Chapter 9

Toy Guns in Play Therapy: An Examination of Play Therapists’ Beliefs

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ABSTRACT

This chapter explores current trends related to play therapists’ beliefs related to the decision of whether to include toy guns, as aggression-release toys, in the playroom. This issue is especially timely given the recent epidemic of mass shootings and heightened concerns about gun violence. The chapter presents the results of an original empirical study examining play therapists’ views about gun violence and gun control; play therapist beliefs about aggressive play and toy guns; and play therapist practices with regard to toy selection and limit-setting. Recommendations for future research are offered.

INTRODUCTION

A key element of play therapy involves the intentional selection of toys for the playroom (Axline, 1947; Kottman, 2011; Landreth, 2012; Moustakas, 1959; Ray et al., 2013; Trotter, Eshelman & Landreth, 2003). With the exception of “play therapists who use Theraplay and ecosystemic play therapy” (Kottman, 2011, p. 90), playrooms tend to be well stocked with a wide variety of toys. Summarizing the extant literature, Landreth (2012) concluded that play therapists agree that “children use toys to express themselves symbolically through the language of play” (p. 43). Regardless of theoretical orientation, play therapists view toys as vehicles for expression and as facilitators for the counseling process.

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creative expression and emotional release. Similarly, Moustakas (1959) called for the inclusion of toys that allow children to express hostility, toys that facilitate the expression of emotions, and noncommittal toys which allow children to avoid the expression of feelings. Expanding upon these groupings, Kottman conceptualized play therapy toys in five categories: “family/nurturing toys, scary toys, aggressive toys, expressive toys, and pretend/fantasy toys” (2011, pp. 90-91).

Although Ray and colleagues found that “play therapists, to a large degree, have agreed on the essential materials to be included in a play therapy room” (2013, p. 45), some disagreement within the field continues to exist. One specific area of disagreement involves the facilitation of and reaction to aggressive behavior by children in the playroom (Laue, 2015; Trotter, Eshelman & Landreth, 2003). Play therapists differ in their beliefs both about aggressive behavior and aggressive toys in the playroom.

On the one hand, some theorists argue that aggression is natural in a child’s developmental process and that play therapists need to facilitate aggressive expressions. Landreth (2002), states that children have internalized emotions and may not have the verbal ability to express these emotions. Aggression is a natural emotion in a child’s developmental process, and as children age they learn how to channel these aggressive thoughts and feelings into more appropriate and productive behaviors (Ray, 2011). But, until the child learns these appropriate ways of expression, it should be expected that a child be drawn to aggressive toys or use body motions or signals that would express the child’s feelings. For example, Moustakas (1959) contended that children find “structured items such as guns, knives, swords, [and] darts” appropriate because such toys allow them to “express strong aggression in socially acceptable ways” (p. 7). Similarly, Landreth (2012) stated that aggressive-release toys give children permission to release aggressive feelings in a safe environment and by doing so the children are able to move on and ultimately experience more positive self-enhancing feelings. Kottman (2003) claimed that the use of aggressive toys provides a child the ability to test limits within a safe therapeutic environment and improve self-control. She explained that aggressive toys can aid a child in building a sense of competence, confidence, and self-efficacy (Kottman, 2003). Ray (2011) maintained that the inclusion of aggressive toys in the playroom is critical to the child’s expression of aggression and cautioned that, when these toys are not included, the child may assume that his or her feelings and expression of aggression are not allowed.

On the other side of this controversy, there are play therapists who argue that the inclusion of some aggressive toys – specifically, toy guns – are both unnecessary and potentially harmful (Fuhrman & Franz, 2010; Laue, 2015). For example, Drewes (2008) cautioned that the presence of aggression-releasing toys in the play therapy room increases a child’s likelihood of demonstrating aggressive behavior, in turn requiring the play therapist to set more limits due to the child’s limited ability to self-regulate or self-soothe. The functionality of the aggressive toy may elicit a particular type of behavior and potentially structure the behavior of the child, increasing the likelihood that he or she will demonstrate aggression (Drewes, 2008). Drewes (2008) explained that the inclusion of a toy gun is unnecessary to children’s ability to express their feelings or tell their story. Children are able to use other mediums or toys to express internal feelings and desires (Drewes, 2008). Although Landreth (2002, 2012) recommended the inclusion of toy guns in the playroom, he also acknowledged that toy guns are unnecessary as a large variety of toys can be used to express and represent aggression, frustration, or hostility.

This issue of whether the inclusion of toy guns in a play therapy room is necessary and/or advisable is complicated by the recent epidemic of mass shootings. Although mass killings with the use of guns have been viewed historically as isolated incidents punctuated by long periods of calm and safety, they have become so frequent that gun violence is now epidemic. According to the Mass Shooting Tracker (Gun Violence Archive, 2016), there have been 354 mass shootings in the United States in 2015, leaving
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