PLAY THERAPY EXPERIENCES AS DESCRIBED BY CHILD PARTICIPANTS

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THEРАPISTS have their intentions in therapy clearly defined in their own minds. They have their theories and goals and methods of evaluating the outcomes of therapeutic experiences. In all likelihood there would be general agreement among all therapists that a “successful” therapeutic experience for a child would bring about marked and noticeable changes in the child’s behavior—physically as well as psychologically.

For example, reports from parents at the conclusion of “successful” therapy for the child include observations that the child is more relaxed, eats better, sleeps better, shows improvement in his coordination, no longer manifests overt behavior symptoms of tension or anxiety such as nail-biting, bed wetting, hair-pulling, or any of the other possible symptoms that he may have had prior to the therapeutic experiences. Usually the child is reported as being more cooperative, happier, more spontaneous in all of his behavior. In other words, the descriptions given of the child at home and at school indicate that the child has achieved adequate adjustability so that he functions with ease and enjoyment both individually and in groups. He has become a happy child in harmony with his world. From such observational evaluation, the therapist draws up a picture of what has happened to the child during the period of his therapeutic experience.

There are differences of opinion as to the dynamics that are in operation which facilitate these observable changes. Theories and explanations of process are varied. The perceptions of different therapists are often at variance. The question that is raised frequently is one that is a challenging and provocative one: What element or elements in all successful therapeutic approaches are the essentials that bring about these changes? Are the changes that are observed immediately after the termination of therapy lasting changes?

Speculation alone does not provide the answers, but research, followup studies, and investigations from various angles into the process might throw additional light in this direction.

METHOD OF THE FOLLOW-UP STUDY

As has been stated above, the therapists have their intentions in therapy, but how do the children perceive and experience the play therapy sessions? And what is the significance of this experience to them? How does the child size up the situation while he is participating in it? How does the child describe the experience at a later date? What would be indicated by follow-up studies of children who had completed therapy which had been evaluated as “successful” by parents, teachers, and therapists?

The study reported here attempts to explore possible answers to the above questions.

Out of 30 play therapy case records evaluated as successful, 22 of the clients
were available for a follow-up study. The other eight children had moved away and there were no forwarding addresses.

The procedures used in these interviews were as follows: The therapist met the child in an interviewing room and asked one introductory question, "Do you remember me?" There were no probing questions, suggestions, or directing of thinking other than those quoted in this paper. The purpose was to get any reactions the children might have had to their therapeutic experiences.

In the cases where letters were sent to the children, a copy of the following handwritten letter was sent to each child not contacted in the school personally.

Dear..............................:

We are interested in finding out what if anything you remember about the experience you had when we met in the playroom at (name of school or clinic) in the (date — season and year).

We would appreciate it very much if you could come in for a little talk with me—about that experience and about what you are doing now.

Will you please call (telephone number) and make an appointment so we can talk together again.—Or write on the enclosed card when it would be convenient for you to come in.

If you cannot come in, will you write me a letter telling me what, if anything, you remember about the experience?

It is quite possible that you have forgotten all about it. It has been a long time ago. If that is the case, will you just write on the card, "I don't remember anything about it," and mail it to me?

Thank you so much for your kindness.

Sincerely yours,

Name of Therapist

In all of the twenty-two cases referred to in this report, the child was the only one in the family who received therapy. The parents were not receiving any kind of treatment.

These cases were selected because first of all they were considered "successful" cases according to evaluations immediately following the termination of therapy and also at follow-up studies a year later. The reason for confining this study to "successful" cases only was to attempt to gain some insight into the children's perception of the experience, their interpretation of it, and their memory of it. Those cases wherein the child was the only recipient of therapy were selected to keep to a minimum any reactions to the therapeutic experience by other members of the child's family. If no other member of the family had had a therapeutic experience they were not likely to influence the child's impressions of it by their conversation, so that the attitudes toward the therapy which the child expressed would be the child's own attitudes.

CHILDREN'S COMMENTS DURING THE THERAPY SESSION

The first group of quotations from the children are drawn from recorded material during the play therapy sessions—those spontaneous comments that came forth unsolicited as the children were experiencing the therapeutic play sessions.

Betty, aged four, was referred for play therapy because she was "a feeding problem, had nightmares, had temper-tantrums, could not get along with other children because she was so bossy and scrappy" according to the mother's report. Betty was seen by the same therapist twice a week for a period of fifteen weeks. She was seen individually during one of her weekly sessions and at the other time in a group of three. Betty was told that each week for the group meetings she could bring with her two other people. One of the significant developments in her therapeutic experience emerged from her selection of the other two members. During one of the group sessions at which time she had brought two girls—one her age, the other girl a year older—the children were finger-painting. Each child had a complete set of colors but Betty continually
reached over for the paints the five-year-old was using. The five-year-old protested once in a very mild manner and then accepted Betty's behavior apparently not being very concerned about it. Finally Betty stopped pushing her fingers through the paint, rested her hands in the middle of the paper and said, "I wonder why I want every jar of paint she has? I wonder why? It isn't the color, because I have red, too. And it isn't because I haven't got any because I have just as much as she has. I guess it's just because she's got it and I wanta take it away from her and I wonder why I do that." She looked straight into the therapist's eyes for a long time. "I never thought about why I do what I do before," she added slowly.

At another time during Betty's individual play therapy session she encountered the limitations that had been set up by the therapist. She fussed and argued and expressed her feelings quite vividly. The therapist reflected back to Betty the emotionalized attitudes that she was expressing. Then suddenly Betty stopped storming around and said angrily to the therapist, "You don't care if I feel mad. You don't care if I feel glad. You don't care if I don't feel anything I do believe! Alright then! I'll feel all my feelings any old way they are!"

Jerry, aged seven, had just been indulging in creating a mess in the playroom—spilling water on the floor, throwing sand around. This was a new expression of Jerry's feelings. When he had begun therapy his behavior had been rigid, repressed, fearful. Suddenly he stopped pouring the water on the floor and cried out joyfully, "Oh every child just once in their life should have this chance to spill themselves out all over without a 'Don't you dare! Don't you dare! Don't you dare! Don't you dare!'"

During a contact several weeks later he said to the therapist, "It used to be I thought everybody was out to get me but I guess I been wrong. All people aren't bad people. Some people are good. You're good. Sometimes I'm good. Maybe—Say, listen—Maybe all people are some good and some bad just like me. Maybe you are. Maybe even Mom!"

Harold, eight years old, had been a behavior problem. He had spent several weeks in "destructive" play in the play room. On this particular day he rushed across the room and threatened to break the window—then as suddenly he stopped. "No," he said to the therapist. "I don't have to break that window. I don't have to go on acting like I always have. I don't have to do everything just because I get the idea to do it. I don't have to hit people just because I feel like hittin' 'em. I guess it's because I didn't know before I could just feel mad and in a while it would go away — the bein' mad and I would be happy again. I can change. I don't have to stay the same old way always because I can be different. Because now I can feel my feelings!"

These brief excerpts are examples of the child's present awareness of his experiences—are examples of his coming to terms with himself. He has stated himself in his play. He has seen himself in a different perspective. He seems to be developing a different self-concept as a result of his experience. This would seem to indicate that "insight" is the result of a personal experience wherein the child sees new meanings in his feeling reactions.

Joe, aged eight, suddenly stopped in the midst of his play and walked up to the therapist demanding, "Why do you just say what I say and think only what I think? I guess I can guess why you do. I'm the little me and you're the big me. I'm all of myselves and you're all of the other people in the world. You're my big shadow that I can make move this way and that and I can see just what I am being."

Mike, aged seven, cried out in sheer ecstasy, "Oh what fun this is to have bought up the whole world and owned it all for a whole hour on one day every week!"

Joan, aged five, had been very timid and shy and withdrawn. As the therapy progressed she gained courage to be herself and one day cried out, "It's me saying 'I will!' It's me saying 'I won't!'. It's me saying everything I think about and no slaps. Do you know who I am?"

"Who are you?" asked the therapist.

"I'm a little girl just five years old who can stretch up so big I reach clear around my world and hug it up in my arms." (She swept out her arms and gathered up the family of dolls, the little car, the toy animals — every..."
little toy she could manage to scoop up.) "And I can shrink down to be a baby and suck on my bottle and crawl around." (She dropped the toys, grabbed the nursing bottle, sucked on it and crawled.) "Little and big. Grow and shrink. And feel glad inside out!"

Then there was John, seven years old, not knowing how to handle his freedom. He stood just inside the playroom door and mumbled nervously, "What'll I do? What'll I do?" He was told that in here this hour he could do what he wanted to do with the toys and materials—that he could play or not play, which ever way he felt. But John was not able to make a choice and he repeated in a louder voice, "What'll I do?" Then he yelled at the therapist angrily, "Why don't you tell me what to do? Why do you let me just stand here? You tell me what to do!"

"So you want me to tell you what to do! Well in here, John, it's up to you to decide what you want to do."

John screamed at the therapist. "But I'm telling you to tell me what to do!"

"Yes," said the therapist. "You want me to tell you what to do and I am telling you to decide whether you want to stand there or do something else."

John's face grew red with anger. "I don't want to just stand here," he cried. "And I don't want to do something else. I want you to tell me (sobs) what—I should—do—"

"There isn't anything that you should do in here, John. That's why I don't tell you what to do. Because it doesn't make any difference what you do just so it's what you want to do."

John's voice dropped to a whisper and he said, "I'm afraid."

"Are you afraid, John?" the therapist said gently.

"Yes," John whispered. He came closer to the therapist and took her hand. "Mommy always tells me what to do," he said.

"I see, John. Mommy tells you what to do and when someone else tells you to make up your own mind, then it scares you?"

"Yes," John said. There was a long silence. Finally John said, "Would it be all right if I played with that little red car?"

"Yes, if you want to," the therapist replied. John edged over to the little car and began to play with it.

Five months and twenty-one contacts later John spontaneously referred to this first contact.

"Do you remember that scared silly little kid who was afraid of letting himself do what he really wanted to do?" he said to the therapist. "I can hardly remember that baby. 'Tell me what to do,' he mimicked. 'Scared as a rabbit then, that was me. But not any more. 'Cause now I know what I can do—what I want to do—what I will do."

These children's references to the experiences they were having at the time this new self-awareness was emerging occurs quite often during therapy. The manner in which the children express such thoughts—the tone of voice, the gleam in their eyes, the spontaneous gestures and expressions indicate that the play therapy experience is an emotional experience that brings about reorganization of meanings, concepts, feelings, self-understanding. It indicates that so-called intellectual insight is the child's awareness of these emotional experiences and that that insight which is effective in bringing about such reorganization always follows the emotional experience of sharpened awareness of the nature of his emotional expression. It raises the question of the relative position of importance between intellectual understanding of cause and effect as determinants of present behavior and the immediate emotional experience the individual has during therapy as the essential dynamic in the process of reorganization of the self.

Are these experiences significant to the children? How might one determine their significance? If we assume that significant experiences are those experiences that change attitudes and behavior; if we assume that they are remembered vividly long after the experience has passed; then it seems we might be able to judge whether or not such experiences are significant to the child.
Changes in attitudes and behavior were the criteria upon which the evaluation of the therapy as "successful" had been made. The attempt was then made to do follow-up interviews with some children several years after the therapy had been completed. The therapist who had conducted the therapy sessions personally did the follow-up studies. She had not seen any of the children between the termination of therapy and the follow-up interviews. Quotations from these interviews are presented here for the reader's contemplation. Does it seem to have implications for studying the nature of emotions, personality structure, learning theories, educational practices?

Tom, whose complete therapy experience was reported in Play therapy [1] was interviewed in his school five years after the termination of therapy. Tom was twelve years old when the therapist first saw him. He was seventeen years old at the time of the follow-up. According to school records, Tom was well-adjusted and one of the leaders of his class. His health was excellent. He was planning on entering college after his graduation. He recognized the therapist immediately and said, "Oh, you're the puppet-lady!"

"So you remember me as the puppet-lady, do you?" the therapist commented. "Yes!" Tom laughed. He sat down across the table from the therapist in a small office. "Yes," Tom said. "I don't think I'll ever forget it. It was a real turning point in my life—although for the life of me I can't figure out why. It's been one of the big mysteries in my life because—well, I never could understand why I did what I did or what happened to me. But I know one thing. It gave me a great deal of satisfaction to make up those puppet plays and put them on for those little kids. I really enjoyed it. And then one day—I remember so plainly—one day right in the middle of one of my plays I thought, 'What the heck am I doing here playing with dolls?' Because all of a sudden Ronnie lost all his life. Up to that time he was more real than I was and I was more like the puppet. And then I thought, 'What the heck! One of me is enough in this world and that's going to be the real me and not a doll.'"

"So you stopped being a puppet and became a real person, hm?"

"Yes, but it was fun. And yet it wasn't fun. Do you know what I mean? I can remember it as plain as if it was yesterday. Sometimes during those plays I felt really unhappy—and I used to go home and—well, I'd think a lot. Especially about my stepfather and my sister. Incidentally, my sister and I get along fine now. I get along all right with Pop, too. Right now I'm planning on going to college. I can't quite make up my mind what to major in. I'd like to be a doctor—but I can't decide whether to be a human doctor or a horse doctor!" Tom laughed. "Then, of course, there is the problem of the Army. They may get first choice." And Tom continued talking about his plans for the future.

In this follow-up interview the therapist did not ask any questions related to the therapeutic experience—did not initiate any mention of the puppets. However, Tom seemingly remembered the experience vividly even to the name he gave the puppet and recalled it as a significant experience in his life.

A GROUP OF "POOR READERS" FIVE YEARS LATER

Five years ago a group of thirty-seven children who were nonreaders were placed in a class with a teacher-therapist to experiment with a therapeutic approach for poor readers [2]. The follow-up study on this group was made by the teacher who visited the school these children were attending. Out of the thirty-seven children in the original class, twenty-four were available for follow-up studies. Five of these children were "honor roll students," having a record of "straight A's." Edna, Nancy, Ronald, Balcolm and Roger had secured that record. In a city-wide scholarship test Ronald and Balcolm scored first and second place. With the exception of Blair, Kenneth, Rollo and Jamey, the other children had attained reading skill that was adequate for their grade placement.

When the therapist visited the classroom at a time five years after the experiment the classroom teacher asked
the children if they recognized the visitor. All of the children who had been in the remedial class immediately indicated that they did. The following conversation was stenographically recorded.

Nancy: “I know you. You were the teacher who taught us how to read with hammer and saws.”

Balcolm: “I remember the family of dolls and our doll house. We had fun.”

Jack: “I remember one day we buried all the mother and father dolls.” (Laughter).

Ann: “Remember the puppet shows we put on? I won’t ever forget that funny show Blair put on about the principal!”

Bill: “I think the music we had then was wonderful. I could float way out into space on it.”

Dick: “I remember that year. It was the only time in my life I ever felt happy where I was.” (He still had a tense voice and a pale unhappy face). “I remember we could pound and pound and pound.”

Delores: “The paintings we did with our hands.”

Arlene: “You were good to us. You let us do what we wanted to do.”

Dick: “It didn’t last though.”

Blair: “Nope. But it was fun while it did last.”

Then the talk veered away from the past experiences and into the present.

The therapist then asked each child who had been in that class to write the one thing they remembered best about that semester.

The children wrote brief comments.

Jack—Freedom.

Leonard—We could play.

Bill—Everybody was nice to one another.

Donald—We could do what we wanted to do.

Jerry—I learned to read.

* Edna—I found out I could make friends and I stopped being afraid of everything.

Mack—I learned to read.

Tommy—I liked to go to school then.

Allen—We played together and had fun no matter what we had to do.

Ann—The music.

Delores—To play.

Roger—So many many interesting things to do.

* Dick—I lost my feeling of being lonesome and I felt that I wasn’t all bad and that some people liked me and didn’t shove me away.

Ronald—We were always doing something.

Blair—We could move without being yelled at and do things kids like to do.

Arlene—I loved the clay and paints and the stories.

* Jim—I remember how I came to feel like I was worthwhile.

Balcolm—I liked the wood-working we could do.

Barbara—We had so much fun.

Jamey—There were so many things to do. Not just lessons.

Burt—The chance to choose and plan our own time.

Becky—Always something exciting to do.

* Jenny—I was afraid of everything and everybody but I got over being an afraid person because I wasn’t afraid of anybody in there like I used to be.

All the children seemed to recall their experiences in that classroom vividly. They remembered for the most part the things they did, the activities they engaged in, the things they learned. However, the four children (*) who had had individual play therapy sessions after school described the experience in terms of personal feelings or attitudes toward themselves. This is a very brief sampling, but the discrimination of the experience as related by the four children who had had individual play therapy indicates that the important element to them was not the use of the materials but an awareness of changing attitudes toward the self.

THE CASE OF SAM

Sam was twelve when first seen by the therapist. The reasons for his referral were “failing in school although very bright and an excellent academic record behind him. Daydreams, sleeps most of the time, or reads or goes to the movies. Eats continually, wets the bed, has no friends, never talks to anyone, just briefly, almost rudely answers questions and then turns his back on the person. Seems very unhappy. Careless about his clothes. Always losing things.”

Three years later at the age of fifteen Sam came in for a follow-up interview.
"Talking and whittling a piece of wood—that's all I remember doing. Telling you about stories I had read, shows I had seen, what I had eaten, how I liked eating and sleeping and being by myself. Telling you that and all the time thinking something else. That here I was preferring to keep awake and talk to you—to talk about anything at all just to be able to come there and talk to you—and saying something else to myself all the time. Saying to myself that I didn't really like the way I was living away off in a corner of the world by myself—burying myself in a book—or in a movie—or dreaming—or sleeping. What did I do it for then? I asked myself. This time I spent talking to you was the most wonderful important experience I ever had. Why did it seem like that to me? I asked myself. Certainly the things I told you weren't important or wonderful. It was a kind of mechanical talk that I didn't even listen to myself. The important thing was that I was talking to someone. I was doing it. And I got up early in the morning to keep that appointment. I spent two hours on the train coming and two hours going—five hours all together of real hard effort in all kinds of weather and I never missed once. Why did I? Because I wanted to get away from that dead-alone person I was and I wanted to be a together-person in a real people's world." And the follow-up immediately following therapy indicated that he had achieved that goal. He made friends, stopped going to the movies so often and discontinued the excessive reading. He began to diet. He went out with his friends to a neighborhood Boys Club and started a hobby of leather-tooling. He stopped wetting the bed. Sam maintained these gains.

THE CASE OF MARYELLEN

Maryellen was fourteen years old when she was seen by the counselor. She was referred by a physician who questioned the diagnosis of "progressive feeble-mindedness" which had been given to her by two psychologists and a psychiatrist. She was a seriously disturbed young girl who took no initiative in anything, had dropped out of school, who had no friends, who sat and either sulked or giggled, who refused to get up in the mornings and who behaved in the helpless manner of a very dependent five-year-old. During her counseling contacts she painted with the finger paints and gradually dropped the superficial giggling and meaningless chatter. There followed long periods of uninterrupted silences. Finally she began to talk to the counselor. After six months she was back in school, making friends, conversing intelligently with other people, adjusting satisfactorily at home and at school. When the therapist called her to make an appointment for a follow-up interview, Maryellen said she was working after school and couldn't come in but she would write a letter to the counselor about her memory of the experience. The follow-up was three years after the conclusion of therapy. Here is a copy of the letter she wrote:

Dear Friend:

I remember you because you were the first person who ever believed in me—who didn't think I was all bad—who didn't think I was silly—who took the time to try to find out how I felt about things. And you never dug into me like I was a person without feelings. You let we have my own world my own way and did not try to snatch it away from me without first making me feel strong enough to go live in another world or to seek a new world or to go without a world for a while until I found a new one. It was as though you said to me you can hate and you can feel cheated by your mother because that was the way I felt. And so I didn't have to lie to you or feel ashamed because I was me. I painted pictures all the time because then I could think in peace. And the quietness was around both of us like a clean white shawl giving us warmth but not smothering. I washed myself clean in that silence. I crept back bit by bit into the world of color. It had been all black and grey before. I wasn't being sullen when I was quiet with you. I wasn't being hateful that day when I finally said I felt hate. I remember saying it deep inside myself, with the tips of my fingers scratching on the slippery paper. This is hate I feel. It had been a numbness but it was not really numbness. It was not no-feeling. It was hate so big I was afraid of it. But that day I let the word creep outside of me that first time and it scared me. But it didn't scare you. I
remember it because it struck me like a bolt of lightning. I am a hater, I thought. This is wicked and bad. Then they separated — the feelings and me. I thought you must know I have good reasons for my hate even though I hadn't told you then. Another time I mentioned my fear. It was then that I learned that a feeling was a changeable thing because I felt it change—in my heart, in my arms, in my head, in my legs. It came out and twisted and turned and lost its sharp edges. From that day on I was a free person because I could separate my feelings from the people I felt about. Then I began to look at myself and try and figure myself out. I got so I liked myself better. I got so I liked people. I got so I liked the world. I think this all happened to me because you gave me a chance to believe in me. And then I felt I was worthwhile. I have grown up since I saw you last. As I think back about it you didn't seem to do a thing but be there. And yet a harbor doesn't do anything either, except to stand there quietly with arms always outstretched waiting for the travellers to come home. I came home to myself through you.

Your friend,

Maryellen

SUMMARIES OF THE CHILDREN'S COMMENTS

Considering the material that has been presented in this paper, the following observations, interpretations and inferences are presented for the readers evaluation.

In each case the child gave evidence of remembering the play therapy experience vividly and in detail. Also, the therapist noted that although she had had dozens of child clients during the past several years she too remembered as vividly as the child and recalled minute details of his play activities and expressions when once again face to face with the child. This indicates that there was a high degree of concentration and focus on the individual child during the therapeutic sessions.

There is also obvious self-reference in each case indicating an awareness of a changed attitude toward the self. The children in recalling the therapeutic experience explained it as an experience that brought with it sudden awareness of what they were feeling and thinking.

In the excerpts from the original play contacts the children's explanations, pulled out of context for illustration, present this coming to terms with the self in the children's own words.

"I never thought about why I do what I do, before."

"I'll feel my feelings any old way they are."

"Oh, every child just once in their life should have this chance to spill out all over."

"I don't have to stay the same old way always because I can be different. Because I can feel my feelings."

"I'm the little me and you're the big me. I'm all of myself and you're all of the other people in the world."

"Oh, what fun it is to have bought up the whole world and owned it all for a whole hour on one day every week."

"It's me saying 'I will.' It's me saying 'I won't.' It's me saying everything I think about and no slaps."

"Do you remember that scared silly little kid who was afraid of letting himself do what he really wanted to do? I know now what I can do—what I want to do—what I will do—"

In the follow-up studies the children give their perceptions of the experience at a later date. There is nothing to indicate that the children had the insight and self-awareness during the therapy which they ascribe to it at a date several years later. However, the play therapy experience was recalled with sufficient accuracy in their recital (as was checked by examination of the records of the therapy for confirmation or refutation) to justify the conclusion that the later interpretations stemmed from the feelings that the experience created. Perhaps the feelings were not clarified by
the children at the time they experienced the therapy. In retrospect, perhaps, the rational explanations emerged—especially in the cases of Tom, Sam, Maryellen, and Dibs.

The relationship between the experience and the children's interpretation of it are more apparent in the follow-up interviews. Each quotation is from an interview with a different child.

"And then one day—I remember so plainly—one day right in the middle of one of my plays I thought, 'What the heck am I doing here playing with dolls?' Because all of a sudden Ronnie lost his life. Up to that time he was more real than I was and I was more like the puppet. And then I thought, 'What the heck! One of me is enough in this world and that's going to be the real me and not a doll.'"

"I guess I found out that I could be what I wanted to be and how I felt was more important than how I looked. I couldn't do that though until I believed it myself by the way I felt."

"But once I broke loose I could do anything I wanted to do."

"I was afraid to really do anything. But it was nice to sit there and think maybe I could."

"What was it stopped me so I couldn't be a doing-person?"

"Maybe I was playing out my war with my mom and pop."

"I wanted to get away from that dead-alone person I was and I wanted to be a together person in a real people's world."

"It was then that I learned that a feeling was a changeable thing because I felt it change—in my heart, in my arms, in my head, in my legs. It came out and twisted and turned and lost its sharp edges. From that day on I was a free person because I could separate my feelings from the people I felt about."

"And the feeling I got before I was through—a feeling that meant a lot to me—a feeling that to you and to me I made sense and I was a person worthwhile."

"I built my world there...I was afraid because I didn't know what you would do...I didn't know what I'd do. But you just said, 'This is all yours, Dibs. Have fun! Nobody's going to hurt you.'"

This verbatim material from the children presents data that could be studied and analyzed and interpreted in different ways. It would be interesting and helpful to do a similar study interviewing children whose therapeutic experiences had been of a different type than that which had been employed with the children in this follow-up study.

It would also be interesting to do a similar study interviewing children whose therapeutic experiences had been evaluated as failures.

Certainly every therapist can cite examples of "other ways" the play situations might have been handled. Perhaps the use of different techniques during the sessions might have brought forth different results. The therapists who stress the importance of interpretation might think it would have been an important addition to the therapeutic experiences.

However, instead of focusing attention on the "might have beens" there is a great need for us to record completely and analyze as accurately and objectively as is possible with our present research tools, or other tools we might devise, what actually has happened and by comparing the results of all our research hope to improve our understanding of the therapeutic process and devise more effective ways of conducting the therapy sessions.

CONCLUSIONS

One might conclude that the therapeutic experiences for these children
were emotional experiences that sharpened their awareness of themselves as "feeling" individuals — and through these "feeling" experiences they gained an understanding of themselves, of their emotional natures — and with this understanding came a control over their emotions and feelings. It might be interpreted as sudden change in self-perception — an instantaneous reorganization so that Maryellen, and Sam, and Tom, and the others not only experienced a change in their concept of themselves but were aware of the change and could go beyond "thinking what I might do" and "do it" — could stop dreaming in a passive world and become active in a living world — could stop being an unreal person and live effectively in a realistic world — become "real persons in a doing-world."

If we define adjustment as being free to act spontaneously, free to be one's self, "a doing-person," "a real person," "a together-person in a real world," a person who "can feel their feelings," we might say that these children had achieved adjustment by achieving a synthesis in self-awareness, self-acceptance, and self-actualization.

In the cases which were referred to in this paper the role of the therapist had not been clearly defined to the children. This therapist in an attempt to establish the kind of relationship with the child that stressed noncritical acceptance of the child from the beginning of the therapy did not explain the situation as anything other than a play experience. As a matter of fact, this therapist regards "play therapy" as a play experience that is therapeutic because it provides a secure relationship between the child and the adult so that the child has the freedom and room to state himself in his own terms exactly as he is at that moment in his own way and in his own time. Therefore, since the child has had no explanation of the therapist's role he is free to interpret it as he will. The children's comments in regard to the therapist are interesting. She becomes symbolic of "other people in the world," of "the big me," of "my big shadow that I can make move this way and that and I can see just what I am being," of "grown-ups," of "freedom," of "the first person who ever liked me or who ever was kind to me," as "someone to talk to," as "the first person who ever believed in me — who didn't think I was all bad — who didn't think I was silly — who took the time to try to find out how I felt about things," as "The Sand Lady," as "the lady of the wonderful playroom who said, 'This is all for you. Have fun . . . Have fun. Nobody's going to hurt you.' " This seems to indicate that these therapeutic experiences were immediate, active experiences for these children — and that it was not necessary for them to clarify their "problem" and so to work out a logical, rational solution to the problem because this was not "problem solving" therapy. The case of Sam and the case of Martha give some evidence of this. Sam spent his time during the therapy sessions talking as "mechanically" as he could so that he could experience to the fullest the relationship with the therapist. Martha did not recall what, if anything, had been discussed. She was aware only of impressions and feelings. And Maryellen's letter to the therapist is a sensitive description of an adolescent girl's emotional awakening. "And the quietness was around both of us like a clean white shawl giving us warmth but not smothering. I washed myself clean in that silence. I crept back bit by bit into the world of color. It had been all black and gray before."

And so it seems that we might better be able to answer some of the questions that tease and tantalize so many psy-
chiatrists, social workers, psychologists, and educators today if we study carefully the objectively recorded interviews of many children during therapy and in follow-up interviews. For it seems that we are not studying material that is of interest only to therapists but to all those people who are interested in learning more about the child—of how he thinks and how he feels and how he learns. There is an honesty and a frankness and a vividness in the way children state themselves. A consideration of this kind of material might add to our studies of human behavior and personality development that might give to us all ways of understanding how feelings can “twist and turn and lose their sharp edges” and perhaps bring a bit of functional psychology to bear upon the problems of all interpersonal relations—and make a contribution that will enhance the efforts of educators who are beginning to think of ways of implementing theories of building and living in a world community.

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References