As a psychologist for over two decades in the United States, and a Registered Play Therapist for three decades, I have witnessed many different directions, interests, and trends in the fields of mental health and play therapy. One of the biggest shifts has been the inclusion of digital tools in our day-day-lives as members of society and in our therapeutic work with clients. Where once it was most common for a client to bring in news of their favorite stuffed animal or toy, it started become more and more popular for clients to discuss their favorite video games, social media, etc.

Speaking Your Client’s Language

When I was in graduate school in the early 1990s a particular professor spoke often about “speaking your client’s language”. In play therapy we certainly join as professionals in the concept that play is the child’s language. Dr. Garry Landreth stated in his book *Play Therapy: The Art of the Relationship* (1991) that “Children’s play can be more fully appreciated when recognized as their natural medium of communication. Children express themselves more fully and more directly through self-initiated spontaneous play than they do verbally because they are more comfortable with play.” (p. 10). Therefore, as play therapists, when we speak our client’s language, it is not merely cadence and vernacular; it includes their play, their interests, and their culture.

Culture

Culture is a phenomenally important concept in any type of mental health treatment. The concept of “honoring one’s culture” encompasses the idea of recognizing another person’s viewpoint, belief systems, way of life, etc. Play therapists, and mental health professionals in general, have incorporated culture into mental health treatment to enter the client’s world and create an environment of acceptance. The more a client feels accepted, heard, understood, seen, and honored, then the more comfortable they will be in the interaction, the better the therapeutic rapport, and therefore the therapeutic work will benefit.

The concept of culture has expanded over the years. Christina De Rossi, a London anthropologist, expanded this definition beyond the traditional to include “religion, food, what we wear, how we wear it, our language, how we behave with loved ones, and a million other things” (Zimmerman, 2017, para 3). How does this broadening of the concept of culture influence a play therapist’s work? Truly in every way – from rapport to case conceptualization, from tools included in the play room to discussions about interests, from paperwork to communications with caregivers, and so much more. Investigating, researching, understanding, and including a client’s culture informs everything a play therapist does.

What then, is the play therapist to do when the client’s culture includes something the therapist is unfamiliar or even uncomfortable with? Is this item, discussion, idea, etc. banished? No, certainly not. A client’s sexuality identification, for example, would not be dismissed if the therapist was not of the same identification. This identification would most certainly be part of the client’s culture. The concept(s), any struggles, any questions, etc., would be expressed, explored, portrayed in play, etc., as the client saw fit to work toward any necessary understandings. Is this not the same, then, if a client introduced a video game – either by conversation or actual play – into the play therapy process? If this portion of the client’s interest, expression, activity, etc. is rejected, then are we not 1) rejecting a portion of who the client is,
thereby rejecting their identified culture? and 2) allowing our own culture, beliefs, and biases enter into the therapy in a way that is not accepting of the client? All of these thoughts dominated my mind when thinking about the inclusion of digital tools in play therapy. I am not a digital native (Prensky, 2001), I consider myself a “techno-necessist” (Stone, 2020, p. 29): I see the importance of digital tools/devices/etc. in everyday life and believe it is imperative that we honor our client’s culture to include them, in some way, within our work with clients.

This journey through the exploration of culture, along with client’s interests and the progressions in society, led to the integration of such tools into play therapy work, numerous writings including a book entitled Digital Play Therapy (2020), and the creation of the Virtual Sandtray App ®©. As a parent, a play therapist, a psychologist, a techno-necessist, and a person who honors my client’s culture, I had to investigate the therapeutic powers of the inclusion of digital tools in therapy.

Digital Play Therapy

What is Digital Play Therapy (DPT)? “Digital play therapy is a modality which utilizes highly motivating, immersive activities to incorporate areas of client interest into the play therapy process to deepen relationships, gather information, implement interventions, and advance the treatment plan forward.” (Stone, 2020, p. 15). Written prior to the COVID-19 pandemic, this book focuses on the fundamental cornerstones and tenets of play therapy and how they can be identified in DPT, thereby providing a structure for the play therapist to appropriately incorporate such tools in therapeutically sound ways both in face-to-face interactions and remote. The fundamentals of the Therapeutic Powers of Play (Schaefer, 1993; Schaefer & Drewes, 2014) and Prescriptive Play Therapy, (Schaefer & Drewes, 2016) create the scaffolding on and within which the play therapist formulates and identifies the therapeutic value of DPT.

There are three levels of DPT: I) the acceptance of digital interests and discussions into the play therapy interactions, II) the inclusion of digital devices, tools, and programs into the play therapy interactions, but not the actual co-play within the session (i.e., watching a YouTube video together, looking at social media, etc.), and III) co-play with a digital device, tool, and program whereby the therapist and client are both playing a program within the session (i.e., Virtual Sandtray App, Legends of Zelda, etc.). All levels honor the inclusion of the client’s culture in the interactions, and level III might even have the therapist introducing digital tools for use within session.

The Digital Play Therapy book was released within months of the onset of the COVID-19 pandemic. People scrambled worldwide to adjust their lives, schools, business, and social lives from in-person face-to-face interactions to remote, tele-based interactions. Play therapists were left with the task of identifying the key elements of 1) play therapy work in general, 2) the client’s therapeutic needs, and 3) how to transfer each to a different medium – through the screen. Since DPT is a modality of identifying and using digital tools within session, the translation to a tele-world was quite seamless. With thousands of programs to choose from, the play therapist’s tasks return to 1) identifying one’s own therapeutic theoretical foundation and the included tenets and components, 2) identifying the client’s therapeutic needs, 3) identifying the therapeutic components of the program to be used, and 4) implementing all in a way that works the client toward their therapeutic goals.

DPT can be used with any client who has interest – any age, any ability level (as long as the tool chosen is appropriate), any diagnosis. The reason this statement is so broad is because there is a phenomenal array of devices and programs available. There is no “one size fits all” to
DPT because it is based in the Therapeutic Powers of Play and Prescriptive Play Therapy, which by definition allows for the customization of approach and intervention, and the available hardware and software is expansive. The play therapy treatment plan can be tailored to the client’s unique presentation and needs. “The inclusion of digital play therapy in a therapist’s repertoire is not suggested merely as a trendy response to client’s interests, rather, it is a component of a fundamental belief system regarding the respect and acceptance of clients combined with solid play therapy tenets.” (Stone, 2020, p. 13).

Virtual Sandtray App®

Prior to the publication of the DPT book, prior to COVID-19 and the explosion of telehealth, and during the exploration of speaking the client’s language and culture, a Tsunami hit Japan in 2011. When this happened a dear friend, Dr. Akiko Ohnogi reached out with a plea for materials to help play therapists work with those affected. While thinking about this situation, it hit me that they would not be able to utilize the powerful tool of therapeutic sand work (to incorporate both sandtray and sandplay in this discussion) as they did not have all the materials needed. I said to my husband, “we need something truly portable. It needs to be on a tablet.” This was the early birth of the Virtual Sandtray App (VSA). Since 2011 it has been alpha and beta tested, and publicly launched in 2015. In 2019-2020 the VSA was featured in the Wellcome Collection’s “Play Well!” exhibit in London, right next to a Lowenfeld tray. With a deep respect and honor for therapeutic sand work, the VSA has incorporated the fundamental tenets and processes necessary of a therapeutic tool.

In brief, the Virtual Sandtray App allows for an in person or remote therapeutic interaction whereby a tray is created, the creation is witnessed and processed as the theoretical foundation allows, and can be saved and loaded for future use. The deliberate process of moving the sand, choosing the items to create the scene, and the customizations within allow the client to create powerful, personalized trays. With features for education and supervision included, the VSA is a well-rounded tool for a variety of interactions and environments (Stone, 2016). The VSA is designed for in-session use. Passwords and encryptions are built in for both the client and the therapist protection. Available for iOS, the VSA can be found in the Apple App Store (type in Virtual Sandtray and look for the sheep icon) and more information can be found through the website: www.sandtrayplay.com (new, revamped site coming soon!)

As with any tool to be incorporated into the play therapy session, comfort, knowledge, and experience is paramount. Supervision, education, and practice will inform the play therapy interactions within which these tools are incorporated. The play therapist can interact, assess, educate, intervene, and more when using DPT. There is great power in the process and interactions, the play therapist need only to identify and implement them.

References


https://www.sandtrayplay.com/Press/VirtualSandtrayArticle01.pdf

