

JUNGIAN ANALYTICAL

Play Therapy

| JOHN PAUL, "J.P." LILLY, MS, LCSW, RPT-S & ROSALIND HEIKO, PhD, RPT-S, ISST, NCSP

Jungian analytical play therapy (JAPT) believes that the therapeutic power of healing and transformation comes directly from within the child, and not from any outside technique/person. The source of that change lies within the unconscious; and healing is manifested symbolically through the process of play. Play is the method by which children are empowered to engage with difficult material. Through play, children make the ineffable distinguishable and audible, and are able to achieve healthy transformation.

Basic Tenets

Fundamental to understanding the basic tenets of JAPT is comprehension of the structure of the psyche in children, and the process of ego development (Edinger, 1992). Three distinct components of the psyche are: the conscious, the ego, and the unconscious. Consciousness is divided into two parts – personal and collective. As experienced by the individual, consciousness is connected to perception and reflection, learning and retention, differentiation and discrimination, as well as adaptation. Of course, chronological age, environmental influences, emotional experience, and expression and cognition greatly influence children's development (Ault, 1977).

The ego is that part of the psyche that mediates between consciousness and unconsciousness, concerning itself with cognition, maintenance of personality, personal identity, and learning. Fordham (1973) postulated that it gains its strength throughout life through a process of fragmentation (deintegration) when something new or stressful is encountered; and uniting and healing itself back together (reintegration) when skills are learned and used to resolve tensions following a new or stressful event.

The unconscious is also divided into two fundamental parts – the personal and the collective. The language of the unconscious is not expressed through words; but manifests through images,

symbols, dreams, metaphors, and archetypal material. The personal unconscious holds the experiences of the person's life, while the collective unconscious holds the entire history of humankind. As the unconscious holds all of the necessary components for mastery, the JAPT practitioner promotes empirical manifestation of the healing language of the child through the symbolic language of play.

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Psychopathology and Client Dysfunction

Client dysfunction in this model is found in all regions of the person's psyche, through the dysregulation of the ego in its relationship to the conscious and unconscious aspects of the psyche. Psychic material can be repressed into the unconscious in the form of a protocomplex (Peery, 2003). Over time, this evolves into a full complex that Jung referred to as a “sub-personality,” leading to demonstrating definable “symptoms,” accompanied by powerfully charged emotions attached to an archetypal core. The child has no conscious awareness of the repressed material but is susceptible to being “triggered” by events on a conscious level. In this case, the unconscious becomes the receptacle for overpowering material, and is also the basis for transforming and resolving what initially overwhelmed the ego and began the process of dysfunction.

Treatment Description

Treatment begins with thoroughly examining the family system through three generations. Recent developments in epigenetics (Lucero, 2018) indicate that parents' unresolved issues can be passed down, picked up, and acted out by their children. So, we assess familial, developmental, medical, learning, social, and emotional history. JAPT, similar to neurological models, is a "bottom-up" approach (cf. Gaskill, 2019, this issue), focusing on developmental delays, trauma history, etc. Jungian therapists examine "symptoms" and behaviors to discover why and under what conditions they occur (Jung, 1960).

“ **JAPT assists the healthy attachment process and provides a container for the child to discover and integrate improved social competence and ego-adaptive functioning. The JAPT therapist models empathy for the child during play through attention given to behavior, thought, and especially emotions.** ”

The principle of *temenos* (the child's perception and experience of the play therapist, the play therapy room, and the therapeutic environment as safe and sheltered), is vital in the engagement with repressed or blocked material. The JAPT therapist vigilantly creates a safe and nurturing relationship with the child (Green, 2009), similar to a child-centered approach (Lilly, 2015). JAPT therapists use a myriad of techniques to create *temenos*, including directive and behavioral ones.

One of the defining features of JAPT is that the therapist is as much a part of the play therapy room as the play materials. The JAPT therapist must do her own therapy work in order to distinguish the boundaries and intersections of her issues and those of her clients through transference and countertransference. The roles of the JAPT therapist are Witness, Container, and Interpreter (Lilly, 2015). As Witness, we track behaviors/emotions when the child engages in therapeutic play. As Container, we hold shared client material in a self-aware/self-regulated state. As Interpreter, we facilitate the process of making unconscious material conscious, bridging client resolution of the "tension of opposites" through the transcendent function, where a new perspective is formed. Often children are unaware of this process, as therapists stay in the metaphor of symbolic play to maintain *temenos* while commenting on the engagement and resolution of the material.

Therapy Goals and Progress Measurement

The goal of JAPT is to assist the child in engaging disturbing material safely so that she can use the symbolic materials (i.e., toys) to activate the archetypal "inner healer" to resolve complex dynamics and tensions responsible for symptomatic behavior.

JAPT therapists must create *temenos* in the playroom with the child, subsequently providing an environment within the play therapy room that allows the child to engage with difficult material that has caused deintegration, which disrupts the child's ego adaptive functioning (i.e., behavioral/emotional symptoms). JAPT practitioners work to understand symbolic play, which connects to the child's proto-, or fully developed, complex. Finally, JAPT therapists assist the child in recognizing some resolution of the tensions and complexes by making the unconscious conscious.

Therapeutic Powers of Play

JAPT is powerfully applicable to all the therapeutic powers of play (Schaefer & Drewes, 2014). JAPT facilitates communication by allowing for the child's full *self-expression*, *accessing unconscious material* through *direct and indirect teaching* to create and maintain *temenos*.

JAPT fosters emotional wellness by allowing for full engagement, leading to *cathartic* work. A full range of emotions are allowed: *abreaction*, *positive emotions*, and deeper complex work. *Counterconditioning fears* becomes a natural result of safe engagement. *Stress inoculation* and *stress management* empower the child through metaphors of change.

Establishing a trusting *relationship* is key. JAPT assists the healthy *attachment* process and provides a container for the child to discover and integrate improved *social competence* and ego-adaptive functioning. The JAPT therapist models *empathy* for the child during play through attention given to behavior, thought, and especially emotions.

Creative problem solving is enhanced when the child's healer archetype is activated. Repeated engagement opportunities increase ego *resiliency* and adaptive functioning. JAPT offers children opportunities to experience a calm environment in which to continue their development. This approach directly and indirectly fosters *self-regulation*, improving *self-esteem*. Learning to engage with and resolve complex material allows the child to discover new choices that are both socially and even *morally* acceptable.

Summary

Play therapists looking for a challenge in developing their expertise in analysis and interpretation in depth with child clients can find it in the theory and practice of JAPT. This requires engagement with clients in a safe space with dedicated attention to the therapeutic relationship, integrating Jungian concepts and interpersonal dynamics with expressive techniques, practicing exploration of the child's deeper meanings and spiritual connection towards healing and mastery.

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ABOUT THE AUTHORS



John Paul "J.P." Lilly, MSW, LCSW, RPT-S, is presently in private practice as a full partner with Sierra Counseling Associates, Inc. JP is currently serving a second term on the APT Board of Directors (1997-2000, 2019-2022). He is the Founder and past National President of Bikers Against Child Abuse Inc.

bacachief.lilly@gmail.com



Rosalind Heiko, (aka "Dr. Roz") an RPT-S, Sandplay teacher and psychologist, trains therapists nationally and internationally in play therapy and sandplay. Her book *A Therapist's Guide to Mapping the Girl Heroine's Journey in Sandplay* (Rowman & Littlefield 2018), was recently reviewed by Eliana Gil (https://www.sandplay.org/wp-content/uploads/Gil_Eliana_Heiko_Guide-to-Mapping.pdf).

info@drheiko.com