

How desperately some children need us to listen to them, and to try to understand what they say, and how easy it is to be too busy to listen. Inside each child there is a story that needs to be told – a story that no one has yet had time to listen to. It is through expressing himself that the child gets to know himself and sorts out his confusions, and develops his own self-image, and sense of himself in relation to someone else who will stop to listen.¹

As Mark (not his real name) entered the room he looked around warily. I beckoned him towards me and he cautiously made his way towards the chair and sat down. I smiled at him and his eyes narrowed as he regarded me suspiciously. That look suggested to me that here was a story that needed to be told. Although he had been referred for aggressive behaviour at home I suspected that other issues were beneath this outward manifestation. It was important that Mark told his story. Whether verbally or through play, expressing his emotions would be an essential part of therapy.

Play is the language of children. They are connected by the very act of play to worlds beyond their conscious thoughts and physical space. Through play their needs can be communicated and problems solved. Their fears can be soothed and relationships made. Events are re-enacted through both play and story. Through these, hope, healing and comfort are brought about within a therapeutic environment.²

In my work as a counsellor and play therapist I have worked with many children who have told me their stories through the act of playing. Often few words are needed as they work through issues that are prominent in their hearts and minds.

Mark was nine years old when I first began sessions with him. He lived with his mother and father, twin sister and older sister. He



Play and tell

Storytelling through play: A case study

by Heather Barton

was referred by his mother due to problems of being bullied at school and his tendency to be angry and aggressive at home. His mother hoped that counselling and play therapy would help to bring about a change in his behaviour so that he would be less aggressive at home and have more confidence in himself at school.

In our first session I told Mark that he could choose whatever was in the room to play with. He cautiously approached the large box of Lego. I watched him while he built towers which became a disaster scene as he knocked them down. Emergency vehicles went to the rescue and ploughed through the rubble. He didn't talk very much, but remained intent on building and rebuilding the scene. As I observed him I wondered about the significance of his actions and the story that he needed to share.

The second session proceeded in a similar way. This time, however,

as he built towers with Lego, Mark began to talk, guardedly at first and then more openly, about his family. It became apparent that there was domestic abuse within the family and Dad's alcohol consumption was the main cause. Dad could be violent at times, when he had been drinking. Mark told me that he often locked himself in the bathroom when his mother and father were arguing because the sound of the raised voices frightened him. When he knew they had finished arguing he found it difficult to come out of the bathroom and face the rest of the family.

At the end of this session Mark said that he felt a lot lighter. He seemed relieved of some of the heaviness of not being able to talk about his problems to anyone. I was later able to speak for a while with Mark's mum and piece together some of the family's story. The parents were struggling with their marriage and at the same time his father was in therapy for alcohol

misuse, although this had not been disclosed at the time of referral.

Children who have experienced and witnessed domestic abuse often have low self-esteem and self-awareness. They also have fewer skills in emotional expression and managing emotions in stressful situations. Their interpersonal problem-solving skills are often poor and they may be unable to bring hopefulness and optimism to situations.³ Children in families where domestic abuse takes place are at risk of developing problems with shame, low self-esteem, depression, suicidal ideation, anxiety and dissociation.⁴ In our early sessions Mark was helped to overcome some of these difficulties by being allowed to express his emotions and deal with his thoughts and feelings. This helped to build his confidence and self-esteem.

In a later session Mark began to talk about his experiences of being bullied at school over the last two years. His problems started when he had been put in a different class to his twin sister, Mary (not her real name). When he and Mary were together, even if sitting separately in class and having different friends, they gained a great deal of strength from just knowing the other one was around. When they were put in different classes Mark was the one who suffered most and he became vulnerable to those who were looking for an easy target to bully. The trauma of domestic abuse within the family home had made him nervous and anxious, which placed him in a very vulnerable position and open to being bullied.

While he talked about his experiences, Mark built a castle out of clay and made characters that fought together and were angry with each other. The fighting between characters continued and the anger escalated until he smashed it all down and rolled the clay into one big ball, thumping it and muttering under his breath. As

I gently asked what was going on for him he began to cry and talked about his peers who were unkind to him.

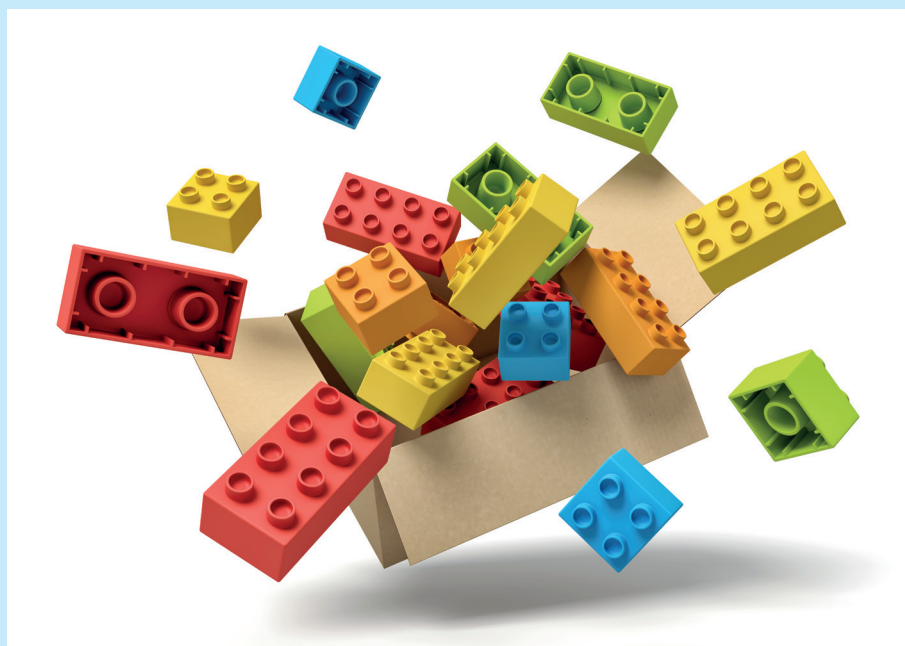
In another session Mark arrived with a big smile on his face. He began by telling me that his dad was trying very hard not to drink which had made things much easier at home. Despite this, he said that he still had times when he felt very angry. I wanted to help him explore this and we talked about how he feels when he becomes angry. He drew a volcano on a piece of paper and said this was what it was like when he became angry. He explained how he erupts into a big explosion when it all gets too much for him. Mark then moved over to the sand tray and found figures to represent his family. He lined them up at the end of the tray saying that they wanted to race. He started to move the figures one at a time. As they raced up the tray he began to place obstacles that they had to overcome. As the figures continued racing they dealt with the obstacles one at a time and then arrived at the finishing post together. It was a powerful piece of work which I felt very moved by.

Afterwards I reflected on what an incredible tool the sand tray is and

how powerful some sessions can be. Sand play may not be rational to the client or therapist when it is being created, but it can change the awareness of both.⁵ It provides a safe place for the expression and playing out of repressed and aggressive needs. This can indicate that there are also levels of consciousness at which the client is working to be taken into account and traumatic events in the life of the client that they may or may not be aware of.⁶

In the next session Mark told me he wanted to understand more about his anger. He asked very mature questions about how he could learn to control his anger and we explored this for a while. He then went to play with the Play-Doh making aliens and monsters that fought for a while and then made friends. It was an enjoyable session that left me with a good feeling that things were improving for Mark. He appeared to be less tense and angry, and I believed he had already benefited from the sessions. I later heard from his mum that he was much less angry and aggressive at home.

In our final session we talked together about some of the things that had changed for him since we started. I asked him if he would



like to draw something of how he felt now. Drawings allow stories to be told that express feelings and emotions. They can be a very powerful way to help the client work towards wholeness and emotional healing. Drawings can mediate between the unconscious and conscious, thus acting as a bridge between the inner world and outer reality, giving form to what seems inexpressible or unspeakable.⁷ Although specific interpretation should not be carried out by the therapist, observation allows understanding of how clients view their world. Relationship between objects, for example, can be seen as well as how the energy of the picture gives the appearance of being fast and chaotic, or slow and harmonious.⁸

Mark began by drawing a tree with a thick, strong trunk and leaves. I asked him if the tree had a name and he said that it was called 'The Bushy Tree'. He said that the roots ran along under the ground just beneath the surface. I asked him if he would like to add anything else to his picture and he drew lots of leaves both on the tree and on the ground. He said that the more leaves the tree had, the older it was

and the older it was, the wiser it was, which I found very interesting. He then added the sun and a blue sky and flowers growing by the tree.

Much can be learned about the client from the way they draw a tree. The outline and detail of the tree, as well as the shape of the tree, can give clues to the client's emotional state.⁹ I understood Mark's drawing of a tree with a thick strong trunk and many leaves to be a sign that he was currently feeling fairly strong and stable.

In supervision I reflected on the changes I had seen take place for Mark. Despite being nervous and wary in the beginning, Mark was a very friendly and likeable child. He was also anxious to please and get things right. I felt that we had developed a strong relationship. I enjoyed working with him as he began to understand more about himself. He became much more confident, mature in his attitude and accepting of himself. Through play he had been able to tell his story, and through this had found healing and had gained confidence in himself.

References

1. Kanter, J. (2004, p.19). *Face to Face With Children. The Life and Work of Clare Winnicott*. London: Karnac.
2. Mills, J.C. & Crowley, R.J. (2014). *Therapeutic metaphors for children and the child within*. Hove: Routledge.
3. Coholic, D. (2010). *Arts Activities for Children and Young People in Need*. London: Jessica Kingsley.
4. Sanderson, C. (2008). *Counselling Survivors of Domestic Abuse*. London: Jessica Kingsley.
5. Turner, B. (2005). *The Handbook of Sandplay Therapy*. California: Temenos.
6. Weinrib, E, L. (2004). *The Sandplay Therapy Process. Images of the Self*. California: Temenos.
7. Case, C. & Dalley, T. (2006). *The Handbook of Art Therapy 2nd edn*. East Sussex: Routledge.
8. Robbins, A. (1994). *A Multi-Modal Approach to Creative Art Therapy*. London: Jessica Kingsley.
9. Volz, S. (2022). *How to interpret tree drawings*. Available at: www.ehow.com. Accessed 20/4/2022.

Heather Barton

About the author

Dr Heather Barton is a qualified Counsellor, Play Therapist, Coach, Supervisor and Trainer in private practice. She has completed a Professional Doctorate in Counselling and Psychotherapy Studies at Chester University. She has a BA in Integrative Counselling, and MAs in Play Therapy and Relational Counselling and Psychotherapy.

