CHAPTER FIVE CHILD PLAY: A PRACTICAL PERSPECTIVE

5.1 INTRODUCTION

In the previous chapter, there is mention of the playroom and the controlled play activities occurring in it. In this chapter, a practical perspective is taken on a child's playing, as play therapy, as ut occurs in pedotherapeutic sessions within a playroom designed and equipped for this purpose. In other words, the playroom practice, as a concrete educative event, is described.

5.2 PLAY THERAPY

When one starts from the view that deficiencies can be done away with or, at least, alleviated by pedotherapy, it then becomes necessary to know what form of pedotherapy to use for a certain child. For a young child, Lubbers ⁽¹⁾ considers playing to be the most appropriate form of help. It is evident why a different form of help is used with a child than with an adult; the child must be encountered in his/her world, there where he/she really is, there in his/her playing, where the essentials of play are actualized in child ways.

However, there is a difference between a spontaneously playing child at home, and a child playing by a pedotherapist in the playroom. The latter is a contrived situation. Even so, it is possible for a child to play intensively, provided he/she experiences safety and security there; and such an experience is dependent on the diverse ways in which the playroom is arranged, and on the pedotherapist's attitude and guidance.

By means of attentive pedagogical observation, a pedotherapist learns to know a great deal just from how a child enters the playroom. For example, a child may reveal his/her discomfort in his/her behaviors while entering; he/she may hope to receive a reassuring answer to his/her anxious question about whether his/her mother has gone away, and if she will return for him/her; he/she may not begin to play but may anxiously look around the room because everything is unfamiliar. A pedotherapist must acquaint the child with the playroom and with him/herself, and he/she must ensure that the child does not feel abandoned at any time.

The playroom must be prepared for the child's arrival. It should have the appropriate dimensions, color, and atmosphere so it is inviting when he/she enters; but it should not be like a toy store, which would so overwhelm him/her that he/she couldn't make a choice of toys. The playroom must be furnished with unformed play materials, such as water, sand, paint, and clay, as well as with formed play materials, such as wild and

domestic animals, trees, cars, trains, little human figures, a doll house, and large blocks. In choosing the play materials, the gender and age of the child must be considered because they are related to the choices, he/she prefers.

The pedotherapist guides the child in the play area, and if he/she cannot begin, the therapist makes suggestions, and leads him/her to play until a familiarity with the room is achieved, and it is experienced as a safe rather than a strange area. Although the pedotherapist gradually retreats from playing to reality, i.e., leaves more initiative to the child, he/she must still ensure that the child experiences that everything "is done together". This means that the pedotherapist is occupied with a double function, which is not at all easy: he/she simultaneously observes the child playing to know him/her, while he/she is distancing him/herself from this involvement because it is in the course and content of playing that the child makes him/herself known. However, the pedotherapist also must absorb him/herself in the playing such that assistance can be provided when it seems necessary.

In the meantime, the child enters the secure area of the playroom, and begins to experience the enticements there. The toys, which at first seem ordinary, suddenly become different. It is as if the play material has something to say to the child. The previously strange, cold play area is now an experiential space in which an intimate relationship thrives such that reality is forced into the background to make room for the images which are evoked in being together with the materials and the pedotherapist. The child begins to group the play material, and playing becomes more intense, he/she shows more initiative; his/her playing is a more experiential playing, and the relationship with the play material becomes more intimate.

At this point, one can see how the reciprocity between the player and the play material enters the foreground. Reciprocity is a matter essential for playing; as Buytendijk⁽²⁾ says in **Het spel van mensch en dier** (Human and animal play), "Playing with something is not only me playing with something, but also something playing with me".

The child plays with the things which, in their turn, play with him/her, i.e., by enticing him/her to interpret them. Therefore, it is concluded that the world of play requires reality as a background for play to occur. The intensely playing child is intimately engaged with the world, e.g., in his/her playing, a shoe can be a bed for a doll. The object itself comes to meet the child through its characteristics and invites an interpretation. Although the shoe has become a bed, he/she knows full well the shoe is a shoe, and he/she is not misled by his/her imaginative playing. The real meaning of the object cannot be lost, but it does acquire a secondary meaning. He/she knows the shoe is not an authentic bed and, for this reason, it appropriately captivates him/her. Although he/she can possibly be disappointed, he/she is not surprised when the shoe must be put on again and worn. Hence, the world of play must always yield to reality. The possibilities and limitations of what the child plays with must be considered in his/her playing.

In addition to playing being bounded by reality, and playing ceases to be playing as soon as this boundary is ignored; indeed, reality also imposes a limitation on the purely

imaginary. For example, a little girl who initially imagined with enthusiasm, sick children in a hospital ward, suddenly stopped playing when the doctor arrived (in her playing). She no longer overlooked reality as the background of her play world, and she no longer was sheltered from it. She became frightened, began to cry, and the playing suddenly stopped.

The world of play allows us to see a double structure; the play world combines the image and reality. The imaginary is constructed with factors from the real world, but the real world, in its turn, is permeated with the irreal world of fantasy.

When one reads in Langeveld's⁽³⁾ **Ontwikkelingspsychologie** (Developmental psychology/Psychology of becoming) that what most characterizes the young child is that he/she still lives in a contagious world—and, by this, he means a world where there are not yet fixed forms of intercourse, or relations built up, where a shoe can still be a shoe, but also a little bed--then one understands that playing is an essential activity for the young child. It is this contagious, alluring world which makes playing possible.

It is noted that the world of play is bounded by reality--the everyday world, on the one side, and by fantasy, the purely imaginary, on the other side. Also, as soon as this boundary is crossed reality, as background, is no longer respected, and the child leaves behind the objects of the play world, and dreams them away in pure fantasy images, playing stops being play.

In play therapy, an attempt is made to let playing develop within these boundaries, and the pedotherapist must be concerned about this. Some children are strongly bound to reality in their involvement with playing, the toy is only a toy, and speaks no specific language, i.e., the play material does not yet have personal meaning for the child. Also, there are children who are dynamically involved with the play material, and appear active, but who really are not doing much more than using things functionally, e.g., they push a little cart back-and-forth, and do not proceed to illusive (fantasy) playing.

For another child, the little cart is his/her father's car which can go so fast that everyone and everything must get out of the way. In this case, playing is lived play, and one sees the child in an intimate relationship with his/her illusive (make believe) world. The child conjures up images which have meaning for him/her, by which he/she makes known to the pedotherapist many of his/her own feelings and desires through his/her playing. Here, playing is especially valuable to the pedotherapist for learning about, and better understanding him/her. Thus, in his/her playing, he/she makes known his/her own aggressiveness, ardor, and impatience, and he/she is taught by the pedotherapist to control him/herself, and to confront his/her problems in illusive play.

In illusive playing, a child can make him/herself known in different ways. He/she can choose the play material for his/her playing, such that a firm contact with reality is maintained. The arrangement of the play material has a special meaning for him/her. An example of this is a boy of five years who built a house with building blocks. In the house is one room built from floor to ceiling on all sides without windows or a door.

Inside, a man is sitting at a table, and a boy is sitting on the ground against the outside wall waiting for the man to come out. The boy has waited there for so long that he has fallen asleep. The child has said something in this image, i.e., that his father is so intensely busy preparing for an examination that he no longer is aware of his child's existence and has become entirely inaccessible to him. Caution must always be emphasized in the interpretation of the play images. The image should never be taken out of context because it is only possible to grasp its meaning against the background of the entire course of playing, as supported by data from the pedo-diagnosis, and the historicity image of the child.

5.3 THE ROLE OF THE PEDOTHERAPIST

Reference is made to the pedotherapist, but here a closer look is taken of his/her role. Pedotherapy, as well as play therapy involve how much the child can learn to acquire an adequate image of what is possible for him/her. To this end, the pedotherapist guides him/her to enter the world of play and allows his/her playful involvement to deepen into illusive playing, preferably into a dynamic illusive playing. Through his/her attitude and voice intonations, the pedotherapist allows him/her to experience that they are playing together, although, as far as possible, the initiative is left to the child. The therapist must accept what are to him/her incomprehensible twists in the child's playing by keeping in mind that playing need not take a logical course. It is possible that, in his/her continuous commentary, the child expresses what he/she anticipates is happening. The pedotherapist's role is to help him/her carry the excitement of his/her playing, and to allow play to unfold. That is, his/her role is to promote the actualization of the essentials of play, and their meaningful interconnections. The therapist makes proposals, offers possibilities and, in being with the child, encourages him/her to play and, in this way, leads him/her to accept co-responsibility for what occurs in the play situation. For example, in his/her playing, a child may express an inner tension, which is experienced in the family situation, by being aggressive toward a male figure in the dollhouse. This could be because his/her father places high demands on him/her but, seldom if ever is home to give support. Although the child knows that his/her aggression in playing is not real, still he/she is aware that he/she is playing out something which he/she ought not to really do. Therefore, it is a relief to him/her to experience that he/she did this together with the pedotherapist, and not alone.

From this example, it should not be concluded that everything is allowable in playing. With the pedotherapist in the playroom, the child must experience that he/she has much greater freedom and, in his/her playing can and may do what is not permissible. However, when necessary, the pedotherapist must set firm limits, e.g., set a time limit for his/her playing, prevent him/her from making a mess with the unformed play material, or to wound or kill someone in his/her playing. If these limits are exceeded, it is no longer playing, and the pedotherapist and the child stand amidst reality with which the child comes into conflict. The child must be made aware by the pedotherapist that each day one is confronted by norms and values which must always be respected, even in playing. Also, when a child becomes agitated in his/her playing, it must be ended by the pedotherapist. This can occur when reality, as support giving background, is too vague and can't be relied on. Then the child is driven by a too violent affect, which can be terrifying for him/her. The prohibitions posed by the pedotherapist are experienced by the child as emancipating. Thus, the pedotherapist can stop the playing, as he/she sees fit when it has little meaning for the child. The real task of the pedotherapist is, by means of personally giving meaning, to bring the child to a different lived experiencing of his/her problems, if they can't be entirely solved.

5.4 DIFFERENT MODES OF PLAYING

Vermeer ⁽⁴⁾ has viewed playing in its essentials and sees four moments of the world of play. Since play itself is a primordial phenomenon, this does **not** mean the concern is with four separate fundamental forms, but with four modes or ways by which playing is seen.

(i) The world of play as bodily world: the world which is encountered via playful touching is a world of substance and material. Through immediate contact, sensory and pathic (affective) moments are brought to the fore and, thus, Vermeer calls this "senso-pathic" play. This senso-pathic playing has a very important place in play therapy. That is, there is an involvement with formless material, by which a minimal contact with reality is maintained because the reality encountered in this way has no form. This way of experiencing reality is relaxing, and calming for a child, and it is a purely bodily being with oneself in intimate contact with the play material; it is an experience of bodily touching and being touched. Senso-pathic playing is used in play therapy when the images with which the toys confront a child draw him/her to violence.

Also, senso-pathic playing is implemented when it appears that a child, in his/her illusive playing (see below), cannot give expression or form to what he/she is internally involved with and, thus, is still seeking to express. In addition, such playing is appropriate for a child who adheres to the everyday meaning of toys without giving them a personal meaning. Then, senso-pathic playing can have a liberating influence, in that it can initiate illusive play.

[Pretorius ⁽⁵⁾ describes senso-pathic play as bodily play. Bodily play: a child creates a world of play by touching and being touched. By immediate contact with substances, or formless material such as water, clay, mud, and paint, sensing (sensory) and pathic (emotional) moments are strongly emphasized. Therefore, this form of playing is called **senso-pathic** play. Here, it is one's own bodily form, one's **own body** which one feels and experiences. Translated by G. Y. from **Die problematiese opvoeding situasie**, p. 139. See also below re the other three modes of playing].

(ii) The world of play as manipulable world: A child keeps him/herself busy with the possibilities the toys display. The possibility of play itself does not yet arise, but the involvement with the toys is already an event by which the mystery of the world is put in perspective.

[Pretorius calls this mode playful handling. Here, a child is involved merely with a prethematic handling of toys and objects. An anxious child, e.g., cannot create an event, or design a theme in his/her playing; he/she merely handles the toys. For example, a toy car is pushed back and forth, blocks are built up and knocked down, a doll is dressed and undressed. p. 139.] This mode of playing is still superficial in that its meaning resides in the activity itself.

(iii) The world of play as esthetic world: through the continual involvement with, e.g., blocks, a constructed world arises which is the inadvertent result of this involvement by a child. In other words, there is **not yet** a playing with something to which a story gives meaning, but there is a focus on the outward appearance of what has been constructed, a focus on the esthetic aspect from which a story is withheld.

[Of esthetic playing, Pretorius says, in an improvised involvement, a child builds and forms things with the play materials; e.g., he/she builds something with blocks or forms something with sand. Esthetic play is more casual, more static, less developed than illusive play. For example, a child builds a house, not so he/she can enact a story about his/her house, but rather merely for the sake of its outward appearance, its esthetic aspect. p. 139.]

(iv) The world of play as illusive (make believe) world: for a child, illusive play has an explicit, conscious form. It is a world in which events occur which can be expressed in words. In illusive playing, a child connects the already existing meanings of things to other meanings (e.g., a shoe is now meant as a bed) and he/she plays with an ambiguous world which, for him/her, acquires the meaning of "as if". In illusive playing, a child reveals to a pedotherapist his/her images of him/herself, and of his/her problems. He/she must try to understand the language which speaks from the images and respond to them in the same image-world. Experience shows that the clearer language is regarding what the images speak, the more effective a child is in distancing him/herself more from them and taking a position toward them, which he/she can accomplish with images not yet expressed in words. Also, any conflict must not be dissociated by a pedotherapist from the sphere of play. At first, the images are vague and difficult to recognize, but later they become more clearly expressed.

[For Pretorius, illusive playing is where a child's playing comes to full development. Illusive playing has content, and a thematic course, and he/she creates for him/herself an illusive or metaphorical world in terms of the real world in which he/she finds him/herself. It is a dynamic form of playing because he/she **creates events** in his/her playing. In fact, he/she plays the story of his/her life, e.g., his/her home situation, his/her school situation--the doormat is an island, the chair is a train, the piece of wood is a cigarette. Here he/she arrives at **role playing**, in which the role of an adult (doctor, parent, teacher), a life-long associate, animals, or lifeless objects are imitated, **or** he/she arrives at a spontaneous, free, creative expression of his/her experiential world. pp. 138-139]. At this point, possibly it is clear why therapeutic play must be consciously guided. Also, a pedotherapist must initiate that form of playing by which he/she assumes a child can achieve his/her best expressions. A pedotherapist will not hesitate to even go back to a sensory-pathic form of play if that seems necessary, but the aim is to gradually elevate the level of playing. A therapist must understand the language of the play images to "play them back" and, in this way, to help a child establish a new perspective on them. However, it is necessary to always remain in the sphere of play.

A practical perspective on child playing further implies that an example of such a situation should be described. This is done next.

5.5 AN EXAMPLE OF AN ORTHOPEDAGOGIC INVESTIGATION OF AND ASSISTANCE TO A TWELVE-YEAR-OLD GIRL BY MEANS OF PLAYING

A. Introduction

All information presented is true, but for the sake of anonymity, the child's name and place of residence are withheld. The concern here is with the pedotherapeutic intervention, and the preceding orthopedagogic investigation of a seriously disturbed girl of twelve-years who, to the time this investigation began, had missed six months of schooling, even though she had psychological and psychiatric treatment. She had been referred for this treatment by the school principal because she refused to attend school.

During an Agriculture Fair, her grandfather, to whom she was particularly attached, slumped over and died so unexpectedly that the entire community was shocked. Shortly after that, her sister and her sister's husband were injured in an automobile accident. When she heard about the accident, her parents were not home and, at first, she thought they were the one's involved in the accident. This incident was a seriously traumatic one for her, and possibly relates to her refusal to go to school. Since this time, she has refused to be apart from her mother for fear that she would lose her. At school, she began having stomachaches and soon had to be dragged to school. Later, she was again forced to go to school, but then she ran away to an old lady living near the school. After a spanking, her mother then took her back to school, but was compelled to wait in the car until school was out. Her mother could maintain this routine for no longer than five days. From then on, she never brought her daughter back to school, to the moment of reporting to the pedotherapist.

The question arises as to why this girl, already more than twelve, could become so seriously disturbed by common events that she could not leave her mother's presence to go to school. Thus, it was necessary to obtain as clear a person-image as possible before any assistance could be given.

A conversation was conducted with the parents because the family situation is the original foundation for establishing learning relationships. Physical development, affective, cognitive, and normative becoming, affective-normative educating, family relationships, family structure, etc. also had to be considered. It also was necessary to

understand the nature of the affective-pathic support provided by the parents, because this lays the foundation for responding to the appeal which gnostic-cognitive learning tasks direct to her.

From this conversation, it appears that her development took a normal course, that she began school at 6-years-10 months but, unlike her brothers and sister, she did not attend a boarding school. From babyhood, she was mostly in the presence of her mother. She is overprotected, does things whenever and as she will, and doesn't really accept authority; with many servants at home, she has not learned to fulfill obligations or responsibilities, and has almost no dealings with playmates her own age. The family is a particularly happy one; they are very fond of each other, but the family circle is small and closed. The family belongs to the Methodist Church, and they are regular and active members.

Briefly, the pedagogic situation is summarized as follows:

(1) the pedagogic situation is such that she has not learned to accept responsibility, that she only experiences safety and security when in her protective home, and cannot venture into the unknown when higher cognitive demands are made;

(2) she is overprotected, especially by her mother, because, from an early age, she was a tense and sensitive child, and she is the youngest of four children;

(3) her father is strict, in comparison with her indulgent, overprotective mother, and this has resulted in a labile (pathic) emotional life. There is a great lack in the pathic-affective support provided to her from the inconsistent exercise of authority. The spoiling and overprotecting by her mother have resulted in her experiencing insecurity, which has harmed her cognitive/gnostic directedness;

(4) with many servants, she has had no obligations and only enjoys the freedom of life on the farm. Her refusal to go to school and to flee from the school world is to choose to be in a pathically [emotionally] colored experiential world on the farm;

(5) when she became acquainted with the unpleasant fact of her grandfather's death, she did not resist the evidence. Her insecurity and uncertainty became evident when cognitive demands are placed on her. Her dependency on her mother is so strong that she cannot distance herself from her.

Before she could be helped to come to a reconciliation with the world, it was necessary to obtain a clear person-image of her. To this end, playing was used as an evaluative medium (more on this later). For now, only the results of the other exploratory media are presented.

(i) The intelligence Medium

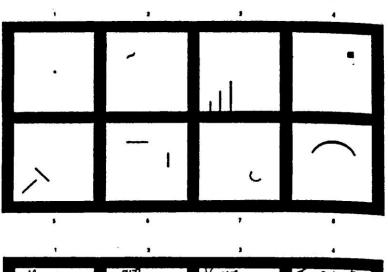
The quantitative result of the intelligence evaluation is a score of 112. However, the pedotherapist is of the opinion that the score would have been much higher if she had

succeeded in directing herself appropriately to the tasks. From the pedagogic observation, her mode of attack is evidence of labile (pathic) directedness. She cries easily, is extremely infantile, and is dependent on her mother; hence, she cannot fully actualize her intellectual potentialities.

(ii) The Wartegg Drawing medium

This is a drawing projective medium developed by Wartegg. It consists of eight squares with a variety of marks which direct an appeal to the child to construct (draw) something on a cognitive level, since she is required to give structure and content to the marks by elaborating on them. This medium allows her to be evaluated with respect to affect, imaging, and fantasy, intellectual potential and activity (See the article by Garbers).

With respect to this medium, she gives evidence that she is in a good position to constitute on a cognitive level. Her solutions are good, but her infantility and sensitivity are clear: e.g., in the first square, she drew a mouse, in the third flowers, in the fourth toy animals, and in the seventh, a little bee (See figure 1).



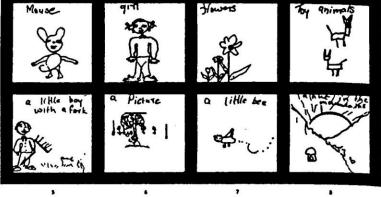


FIG. 1.

- 1. Muis.

- Muls.
 Dogtertjie.
 Blommetjies.
 Speelgoeddiertjies.
- 'n Klein seuntjie met 'n vurk.
 'n Prent.
 'n Klein bytjie.
 'n Hutjie in die berge.

Figure 1

- 1. Mouse
- 2. Girl
- 3. Flowers
- 4. Toy Animals
- 5. A little b oy with a fork
- 6. A picture
- 7. A little bee
- 8. A hut in the mountains

(iii) The Roschach inkblot Medium

Formal analysis: 31 responses in 24 minutes		
W=3 (2+)	F=22(13+)	A=9
D=25	FC=1(+)	H=1
Dd=1	CF=1	Nature=10
DS=1	CS=3	Objects =6
	FY=2+	
	M+=1	
E. 000/		
F+=60%		
A=30%		
H= 3%		
P=13%		

The few whole (W) responses indicate that she doesn't break through the pathic, as a mode of lived experiencing, while the larger number of detail (D) responses is indicative of the pathic as a possible restraint on her cognitive lived experiencing. (The actualization of pedagogical essences also will be restrained and inadequate from her way of life). Also, she gave very many animal (A) responses at the expense of human (H) responses. (She withdraws herself from others and wants only to stay on the farm). The low kinesthetic (movement)(M+) response possibly is an indication of an attempt to isolate herself from others, and the same with the low popular (P) response. This is another unfavorable indication of the establishment of learning relations, and the further actualization of pedagogical essences with her educators. Although there is only one M+ response, this can be viewed, in the light of her situation, as an indication of fleeing from the foreign reality of the school and, thus, from the essentials of educating, i.e.,, the essentials of play, which must be actualized there.

(iv) Incomplete sentences

The intensity of her attempt to flee from school, to escape the cognitive demands of the school world, is clearly shown in this medium as follows:

"At school it is terrible" "I wish I did not have to go to school" "The happiest time is when we are all together at home" "At homel have lots of fun" "I am happiest when I am at home"

The experiences of the school as unpleasant, and her pathic directedness (i.e., a carefree life of play, and free living on the farm without obligations) are projections which are in the foreground throughout this investigation.

(v) The apperceptive media: Columbus pictures

Her pathic directedness, i.e., a carefree life of play, cold drinks, and ice cream, a ride on the back of a bird, and flying over the school in to see how others must work, are all evidence of a flight from authority, norms, and responsibility. The

adjective "little" is often repeated in all the pictures and can be viewed as indicative of her strong yearning to remain small, so she can stay on the farm without obligations.

(vi) Graphic expression media

These media can be used, and successfully with play, because drawing and painting are also seen as forms of play (More on this when play is discussed as a medium of evaluation, and of therapy).

(a) Drawing persons

In figure 2, her person drawing was placed in the middle of the paper. This can indicate inflexibility, tension, and basic insecurity. The arms of the female are outstretched and can indicate a yearning for love and protection. The arms of the male figure hang straight down the body. This can indicate tension, and "withdrawal", as well as feelings of passivity and defensiveness (See figure 3).

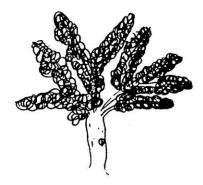


Figure 2. Person drawing

Figure 3. Person drawing

b) Tree drawings

With each tree drawing, there is an indication of traumatic experiencing. The trees hang in mid-air without roots or ground (See figures 4 and 5); this is possibly how she experiences herself--with "no ground under her feet"--as insecure.



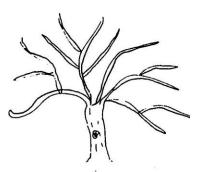


Figure 4. Summer tree

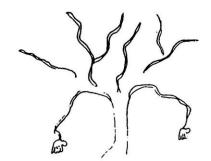
Figure 5. Winter tree

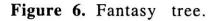
c) Fantasy tree

The loose, disconnected branches with downward hands (See figure 6) can also indicate depression and self-disintegration.

d) Drawing of a house

In figure 7, a house was drawn with a closed door and no windows. This can reflect the isolation and private nature of her family life, and possibly also the loneliness of her grandmother since the death of her grandfather.





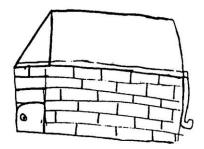


Figure 7. House drawing

Even though she is twelve-years-old, the investigation took place in the playroom, and began with play as the method of investigation. This is because she acts toward everyone with suspicion, and she must become distanced from her mother through playing.

Thus, the first aim is to create a situation in which she feels secure and in which the pedotherapist is not experienced as a threat. She cannot do without the security of being together, and this can only be accomplished by a pedotherapist who co-experiences

empathetically, and who assists in the meaningful actualization of the pedagogical essences without imposing him/herself on the child.

The pedotherapist participates in her world and helps her come to a reconciliation with it and its real essentials. Then, a therapeutic relationship arises in which symmorphosis becomes possible. Symmorphosis means that, through play and with the example of the therapist, she learns to manage what is strange and what causes alarm. When she cannot find someone who can help her by means of symmorphosis, her anxiety continues, and the actualization of the pedagogical essences are distorted.

As a therapeutic method, play therapy is not essentially different from symmorphosis in daily life. There are optimal possibilities to create symmorphosis through play. Then, anxiety appears in projected concretizations. Projection means that, in play, her problem is attributed to another through characteristics, affects, behaviors, attitudes, and relations, e.g., with the figurines used in the

Von Staabs⁽⁷⁾ play medium. This means that, by projection, she defends herself against a confrontation with her avoided self, as this appears in the other (e.g., in the figurines). Thus, projection is a defense. When projection doesn't occur, neither does concretization. Concretization occurs in times of anxiety and insecurity, and the feelings of threat are concretized. This is still unpleasant and stressful but, at least, it is no longer vague and incomprehensible. Further, with the help of the pedotherapist, measures are taken against it, because there is something tangible to face. During play, projected concretizations arise, and therapy begins when she ascribes anxiety to another, and she can explore it in the safe presence of the pedotherapist, as co-actualizer of the pedagogical essentials.

The child knows that she will not be exposed by the pedotherapist because protective anonymity is preserved during play therapy. Through playing, she becomes accessible to and approachable for the pedotherapist. The first and foremost pedagogic task is to ensure her feeling of security when she engages in **illusive play**, as a form of the actualization of pedagogical essences (educating), and she is not confronted with the problematic reality. Then, she can relate to what was being avoided while she is in the presence of the pedotherapist, and can be guided to projective concretizations, and eventually to full projection, and finally to deprojection.

She is lonely and desires the pedotherapist's participation. She became a participant in the avoided world, and the essences of educating were discernible in that she engaged in projections and did not feel threatened by them. The aim was then to playfully create an image of a secure world; to a degree, she had to retreat from her participation in the environment. She was still involved with the world, but more from a distance because the world temporarily receded behind the playing.

In educating, or corrective educating (pedotherapy) through **play**, there is a methodical attempt to help the child, via symmorphosis, but in an incidental and indirect way. Symmorphosis during playing generally rests on security which is given as a possibility in the relationship with the pedotherapist. Because of deficiencies in her being educated, thus, through inadequately actualizing the pedagogical essences, as well as her traumatic

experiences, striving for security was a motive for illusive play. The task of the pedotherapist, then, was to see that the level of play was elevated by removing all hampering influences. The therapist also must be attentive to make sure that the child is not over-taxed during each visit, because this leads to a decrease in the level of playing.

Playing usually takes its course in a sphere of intimacy and trust, which invites participation. To understand the girl in her playing, observation is a meaningful procedure, but it is not enough. The pedotherapist also must participate in and link up with the world the child has playfully designed. The pedotherapist assists her in developing her playing because obstructions arise which can only be overcome with the help of the pedotherapist. Obstructions arose in the content, as well as in the way she played. Not only what she played, but also how she played manifested problems which required encouragement and assistance.

To explain play therapy to her and the investigation preceding it, an attempt was made to describe the event of play to her. In her case, the choice of play therapy was because all other forms of therapy had not been successful. Also, she is so closed, and turned into herself that she must be helped by the pedotherapist to participate in play. [However, the pedotherapist is so caught up in the richness of the encounter, and so much occurs that it is difficult to express in words the share or role of the pedotherapist].

B. Pedotherapeutic visits

First visit

This twelve-year-old had to be brought to the playroom by her parents. She cried without restraint and clung to her mother while she pleaded not to go back to school. The parents took turns staying with her so that a conversation could be conducted alone with each of them. Eventually, she agreed to sit with the pedotherapist in the playroom without her parents, provided they wait for her near the door. Although the car keys were in her hand, her mother's handbag on her lap, and tears flowed, there was still a little hope that she would proceed to play. The play medium of Gerhild von Staabs, which consists of building blocks, farm animals, wild animals, trees, human figures, and household items, in due course, directed a strong appeal to her. The pedotherapist tried to actualize the essentials of playing with and for her. She built a large farmhouse and barnyard. (See figures 8 & 9).

First, she placed grandpa and grandma in one room, and then, in another room papa, mama, and a daughter. They are all sitting and are supported by their hands; not one of them is involved in anything. Outside in the barnyard are different farm animals, and a boy and girl sit with a little pail under a cow.

In these first play activities, she participated in actualizing the essentials of play, and she began communicating with the pedotherapist by using play to conduct a dialogue (Compare the essentials of play-as-dialoguing, play-as-knowing, play-as-designing). From this first visit, it is evident that she cannot accept that her grandfather is dead and,

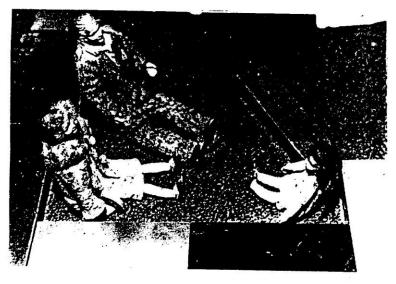
thus, he lives among them in the world she designs in play. A second deduction is that she cannot accept and carry the responsibility and obligations which the school demands, so she withdraws to the safe, private family circle where she interacts with her parents, and where all three of them are passive. This can point to the problematic school situation which they no longer can solve alone.



FIG. 8.

Plaashuis en werf. Oupa en Ouma in een vertrek. Pappa en Mamma met 'n dogtertjie voor hulle. Buite op die werf twee kinders by 'n koei.

Figure 8. Farmhouse & yard. Grandma & Grandpa in one room. Papa & Mama with daughter in front of them.



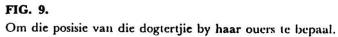


Figure 9. The position of the daughter with her parents.

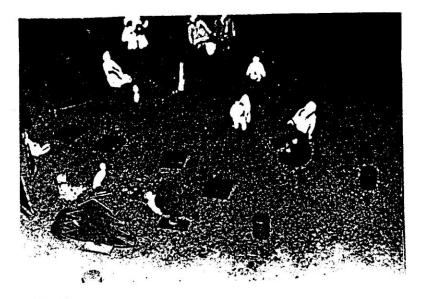


FIG. 10.

'n Park op die dorp. Die Oupa en Ouma heel regs. Die Pappa en Mamma met 'n babatjie voor hulle. Sy hunker daarna om klein te wees. (Vergelyk ook in ander projeksies die gebruik van "Little".)

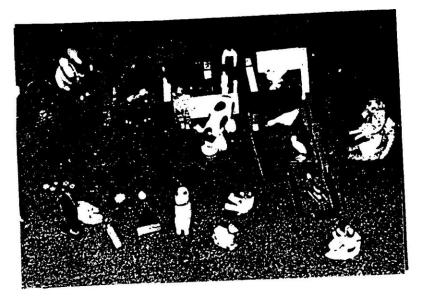
Figure 10. A park in the city. Grandpa & Grandma far right. Papa & Mama with baby in front of them. She longs to be small (Compare use of "Little" in other projections).

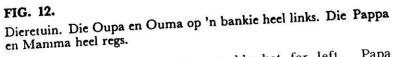


FIG. 11.

Let op die posisie van die dogtertjie: klein en tussen haar ouers.

Figure 11. Indicates position of daughter: small and between parents.





Papa & Mama far Figure 12. Zoo. Grandma & Grandpa on blanket far left. right.

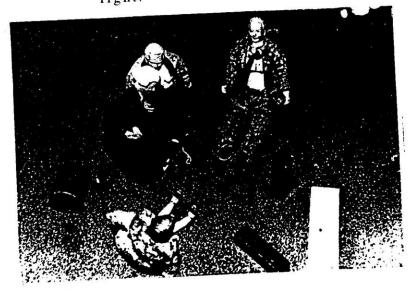


FIG. 13.

Die Oupa en Ouma in die dieretuin saam met die Pappa en Mamma. Die dogtertjie sit 'n ent daarvandaan.

The

Figure 13. Grandpa & Grandma with Papa & Mama in the zoo. daughter sits at a distance from them.

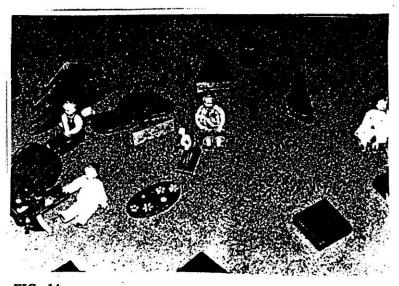


FIG. 14. Kinders in die dieretuin.

Figure 14. Children in the zoo.

Second visit

She stepped into the playroom alone, provided that her mother remained within her reach. She still didn't speak and showed an interest in no other play media than the Von Staabs. In figures 10 and 11, she built a park in the city which had trees and flowerbeds. Benches, birds in the trees, and a swan in a little pond created a tranquil and pleasant place to go and relax. The very first thing she did was to place her grandpa and grandma on a bench under a tree. Next, she placed papa and mama on a bench, and a little way from them, there is a little girl with an ornament in front of her.

From this visit, the following deductions are made:

(1) she still does not accept her grandfather's death, and designs a play world in which this fact is avoided;

(2) she designs a park in the city where there is peace, which points to her pathic directedness, and the cognitive tasks of the school still escape the adequate actualization of the essentials of playing, and do not yet occur;

(3) as far as distancing is concerned, progress is shown in that she sits alone on a bench, still near, but not between her parents. She is still passive, and looks at the ornament, but is not involved with anything.

Third visit

The same play medium still directed an appeal to her, and she was willing to remain in the playroom without her mother. She was not willing to carry out any more formal tasks (e.g., draw a person, incomplete sentences). In figures 12, 13 and 14, she built a zoo with a variety of animals in separate pens. Flowerbeds, trees, and benches create a peaceful atmosphere enticing to a person. Grandpa and grandma sit and look at the animals, while papa and mama sit at a distance from them, and she is at an entirely different pen eating a banana.

(1) On this visit, the play shows that grandpa is still in their midst; his death, thus, is a traumatic experience which she cannot yet resolve.

(2) The distancing from her parents progresses well, although she still shows a pathic directedness. She is already distanced from the farm (in play), although she is still together with her parents in town. She no longer cries in the playroom and allows her mother to stay in the waiting room. Her participation in actualizing the essentials of playing is thriving.

Fourth visit

Upon entering the playroom, she asked if she again could build a zoo. She was more spontaneous, and sociable, didn't cry, and asked when she could come back. There also was a noticeable change in the play situation, and content. Grandpa was no longer with the family at the zoo. Grandma remains with papa and mama, and the little girl is at one of the animal pens feeding an animal.

The corrective educating and redefining through playing had now begun to take a favorable course, i.e., she realized that grandpa must be absent because he is dead.
 The distancing from her parents continues to progress, and she feeds the animal rather than sitting passively, and looking on; activity, which is necessary for actualizing the essentials of play, begins to appear.

Fifth visit

As with each therapeutic visit, she began with the Von Staabs play medium. In figures 15, 16, and 17, she finally designed a school ground, but not yet the school itself with classrooms. The teacher is placed under a tree and chats, such that she can watch so the children will not get hurt. The children sit in a single file under a tree and are busy eating their lunches brought from home.

A very favorable deduction made is that she is now away from her parents on the farm and has ventured to the school grounds. She doesn't experience the teacher as threatening, but as directed at protecting the children on the playground. However, she still experiences herself as isolated, and the children do not play together, but sit on a bench under a tree and eat.

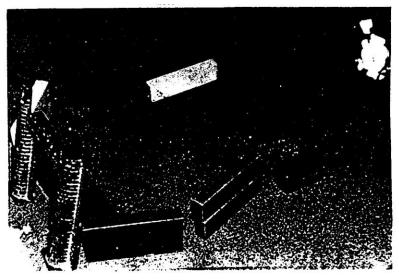


FIG. 15. Die leë klaskamer. Figure 15. The empty classroom.



FIG. 16.

Die speelterrein by die skool. Heel regs die onderwyseresse en die kinders een-een onder 'n boom, besig om hulle kos te eet. Let op lee klaskamer heel onder.

Figure 16. The playground at school. Far right teacher & children apart under a tree eating their food. Notice the empty classroom below.



FIG. 17.

Sixth visit

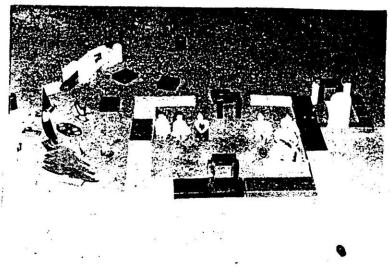
This time, she entered the playroom genially and happily. Excitedly, she related the events of the previous day, i.e., she went with her niece (with whom they are staying while she comes to the pedotherapist each day) to the ice-skating rink, and her parents went to the movies the previous evening while she stayed at home with her niece.

While chatting, she **began to build a school** (see figures 18, 19 & 20). She had placed flowers and ornaments, as decorative art, in the classroom, and a blackboard with the teacher in front of it. Then, she made some benches and placed children on them; but she began crying uncontrollably and pleaded with the pedotherapist to help her to not go back to school. The play image is still too close to the frightening reality. Suddenly, she stopped playing, and began to ask the pedotherapist questions. The pedotherapist tried, through her answers, to allow her to see her problem in a new perspective, and to guide her to redefine it. Because she is twelve-years-old, this could be done through conversation. Also, in play therapy, conversation is usually used, but on a level understandable to the child.

The play therapist continually is involved in pedagogically responsible ways, via personally giving meaning, to guide the child to different ways of lived experiencing her problems. The pedotherapist had to answer the following questions:

- (1) why did only my grandpa die, while many other children still have their grandpa, and grandma with them?
- (2) Why do I have to go to school and learn all the necessary subjects when all I want is to be a typist or ballet dancer; why can't someone teach me to type or dance at home?
- (3) Why am I such a coward, afraid of death, and afraid my mommy will die?

The meaning of death, the necessity of different subjects at sc



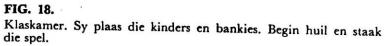


Figure 18. Classroom in which she places children and desks. She begins to cry and stops playing.

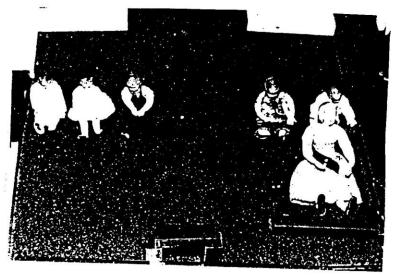


FIG. 19.





Figure 20.

and the fact that her bodily presence with her mother is no guarantee that she will not die, were situations which had to be elucidated for her. This opportunity also was used to show her that, in fact she is not afraid of death, since she can sit nearby without any alarm when a sheep is slaughtered (this is from information she provided). Also, she carries out assignments when it suits her, and not when she is expected to. A good example of this is the Rorschach medium, which was presented to her on a certain day, but she wanted to do it on another day. She wanted to regulate her own daily program, and even to determine the time of therapy so she could sleep late, play tennis, swim, or go to the movies. All these examples were mentioned to her as a retrospective view to convince her that she is not so much afraid of death, but rather of the demands which school places on her. Thus, it is responsibility from which she recoils. She stayed home when her parents went to the movies, and she went ice skating without them, even though this was an unfamiliar place, and among unfamiliar people. In fact, she clings tightly to her mommy only when she must go to school.

Her overprotective upbringing gives clear evidence that she is not being brought up to carry responsibility, and she only eludes school, the one place where she must accept authority, and fulfill obligations. At twelve-years-of-age, she is still so pathically [emotionally] directed that she cannot adequately explore cognitive learning assignments.

Seventh visit

During this visit it was evident that much had been gained by the conversation in the previous visit. She had so much trust in the pedotherapist, and experienced so much safety and security that she was ready to venture with the already mentioned exploratory media (e.g., the Rorschach inkblots), the results of which have already been reported in the introduction. Because she is twelve years old, play therapy cannot be continued every day and, thus, image (i.e., drawing) and conversational therapy also were used. The aim always is to attain a higher play and image level and, thus, an adequate actualization of the essentials of play. Image-communication, just as play, provides her with a safe detour. Also, with image therapy, the assistance given is characterized by the anonymity of her problem being maintained.

She was calmly involved with the difficulties presented by the "image". When she accepted a solution for the problematic "image", she experienced this image as reality. Her task was to draw anything at all with colored pencils. In figure 21, she decided to draw a dancing girl in bright colors and not the somber, helpless, passive girl previously drawn. This was followed by two little faces (See figure 22)--a boy and a girl happy about a present they received.



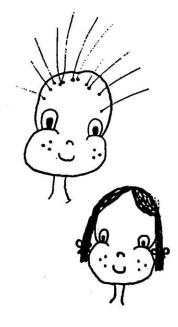


Figure 21. Dancing girl in bright colors. Figure 22. A boy & girl pleased about a present from their Grandma.

Generally, a different attitude is evident, and a different meaning of life is expressed in the more cheerful images (drawings) she created.

Eighth visit

During this visit, she was allowed to draw what she wanted, and she decided to draw her **teacher** (figure 23). What is particularly meaningful is her use of color; of the 24 colors at her disposal, she only chose dark, somber colors, i.e., black and dark peach. On the previous day, when she had drawn a dancing girl, she used bright colors. Now, when she drew her teacher, she used somber colors.



FIG. 23. Haar onderwyseres in donker, somber kleure gekleur.

Figure 23. Her teacher in dark somber colors,

Thus, she experiences her involvement with her teacher as a problem, which also gives rise to anxiety. Through a conversation, the value of a teacher was brought home to her by the pedotherapist, and no additional tasks were presented to her.

Ninth visit

After a friendly greeting, she decided again to draw her **teacher** but, this time, in the classroom with two children in front of her, and with a history test which the teacher has written on the blackboard (figure 24). She used lighter colors, and a vase with brightly colored flowers was also in the classroom. This indicates that she has overcome her passivity by venturing with a history test, which the teacher has written on the blackboard. Where she was terrified in the play situation and began to cry when confronted with the classroom situation, during image therapy, she was calm and proceeded to draw; continual support from the therapist, along with the actualization of the essentials of playing, led to this.



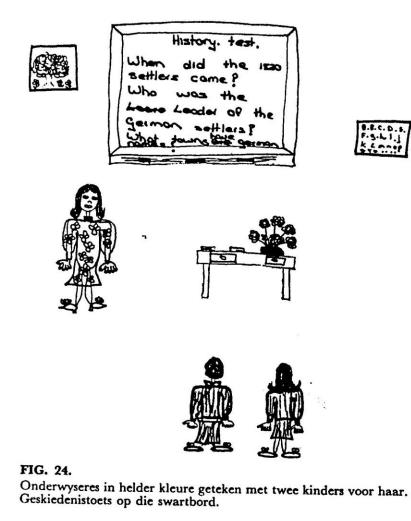


Figure 24. Teacher in bright colors with two children in front of her. History test on blackboard.

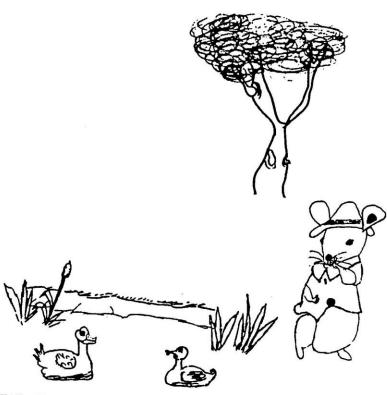


FIG. 25. Deprojeksie: vrolike hasie en eendjies op die water.

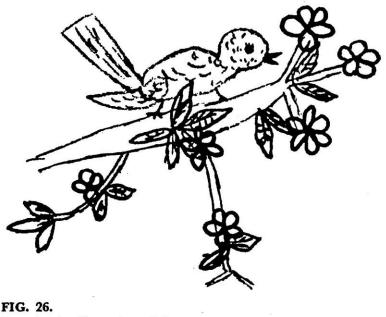
Figure 25. De-projection: happy rabbit and ducks in water.

Tenth visit

She was still disposed to draw, but she projected no more problems, and it was evident that deprojection had occurred. In figures 25, 26 & 27, she has drawn a singing bird, and a happy rabbit with bright, happy colors. All her drawings indicate sensitivity and infantility. A twelve-year-old girl who chooses little birds, rabbits, bees, and flowers as themes has not yet achieved the level of becoming which she should have achieved.

From the letters she wrote to her sister during their stay in Pretoria while she was receiving pedotherapy, it is evident that she was ready to go back to school; hence, she began to worry about catching up with her overdue school work as quickly as possible. She even began to wonder how things were going with all her friends, and she yearned to see them again. (Compare the essentials: understanding of future, of demands of propriety, of the demands of being human, of responsibility). While giving pedagogic

support, and during pedagogic approval (intervention), she was taught to take a new way so she could persist in doing the approvable without the presence of the pedotherapist.



Deprojeksie: Singende voëltjie.

Figure 26. De-projection: singing bird.

Now that she has given notice in a letter to her sister that she wants to go to school, and that she will walk along a new path, the pedotherapist knew that she must increasingly distance the girl from her so she can become free to respond independently. This means that the pedotherapist had to create opportunities for her to actualize the essentials of play, in the absence of the pedotherapist. To this end, the pedotherapist had already taken care that, after each visit, she brought home assignments to be completed, e.g., writing letters to her sister, as well as sharing drawings.

After each parting salutation (saying good-bye), the invitation was given that she may come back the following day. This is because she must experience that even though after saying "good-bye", the pedotherapist is not **by** her, but she is still **with** her and all that an encounter implies, continues to remain in force.

Also, it was careful that the visits did not conclude suddenly and unexpectedly. During pedotherapy, periodic breaking away was arranged by the pedotherapist more often and with increasing duration. A clear understanding of which obligations are consistent with living according to the demands of propriety should be considered during periodic breaking away and which had be brought about. Then, the pedotherapist could risk terminating the therapy and establishing a periodic breaking away of a very long duration, but the prospect was always presented to her that she may write, telephone, get

in touch, and, when needed, she could visit with the pedotherapist. In this case, the breaking away has continued for more than a year. Thus, a very gradual distancing from bonding had to be accomplished which eventually would lead to morally independent choosing and acting (pedagogic aim structure).

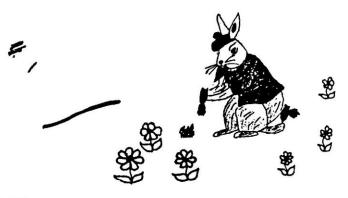


FIG. 27. Deprojeksie: Vrolike hasie tussen blommetjies.

Figure 27. De-projection: Happy rabbit among flowers.

References

(1) Lubbers, R. Voortgang en nieuw begin in de opvoeding, Assen, 1966.

(2) Buytendijk, F., Het spel van mens en dier, Amsterdam, 1932.

(3) Langeveld, M. J., **Ontwikkelingspsychologie**, Sesde druk, J. B. Wolters, Groningen, 1964.

(4) Vermeer, E. A. A., Spel en speldpaedagogische problemen, Utrecht, 1955.

(5) Pretorius, J. W. M., Die problematiese opvoedingsituasie, McGraw-Hill,

Johannesburg, 1976 [Reference not in the book; it was added by G. Y. to help clarify Vermeer's levels of play].

(6) See Garbers, J. G., **Die Wartegg Interpretasie volgens Kinget, G. M.**, The Drawing Completion Test.

(7) Von Staabs, G., **Der scenotest**, Vierte Auflage, Verlag Hans Huber, Bern, Stuttgart, Wien, 1964.