

# PLAY AND IMAGE THERAPY AS SPECIALIZED EDUCATIVE ASSISTANCE TO A CHILD WITH LEARNING PROBLEMS

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## 1. INTRODUCTION

By means of an example, an attempt is made to show the value of play and image therapy for helping a young child with learning problems. The present example was chosen because it illustrates that learning problems can arise where there are no functional defects or where didactic neglect is not present in the school situation.

## 2. HISTORICITY

Andries (now 6 years, 11 months) was born when his sister was 15 months old. Six months after his birth, his mother again became pregnant.

His physical development was normal except that he first began to speak intelligibly at 2 1/2 - 3 years. At that time there were four children in the family, all under school age. The family could not afford a full-time servant and even the mere physical care of the children was a big problem for the mother. The children received very little individual attention. The father, a depressed and pessimistic person, withdrew himself as much as possible from the family situation.

At 5 1/2 years Andries was placed in a pre-school with a view to school entry. He had extreme difficulty fitting in and after 6 months would not attend at all. Finally, his mother persuaded him to go, but he cried all day. At 6 years, 7 months, he entered school. Although initially he was willing to go, after a few months it was evident that he could not meet the demands placed on him. He got along well with his teacher, but he was not attached to her.

## 3. STATEMENT OF THE PROBLEM

The parents stated Andries' problems as follows:

- 3.1 Poor school progress, especially with reading;
- 3.2 Excessive attachment to his mother;
- 3.3 Whinny, especially when confronted with a new task;
- 3.4 Infantile.

#### 4. RESULTS OF THE INVESTIGATION

The results of the orthopedagogic study are as follows:

- 4.1 Andries does not readily enter into an encounter. He is ashamed and distrustful and bursts into tears at the slightest indication of protection from his mother. She anticipates this and tries to avoid the embarrassment by consoling him before this is necessary;
- 4.2 During the investigation, Andries cooperated only with respect to those tasks not involving persons or interpersonal relationships;
- 4.3 He has a conspicuously fast work-tempo, good muscle coordination, no perceptual difficulties and an adequate attention span;
- 4.4 He has a slight lisp and articulates poorly;
- 4.5 On the HSRC individual scale, he obtained a mental age of 7 years, 8 months and an IQ of 111. He uses his imagination and thinking (as modes of learning) in particularly effective ways (if relationships with people aren't involved). His poorest performance is on language items;
- 4.6 Andries shows evidence of unassimilated lived-experiences of fright. He feels helpless and at the mercy of his situation. He interprets his family situation as negative and feels so awkward in his interpersonal relationships that he wants to avoid them.

#### 5. DIAGNOSIS

Andries' possessed experience is so deficient that it cannot serve as an adequate point of departure for his skillful transition to the secondary pedagogic situation (i.e., school). His emotional life is labile and, as a result, he cannot maximally utilize his intellectual potential.

Andries shows the developmental level of a toddler. There is a discrepancy between what he has achieved and what he is able to. His becoming is handicapped, and he doesn't learn the way a school

child ought to learn. He is neither prepared nor ready for (school) learning.

## **6. POSSIBLE CAUSATIVE FACTORS**

### **6.1 Problems of intentionality**

Andries' future perspective is so obscure that he does not want to become a big boy or adult. He doesn't see the sense of any effort regarding schoolwork (He says he wants to become a "cookie baker", then he can eat all of the cookies himself).

Everything in his possessed experience indicates to him his own failures in establishing relationships with other persons, and he will not venture in unknown situations.

### **6.2 Support provided by educators**

#### **6.2.1 In emotional ways (affective guidance)**

##### **6.2.1.1 The parents**

The parents are in a troublesome situation regarding Andries. His father has admitted defeat and has withdrawn himself from his educating. His mother tries to manage the situation by so simplifying his life circumstances that she really treats him as a toddler. Andries receives no support from his parents to breakthrough (transcend) his emotional distress; on the contrary, their actions result in his remaining dependent and not self-sufficient.

##### **6.2.1.2 The teacher**

A somewhat distanced, cool relationship is maintained between her and Andries. An authentic encounter is lacking and, consequently, she gives him inadequate affective support.

#### **6.2.2 In knowing ways (cognitive guidance or support)**

##### **6.2.2.1 The parents**

As a result of viewing Andries as a "small child", they respond to his questions on an inadequate, low level. He shows an alarming deficiency in general knowledge. As yet, his parents have not made

any effort to unlock (expose) reality to him. His life-horizon extends as far as the home and school situations. He acts as though the unknown world outside of this horizon is a threat.

#### **6.2.2.2 The teacher**

Cognitive guidance is adequate; however, because of a deficient emotional lived experiencing of "our space" as a foundation, the learning effect fails.

#### **6.2.3 Normative guidance**

##### **6.2.3.1 The parents**

They exemplify norms on an adequate level but place such low demands on Andries that he feels inferior.

##### **6.2.3.2 The teacher**

Regarding the normative, she guides Andries in the same adequate way as the rest of the class. However, the difference between home and school in this regard is confusing and disorienting to him. He notices the difference between his own behavior and that of the rest of the class. This confirms for him his already negative view of himself.

### **6.3 Inadequate self-actualization of the child's own potentialities**

#### **6.3.1 On an affective level**

Andries' emotional life is so unstable that each new situation and relationship is menacing for him and contains the possibility for failure. In the almost 7 years of his existence, a number of experiences of inadequately establishing relationships has added up to a possessed experience which, for him, indicates his own inadequacies regarding his relationships with persons, things and matters. His current response to the appeals from his surroundings is one of withdrawing as well as of defective exploring and venturing.

#### **6.3.2 On a cognitive level**

The above contributes to his paying inadequate attention to any appeal made to his intellectual potentialities. He is not ready to learn. He under-actualizes perceiving and fantasizing as modes of learning but makes adequate use of thinking, imagining and remembering in situations where human relationships do not play a prominent role.

### 6.3.3 On a normative level

Andries makes little use of his potential to live according to accepted norms. His unaccountability, unwillingness to break away from effortlessness and his lack of readiness to assume responsibility for relationships are indicated in the low demands he places on himself as well as in the negative sense in which he treats the whole event of becoming an adult. As a consequence, it appears that school attendance and everything connected with it has no positive meaning for him.

## 6.4 Summary

It seems that there are deficiencies in Andries' educational situation with regard to:

**6.4.1 the fundamental pedagogic** (especially the relationship and aim structures);

**6.4.2 the sociopedagogic** (no experiencing of a feeling of "our-space" or hope for a future participation in society);

**6.4.3 the psychopedagogic** (inadequate actualization of experiencing, willing, lived-experiencing, the modes of learning, etc.);

**6.4.4 the didactic pedagogic** (unwillingness to unlock or open himself to life-reality);

**6.4.5** also, by implication, **vocational guidance pedagogics** (lack of readiness to expend meaningful effort for the sake of winning a future, negative meaning of earning a living and a contentment with continued dependence).

Andries is defectively supported in his educative situation and makes such inadequate use of his potentialities that he is not becoming as he ought to be. Also, he isn't learning as well as can be expected of him. He is neither ready nor prepared for (school) learning.

## **7. PLANNING ASSISTANCE**

### **7.1 Re-defining via defining together (symmorphosis)**

By means of specific pedagogic intervention, Andries has to be supported in re-defining:

**7.1.1 himself** (as a boy on the way to adulthood);

**7.1.2 others** (establish healthy relationships with parents, teachers and peers);

**7.1.3 things** (e.g., the learning tasks, his own as well as other people's property).

### **7.2 Guidance of educators**

Through regular discussions with the parents and the teacher, the deficiencies in their guidance need to be cleared up with special attention to:

**7.2.1** regaining self-confidence in dealing with Andries;

**7.2.2** establishing authentic communication in dignified ways;

**7.2.3** gaining insight into the aim of all pedagogic intervention;

**7.2.4** assuming a more prominent role by the father;

**7.2.5** (the teacher's) need for giving individualized attention to the children;

**7.2.6** helping Andries socialize outside of the home (with peers).

### **7.3 The choice of a communication medium**

Primarily because of the nature of Andries' problem and the quality of his becoming, play is an appropriate therapeutic medium. Play gives the therapist ample opportunity to work on preparatory reading, arithmetic and perceptual programs such as are now being used in beginning classes. Child play, in the form of illusive play (make-believe, role-playing), also provides the opportunity, indirectly via symbols, to communicate and become involved with what in real life is threatening or painful. The therapist converses with the child in the symbolic language that the child himself has chosen and tries to enter his world on a personal level. In his images or symbols, the child shows his reality to the therapist as he constitutes it in his unique life world. The therapist becomes a participant in the reality the child manifest in his images.

However, Andries is so emotionally derailed that, in the therapeutic situation, he quickly showed that he has difficulty engaging in projective play and avoided entering a conversation. He hesitated to take the initiative and slavishly followed any suggestions. According to Lubbers, image therapy is very appropriate in such a case. Consequently, a combination of image and play therapy was chosen.

## 8. THE COURSE OF THE THERAPY

This can be divided into five main phases.

### 8.1 First phase

Andries had extreme difficulty distancing himself from his mother, clinging to and crying for her. Initially, the therapist allowed his mother, and later his little brother, to be present during the play sessions. Simple games and toys were chosen (appropriate for a child of 3 to 4 years of age). Every effort was made to allow him to feel accepted, safe and at home. See figure 1.



### 8.2 Second phase

Gradually, Andries indicated that he wanted to enter a relationship but didn't know how. The therapist proceeded to play games that provided the opportunity for physical contact and coddling. Initially, Andries only showed pleasure but gradually he warmed up and responded to the coddling. A firm, sincere, warm mutual relationship was established. See figure 2.

### 8.3 Third phase

He gradually allowed himself to elicit illusive role-play. However, he took no initiative and made no positive contribution to the progress of the play. Even so, he no longer avoided the implications of interpersonal relationships. See figure 3.

#### 8.4 Fourth phase

During this visit, he was particularly unfriendly and tense. This looked like a relapse. He went to the table and drew absent-mindedly. After this he began to concretize (his problem). He chose symbols and gradually carried on a conversation in images (i.e., metaphorically) with drawings, clay models or toys. See figures 4 and 5.



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#### 8.5 Fifth phase

His mother reported that there has been a dramatic improvement at home; the early morning (before going to school) stomachaches and vomiting have stopped, and the teacher reports progress in his school work. The regular visits to the playroom had been supplemented with excursions, and Andries was gradually exposed to unknown situations that, at first, were entered with the therapist and later alone.





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## 9. GENERAL CONCLUDING CONSIDERATIONS

In addition to functional defects and didactic neglect, affective problems are the reason for a large percent of the learning problems encountered by children in the beginning years of their school career. If this affective distress is not identified and rectified in time, scholastically the child gets stuck when the cognitive demands of the curriculum increase. Then, he experiences deficiencies in the teaching situation such that affective support alone no longer is adequate and has to be supplemented by orthodidactic assistance. However, pedotherapy, aimed at affective stabilization, always continues in its accompanying character as the basis on which other forms of assistance can be given to the child, if required.

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