contributor: Laura Tejada, PhD, LMFT, LCPC, RPT-S, Chicago, IL

### **How does Trauma Focused -Cognitive Behavioral Therapy (TF-CBT) compare to Play Therapy (PT) as a treatment for victims of child abuse?**

“Because of their widespread use, trauma-focused cognitive-behavioral therapy (TF-CBT) and play therapy (PT) were selected as treatments to be included in a meta-analytic study examining their effectiveness in aiding victims of child abuse” (Slade & Warne, 2016, p. 36).

- Presents a meta-analysis of play-therapy studies, aggregating results to provide consistent data about the efficacy of TF-CBT and PT.
- Discusses TF-CBT’s performance on three scales: internalizing, sexual, and parent report, which shows greater gains than the PT Group.
- Highlights that the PT group was more effective than TF-CBT on outcome measures of externalizing behavior.

Slade, M. K., & Warne, R. T. (2016, May). A meta-analysis of the effectiveness of Trauma-Focused Cognitive-Behavioral Therapy and play therapy for child victims of abuse. *Journal of Young Investigators*, 30(5), 36-43.

<http://www.jyi.org/issue/a-meta-analysis-of-the-effectiveness-of-traumafocused-cognitive-behavioral-therapy-and-play-therapy-for-child-victims-of-abuse/>.

Contributor: Stephanie Pratola, PhD, LCP, RPT-S, Roanoke, VA

### **How can one integrate play therapy into Emotionally Focused Family Therapy (EFFT) with preschool children?**

“Emotionally focused family therapy (EFFT) is an attachment-based therapy model that has been used with older children and adolescents. More recently, it has been suggested for use with young children.” (Willis, Haslam & Bermudez, 2016, p. 673).

- Describes the effectiveness of using Emotionally Focused Family Therapy, an attachment-based model, with older children, adolescents, and families.
- Proposes accommodating young children (4-6 year olds) when using Emotionally Focused Family Therapy.
- Presents play therapy strategies to incorporate when using EFFT with young children.
- Explores the benefits of using play therapy with EFFT over dyadic play therapy methods.

Willis, A.B., Haslam, D.R. & Bermudez, J.M. (2016). Harnessing the power of play therapy in Emotionally Focused Family Therapy with preschool children. *Journal of Marital and Family Therapy*, 42(4), 673-687.

<http://dx.doi.org/10.1111/jmft.12160>.

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Reader feedback regarding how these Mining Reports might be improved and made more helpful for play therapy practitioners, instructors, and supervisors is welcomed. Mining Reports are archived in the Members Only section of the APT website ([www.a4pt.org](http://www.a4pt.org)).