CHAPTER FOUR CHILD PLAY: A PEDOTHERAPEUTIC PERSPECTIVE

4.1 INTRODUCTION

In Chapter Two, there is an explanation of how a playing-child-ineducating becomes involved in actualizing fundamental pedagogical essences, and in Chapter Three, a psychopedagogical perspective on a playing child is described. During playing, a child takes part in actualizing pedagogical essences, and this means, as he/she plays, his/her educating thrives.

Of course, it can happen that, for several reasons, this thriving does not follow a desired course, and this leads to educating being inadequately actualized. Then, a child-in-educating is a child in a deficient educative situation. An educator cannot merely be aware of this deficiency, but must act in certain ways to abolish or, at least, alleviate it. This means that pedotherapeutic action is necessary. Such action implies that means be used to intensify and assure the actualization of the relevant essences.

In connection with the inadequate actualization of pedagogical essences, the following are noted: when they are inadequately actualized, the phenomenon of educative neglect arises, together with a restrained lived experiencing by a child. A child is educatively neglected whenever an educator makes too little of his/her educating, guiding, authority, and discipline. Educative neglect is deficient upbringing which arises, e.g., because of a pedagogical aim which is lacking, or because of a deficient intervention, and these are observable in a child's disturbed experiences and behaviors. This lack in actualizing pedagogical essences means that an educator is not providing a child with sufficient support in his/her lived experience, and in his/her experiential world, for the attainment of proper adulthood.

4.2 ESSENCES OF THE WORLD OF THE CHILD WITH DEFICIENCIES

In thinking pedagogically, one uses categories, and a psychopedagogical category of value for understanding child play is lived experiencing. A child's lived experiencing, in connection with his/her pedagogical situation, is either favorable or unfavorable for his/her becoming, and for his/her level of playing.

According to Lubbers ⁽¹⁾, a child must assimilate the meanings of the different situations in his/her life, and what he/she cannot assimilate, can give rise to negative pathic (i.e., emotional) lived experiences. For a child with defective upbringing, as a child in distress, these pathic lived experiences mean emotional unrest which is paired with labile, confused, and disoriented cognitive lived experiences. For a child in distress, pathic unrest is recognizable in excessive feelings of being different, being inferior, lonely, insecure, helpless, uncertain, and anxious ⁽²⁾. This neglect, and these feelings cannot be thought of in isolation from each other. Therefore, their interconnections are now considered.

To genuinely understand a child in his/her being-a-child, it is necessary to go to the situations in which he/she is involved, i.e., that, through birth, he/she is a helpless gift to his/her parents. He/she is delivered to their care, and he/she can do nothing about it, if he/she is not lovingly accepted. Yet, whether he/she experiences security with his/her parents depends precisely on this "acceptance in love". Only with such acceptance is bonding actualized, and the becoming of the child becomes a joint adventure.

Parental care provides relative security. When a child does not experience the necessary security with his/her parents, he/she is, in his/her helplessness, exposed to risk. He/she will then try to escape any confrontation with what is threatening by not venturing (risking) at all. But also, even when he/she doesn't confront what is threatening, he/she cannot set him/herself free from the preceding anxiety. The impotence of the parents to help their child, and the impotence of the child to ask for help are grounded in a faulty relationship between child and parents. Such children often withdraw into themselves, and experience intense loneliness in their lived experiencing of being different. It also happens that the parents themselves become a threat to their child, rather than a support. It is understandable that such a child no longer trusts his/her parents. Hence, other experiences of insecurity are paired with this conflict in trust. When a child will not, or might not share his/her anxiety with his/her parents, not only are the relationship of trust, and the actualization of the other pedagogical essences disturbed, but the parents also become the representatives of insecurity. Then, he/she will withdraw, if the risky or the unknown arises, and he/she will experience intense loneliness. Loneliness is the first symptom of neurosis and is often paired with anxiety⁽³⁾. Anxiety is at the center of this child's experiential world, and the related severe helplessness leads to feelings of uncertainty and loneliness.

According to Carp, anxiety and fear are the silent companions of each person's life. However, a person must show that anxiety has not become absolutized; that in living his/her life, he/she can experience anxiety cannot be denied, but living one's life also can lead to trust, thankfulness, and faith⁽⁴⁾. The existence of anxiety strikes a child's becoming in all areas and impedes the unfolding of a nuanced (varied) person-image⁽⁵⁾. Feeling inferior arises from being ashamed and offended, and insecurity arises from a feeling of being less worthy⁽⁶⁾. A child experiences him/herself as different, but also as inferior because of his/her deficiencies, and his/her own imperfections.

A feeling of insecurity, which arises from this, is the greatest restraint for a child's entire becoming toward proper adulthood, and intense insecurity, once again, means an anxiety-ladened lived experiencing. Because of a child's helplessness, insecurity, and anxiety become the foundation of his/her "attunement" to the world.

According to Langeveld, with disturbed children, there is something amiss with their communication, and their behaviors become unintelligible to their educators. In this regard, Piaget indicates that such communication inadequately expresses the reality of a human being as a person. Thus, child play, as a pedotherapeutic medium, is concerned with a child's lived experiencing embedded in his/her distressful pedagogical situation, and with "returning" such children to their educators.

4.3 THE PLAY OF THE CHILD WITH DEFICIENT EDUCATION

This child might not even play. For example, he/she might only involve him/herself with building blocks and drawing media. Missing from his/her playing is the required flexibility because

he/she cannot leave a concrete contact with reality. He/she is afraid to lose him/herself in the dynamic course of play. He/she is afraid of the images which can be called up by playing and, thus, he/she does not venture to illusive (fantasy) play.

A second possibility is that a child does play, and that in his/her playing, his/her problems come into view for a pedotherapist. A child now engages in illusive play, and from the content of his/her playing, i.e., from the images he/she designs, a pedotherapist grasps the problem with which the child is involved. Understandably, one must show extreme caution in interpreting these images. The seriousness and extent of the problem are "read" from the impetuousness of a child's playing, and sometimes from the intensity with which he/she loses him/herself in the play.

Another indication of problematic play occurs when there is a sudden suspension of illusive playing, when a child becomes tense. When a child confronts a problem in his/her playing, or when a conflict arises, and he/she is affectively touched, play suddenly stops, and a pedotherapist sees the child has changed, usually to a lower level of playing, or even to a complete withdrawal from play.

Finally, a child also may play on a lower level than what is expected of him/her at a certain age. Then a pedotherapist looks for signs of a beginning of illusive play which, however, is not actualized because of a defective venturing attitude.

4.4 WHAT IS MEANT BY PEDOTHERAPY?

Where an educative situation is seen as a passage of a child to proper adulthood, a problematic educative situation is lived experienced by a child as meaningless and threatening; in other words, a problematic educative situation lacks a future perspective. A pedotherapist aims to design effective means by which the obscure future perspective can become clear once again. Here the point of departure is the idea that educating is a human event which, under usual circumstances, progresses in natural ways. Thus, a pedotherapist views a child as an educable person-inbecoming.

In seeing a child as turned away from the future, a pedotherapist not only adequately prepares him/her for the future, but also makes the future bearable for him/her. This requires the abolition of the obstructive factors in educating, and it is very important that a pedotherapist be with the child in his/her world. Then, play can be used as a pedotherapeutic medium because, according to Salzman, it is an orthopedagogic (also a pedotherapeutic) ground form. Play demands of a pedotherapist sensitivity, involvement, creativity, communication, distance, authority, and future- directedness. Pedotherapy is assisting a child in educative distress. In close connection with his/her parents, the aim is to bring their child to a life directed at proper adulthood.

The task of a pedotherapist is to offer a child security, to give him/her what he/she needs, and to bring the world and the present into perspective. Lubbers⁽⁷⁾ argues that a child can find more security from adults, because they are further along than he/she is and, therefore, can allow him/her to see that he/she can become different.

A fundamental relationship in pedotherapy is the pedagogical encounter, and when a form of pedotherapy is chosen, the child's age, nature, and situation must be kept in mind to arrive at a genuine encounter. To encounter a young child, one must enter his/her world of play. That is, play is a medium especially appropriate for establishing an encounter with a young child. Playing, as a pedotherapeutic method, is treated in greater breadth later.

4.5 THE ESSENCES OF PEDOTHERAPY

According to Landman,⁽⁸⁾ in all pedotherapy and, thus, in play therapy, pedagogical relationship, sequence, activity, and aim structures must be actualized. In agreement with this, Pretorius⁽⁹⁾ views the essentials of pedotherapy as occurrences of educating and corrective educating.

The preconditions for a pedotherapeutic event are that the pedagogical relationships of **trust**, **understanding**, and **authority** are actualized. Pretorius says this amounts to the following: ⁽¹⁰⁾

- (i) the child's trust is won and trust in him/her is shown;
- (ii) acceptance of the child is shown;
- (iii) respect for his/her dignity is shown;
- (iv) interest, concern, and sympathy are shown;
- (v) the child is allowed to feel safe and secure;
- (vi) a stable affective relationship with the child is established;

(vii) the child is supported in his distress;

(viii) understanding of the child is shown;

(ix) authority is exercised and, thus, demands are made and limits are set;

(x) norms and values are exemplified.

A child wants to grow up and he/she places him/herself unconditionally under the guidance of his/her educators. He/she trusts them without reservation and, thus, obedience becomes possible. Obedience (as docility) means that, even though a child cannot judge something, still he/she does as he/she is told; for a child, this means to take a risky step in the dark. By means of his/her trust in an adult, authority becomes possible because of an adult's love for and acceptance of him/her.

If a child trusts an adult, he/she wishes to obey him/her but, at the same time, that child is venturing to attain an increasing degree of independence and, in this connection, it is necessary for an educator to show trust in his/her venturing efforts. An educator must accept him/her and take responsibility for guiding him/her gradually to moral independence, and this means that n adult must actualize the essentials of authority with him/her. This responsibility can only be effectively taken when a pedotherapist also trusts, and this is a trust based on pedagogic love.

Out of the actualized essentials of trust, one can and must demand obedience from a child about what he/she can carry out independently, given what can be expected of someone at his/her level of becoming. Thus, it often happens that a child leaves the trusted and known to achieve something new and something higher. As soon as he/she finds tranquility in the known, the desire again prospers to go forward to meet and further explore the open world. A pedotherapist defines, to a great degree, the future of a young child by directing him/her in his/her play, to consider a meaningful future, and by appealing to him/her to do what he/she ought to do.

For children who cannot go out to their world, for whom everything is lived experienced as threatening and unsafe, who will not venture to an encounter, who prefer to follow the trustworthy and the well beaten path, and who don't venture on an exploratory voyage, their lived experiencing will come to a standstill (stagnate). Then, the first task of a pedotherapist is to come forward and meet such a child and establish a relationship of encounter by actualizing the essences of an encounter with him/her. A child must be viewed in his/her totality and individuality. Each child is different from all others; each child has his/her own problems which are extremely important to him/her. This means that a pedotherapist must give unconditional love, provide security, and be a supportive person for the child. This requires continual attention and dedication. At the same time, a therapist must be directed to the child and understand and accept him/her in his/her "being-different". In his/her relationship of "being-at-one-with", he/she must, however, keep an adequate distance to maintain respect for him/her in his/her individuality, which includes his/her positive and negative potentialities.

A child must feel and lived experience that he/she is understood, and only then will he/she become more spontaneous and trusting and, thus, increasingly more likely to agree with what is appropriate to be an adult. Then, he/she will participate intensely, and display more initiative and, once again, his/her play reaches its aim.

At this point, the pedotherapist and the child can come together more deeply by the therapist presenting a play problem and problem solution and, thus, arrive at a higher level of living. In this way, the pedotherapist introduces a new motive which provides a future perspective to the child's involvement. Through play, the lived experiencing of pathic lability gradually recedes into the background, and increasingly the child becomes lost in beingtogether (with the therapist), even to the extent that he/she loses track of time; thus, the everyday time of the clock has given way to a more inner lived-time. In experiencing personal time, a child learns to see his/her way to the future and to accept his/her past as past. When a child learns to enter a situation and genuinely experience the present, he/she also can experience the past and future, which is necessary for further becoming to occur. This can be presented more clearly with an example of play therapy:

A little girl of seven, who is hysterically afraid of doctors and dentists happily constructs a child's ward in the hospital where eight children lie in their beds. The play took a good course, and she provided continuous commentary. Then, grandma arrived to see how it is going with the ill child, and a nurse brought some medicine, and announced the doctor's arrival. The girl becomes more deeply involved in the play, and it becomes very intense. The initial joyfulness became more somber until suddenly her play stopped. She could not continue; she has reached a limit which she could only surmount with the help of the pedotherapist. Here reference is made to Calon who, in his article "Catharsis and mimesis", provides the classic definition of catharsis:

"not only a being discharged and relieved of what initially restrained, but a rearrangement and regulation accomplished precisely by calling up and stimulating the emotions. This stimulation and bringing to expression of the affect occurs in a very different way, i.e., by means of mimesis, the depiction of an event". When this occurs in a play situation, van Groningen says, "this catharsis of emotion and inner disturbance is actualized more quickly in the sphere of play than in that of life itself"⁽¹¹⁾.

Only when, with the help of a pedotherapist, a child can give form to this frightening experience (of whatever nature) in his/her play can he/she place it outside him/herself so he/she can take a position toward it. Only then can he/she again direct him/herself to the future. By taking a position, such actualization is possible, and the frightening experience can belong to the past, and no longer be frightening in the present. Life acquires a perspective, and there comes a moment when the child fully enters the present.

A pedotherapist should attempt to determine and understand what the problem is. The problem should never be approached too hastily, and a joint solution must be found which includes the parents. The parents must be informed of what the problem is so their child can lived experience more understanding also at home. Thus, the child notices that the path he/she previously could not dare to take, is now more accessible and he/she can venture along this way. As the tension lessens, so does the role of the pedotherapist. A pedagogic task is that the pedotherapist and the child must become closer to each other to find a solution. When this attempt succeeds because they really encounter each other, then eventually they go together toward subsequent problems which, each time, can be solved more easily. The meaningful moment is when the child allows him/herself to be encountered, and when he/she trusts and again opens him/herself for further educating. At this moment, the child genuinely says "yes" and once again experiences progress in his/her life. This means the moment

has arrived to gradually lessen the play therapeutic intervention. The child gradually will have less need for help in solving his/her problems because they will be more ordinary ones to which he/she him/herself can find a solution.

The child experiences him/herself as assimilated once again into his/her family, and with that the therapeutic intervention moves more and more into the background. When the pedotherapy finally is concluded, then the child's being bound to the pedotherapist is discontinued of its own accord. The child again has become the child of his/her natural educators, i.e., his/her parents and, hence, the task of the pedotherapist, as a temporary supplementary parent, is ended.

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