

## Kath – An Independent Play Therapist

I have been qualified as a play therapist for ten years, my previous qualification being in social work. I had been working in an adoption and fostering unit and my responsibilities included preparing children for their adoption placements. This one-to-one way of working interested me and I sought further training to help me understand how best to communicate with children. The training had three main components which were theory, supervised practice and personal therapy. At various times I found all three stimulating, inspiring, threatening and challenging.

I currently work as an independent play therapist and my work is divided in to two fairly equal parts – that involved with seeing individual children and that of being a play therapy supervisor. The children are referred to me by social workers in Social Services Departments, schools and by private individuals. I would say the children's problems are mostly related to their emotional needs not being met, either in the past or present. The result is behaviour that is hard to tolerate by parents, teachers or others in the child's life. Play is used by children as the primary means of self-expression and their play distances them from the real world so they can express feelings safely. I have a range of toys and art materials and invite the child to play, and am willing to take an active part in this if invited to do so by the child.

I find that understanding the child does not necessarily come during a play therapy session. I find the children's processes are, to a degree, intrusive and that this is an inevitable part of the work. Each time the child's process enters my mind, I think I develop a new insight or understanding which is crucial to my work. With this in mind, I do wonder how many children one should work with at any one time, but I do not have an answer to this yet.

When undertaking work with a child, I make a point of telling the parent that I like to talk with them at the end of each play therapy session. Issues regarding confidentiality have to be thought through but I do feel that the person caring for any child has a huge influence on day-to-day matters. If they are on board with ensuring the child's emotional needs are being met, then progress is more likely. Many play therapists hold this view and both I and increasing numbers of my colleagues are undertaking training in Filial Therapy. This involves teaching the basics of play therapy to a parent or carer. I teach empathic listening skills, role play skills, limit setting and the importance of structure in any play session. After a period of teaching and supervision the parent continues the work at home for as long as the child enjoys it.

Outcomes in play therapy are measured by holding regular review meetings for those involved with the child and deciding on the best way forward.

I currently co-run a children's group for those who have experienced domestic violence while their mother's attend their own therapy group. The children are clearly supported by the fact that others have shared experiences.

The theoretical underpinning of my work relates largely to attachment theory and the person-centred way of working. Other theories that inform are systems theory, social construct theory, biological theory (the workings of the brain) and psychoanalytic theory.

My supervision practice involves using these theories in a creative way with up to 10 supervisees and I offer a twice yearly opportunity to get together for a training day.

I would say the personal skills required for being a play therapist are having empathy with children and an ability to set limits when indicated, a sense of humour, an understanding of oneself including the impact that children have on one's emotions and physical strength if you need to carry toys around!

I am a full member of the British Association of Play Therapists and am approved by this body as a play therapy supervisor.

