Foreword

It was an honor to be asked to write the foreword for *Emerging Research in Play Therapy, Child Counseling, and Consultation*. For me, this was exciting, because the text covers areas that are near and dear to me: play therapy research, practice, and application. It is unique when compared with other play therapy primers, because it informs readers about the consultative process and thoroughly demonstrates this process, the settings we may use it in, and conceptualizes the impact of culture on consultation. It is also unique in the fact that it does not simply present play therapy theory and techniques. Instead it opens the door for the use of play therapy, as a tool in consultation, with teachers, allied health professionals, special populations, and those we might engage with in the legal system.

After having been a pharmacist for many years, it was not easy to find my place in the world of play therapy. Trying to blend the training of a medical model with a wellness model led to a dichotomous view of individuals rather than one of integration. It was through neuroscience research that integration occurred. My brain understood the neuroscience and play therapy components and I could tell and teach others how these components relate and support each other. In 2002, I began presenting at conferences about working with medicated children in play therapy. At this time, few states required mental health practitioners to know anything about psychopharmacology; now many require it as a course during graduate school. The attendees of these sessions said I made complex concepts easily digestible.

I had found my place in the world of play therapy. From this position, I could teach others about how to utilize play therapy, how to allow neuroscience to inform their practice, and how to blend the two parts to benefit children not only in the playroom but also when consulting with all of the other players within the systems of children. Although over the years the focus of my presentations and writings have evolved, my foundation remains clearly grounded in the fact that I understand the world and what occurs in play therapy by viewing it through a neuroscience lens. Therefore, if I can remain focused on my foundation, I can help other play therapists find their foundation, learn to focus it to help children, and to begin to harness this foundation to help those in a child’s system to understand children and the circumstances that impact their existence, quality of life, and future.

As a play therapist and educator, I am encouraged because of the renewed focus on the value of play. After having utilized play therapy for more than 15 years, I am amazed when I read a news article or see a television report that focuses on the importance of play. This amazement comes from a place of “well duh”, because as play therapist we know this. The question, “Why didn’t others know this as well”, comes to mind. For more than 100 years, theorists and developmental therapists have described for us, in research and books, that play is purposeful and meaningful; it is not simply a random act of fun. For so many, play is seen as a break from organized, constructive work. They see play as a reward for focused worked or good behavior. From this viewpoint, play is often eliminated when a child has not
completed his or her work or when he or she has misbehaved. Play is negotiated. It is omitted when a task is deemed as more important. However, when it is minimized children suffer and those around them feel the repercussion. Classroom and home behaviors escalate and everyone in the system becomes stressed.

As play therapists, we differ from much of the world in that we see play as the work. We have defended our method of working with children for decades; while, much of the world around us focused on manuals and protocols. These competing viewpoints led to many debates, and at times, placed a wall between play therapists and other mental health practitioners. We assert that what we do in a playroom is not neat and cannot be easily reproduced in a scripted fashion. We operate from the philosophy that what occurs within a playroom needs to transpire in order for a child to heal.

Often our greatest challenge is to help others see the value of play and the need for play therapy. Texts like Emerging Research in Play Therapy, Child Counseling, and Consultation help us focus our foundation, explain our process, and support and encourage those within the systems of children to be a part of change rather than a hindrance to growth. We utilize our therapeutic skills, through consultation, to convey what we know about play therapy research, practice, and application. Through consultation and collaboration we try to add to a child’s supportive army and provide them with allies outside the playroom.

When we are consulting with parents, teachers, administrators, other therapists, allied health professionals, and judges and attorneys, we know that most want to understand why something is the way it is, and that as humans, we try to make sense of the unknown. We peak the interest of our audience by taking them to a place of remembrance; we remind them that they once played, and that through it, they learned, experienced joy, and found release. In a sense, we have brought them to a place of universality, because as they reflect hope emerges. Now, in a receptive place, we begin to explain why children behave the way they do as a result of adversity. We utilize our knowledge of play therapy theory, our experience derived from collaborative practice, and our knowledge about how the brain develops under normal circumstances, and then, contrast it with development in the light of adverse experiences. We support our descriptions and definitions with the research of Perry, Schore, Siegel, van der Kolk, Zeanah, and countless others. Finally, we enumerate the many benefits of play and play therapy and confidently support this with our knowledge of neuroscience applications in play therapy. Our explanation is complete covering, cognitions, emotions, and behaviors. As a result, we have broken down the walls of skepticism, engaged our audience with facts about the brain, and conveyed our message. We have utilized everyone’s fascination with the brain to win over our audience to become allies for our clients. Our team, the child’s team, and play therapy has grown.

As a community of practitioners, from various branches of mental health, play therapists were among the first to acknowledge the relationship between the brain and play. In 1994, when neuroscience applications in mental health were in their infancy, in an International Journal of Play Therapy (IJPT) article, Kaufman (1994) initiated our interest about play and the developing brain. Since then, neuroscience research has been a frequent component of IJPT articles.

To date, few play therapy texts devote more than a single chapter to consultation and collaboration. However, Emerging Research in Play Therapy, Child Counseling, and Consultation changes this routine and extends it beyond caregivers and teachers to allied health professionals and those within the legal system.
Another unique facet of this text is its coverage of neuroscience applications in play therapy. Much of what we read about neuroscience applications in play therapy is an attempt to explain what we do as play therapists and that it is beneficial. In many ways, neuroscience has helped us justify the need for play and play therapy. It becomes a common ground that unites practitioners of different perspectives, modalities, and theories. Neuroscience acts as the bait and the hook: luring disbelief in and capturing their attention. We utilize our neuroscience knowledge to help the non-play therapy world understand the world of children, how their development is altered by adverse experiences, and how play therapy helps them overcome adversity. These text’s neuroscience chapters add to our arsenal of neuroscience applications in play therapy. Whether advancing theory, describing the impact of trauma on the brain, explaining a therapeutic modality, or exploring the safety of the playroom, the authors provide well-developed, reliable, and realistic evidence to support the use of play therapy. The authors and this text also set a new standard for play therapy texts that will be difficult to match.

Finally, within this text, readers will explore chapters that describe the pre-therapy process for children with Autism, debate the inclusion of toy guns in the playroom, deepen our knowledge and use of puppets, and demonstrate the use of play therapy with non-Western populations. Strategically placed in the text are theoretical chapters that support our collaborative practices. These chapters underpin our play therapy practice, and, as with other chapters, provide a blueprint.

I encourage readers to embrace Emerging Research in Play Therapy, Child Counseling, and Consultation, because I believe it will support our practice of play therapy, the clients we serve within the playroom, and all of those, which exist outside the playroom, that are tied to our clients.

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REFERENCES