

Psychological Strategies

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This column focuses on counseling, clinical issues, and psychotherapy, including innovative strategies for aiding clients. Potential contributors are encouraged to submit manuscripts to Paul R. Rasmussen, Department of Psychology, Furman University, 3300 Poinsett Hwy, Greenville, SC 29613 USA.

Using Children's Drawings to Facilitate the Acting "As If" Technique

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Play is crucial to the development of cognitive, language, motor, and social skills in children. In addition, children communicate through play. According to Landreth (2002):

Children's play can be more fully appreciated when recognized as their natural medium of communication. Children express themselves more fully and more directly through self-initiated, spontaneous play than they do verbally because they are more comfortable with play. For children to "play out" their experiences and feelings is the most natural dynamic and self-healing process in which they can engage. (p. 14)

Schaefer (1993) indicated that play "has the power not only to facilitate normal child development but also to alleviate abnormal behavior" (p. 3). Consequently, play is a useful and appropriate method for counseling with young children. Most children under age 10 do not have the abstract reasoning and verbal abilities to express their thoughts, feelings, reactions, and attitudes clearly. Consequently, many counselors who work with children use toys and other play media to help young children communicate their experiences, reactions to experiences, desires and goals, and perceptions about themselves, others, and the world (Carlson, Watts, & Maniaci, 2006; Kottman, 2003; Landreth).

Expressive toys and other art media are useful for helping children express thoughts and feelings, explore and express feelings about relationships with family members and others, conceptualize problems and consider solutions, and express their creativity and imagination (Carlson et al., 2006; Kottman, 2003). According to Ray, Perkins, and Oden (2004), drawings give a child an opportunity to *speak* in another language, one that allows him or her to communicate via images rather than talk alone. Play is the natural language of children and toys function like words (Landreth, 2002). "Just as it is easier for people to express themselves better in their native languages, so it is true that children are often better able to express themselves through play, for play is a natural form of communication for them" (Rotter, Horak, & Heidt, 1999, p. 318). With increased avenues of communication, interactions between the child and the counselor are enhanced, thereby facilitating the development of the client-counselor relationship.

Adlerian play therapy consists of four process phases. Phase one focuses on developing an egalitarian relationship between the child and the play therapist. In phase two, the play therapist explores the child's style of life, goals of behavior, and maladaptive beliefs. In phase three, the play therapist assists the child in gaining insight into his or her style of life, goals of behavior, and maladaptive beliefs. The final or reorientation/reeducation phase focuses on helping the child consider new ways of striving for significance and interacting with others. A review of literature suggests that Adlerians most commonly use drawings in phase two, the assessment phase, to gather style of life data or early recollections (Cook, 1991; Heidt, 1997; Kottman, 2003; Rotter et al., 1999). However, Kottman affirmed that Adlerians may use expressive toys and other art media, including drawings, in all four phases of Adlerian play therapy. The purpose of this article is to discuss children's drawings as a modality to facilitate a procedure from the reorientation phase of Adlerian counseling: acting "as if."

Using Drawings in the Acting "As If" Process

In the traditional approach to using the acting "as if" technique, counselors ask clients to begin acting as if they were already the person they would like to be (e.g., a confident individual). Using this procedure, counselors ask clients to pretend and emphasize that they are only acting. The purpose of the procedure is to bypass potential resistance to change by neutralizing some of the perceived risk. The counselor suggests a limited task, such as acting as if one had the courage to speak up for oneself. The expectation is that the client will successfully complete the task. If the task is unsuccessful, then the counselor explores with the client what kept him or her from having a successful experience (Carlson et al., 2006; Watts, 2003; Watts, Peluso, & Lewis, 2005).

A more reflective approach to acting as if asks clients to take a "reflective" step back prior to stepping forward to act as if (Watts, 2003; Watts et al., 2005). This reflective as if process extends the Adlerian technique by having clinicians ask clients to take a "reflective" step back prior to stepping forward to act as if. This process encourages clients to reflect on how they would be different if they were acting as if they were the [person] they desire to be. By using reflective questions, counselors can help clients construct perceptual alternatives and consider alternative behaviors toward which they may begin moving (Watts, p. 73).

In the final phase of play therapy, reorientation/reeducation, the Adlerian play therapist moves to a more directive, teacher-encourager role. The counselor in this phase helps children generate perceptual and behavioral alternatives and learn and practice new attitudes and skills so that the child can implement them in relationships and situations outside of the play therapy situation. Although the phases of Adlerian play therapy are sequential, they are by no means separate or discrete. Because the Adlerian play therapy process is fluid rather than static the counselor can use procedures from the reorientation/reeducation phase, like acting as if, whenever a child seems ready to change a maladaptive belief or behavior, even if the child has limited insight into other aspects of his or her lifestyle (Carlson et al., 2006; Kottman, 2003).

This expressive and reflective approach to acting as if has three steps, and drawings can be used to help facilitate the process in all three steps. Step 1 uses reflective questions to access the creativity and imagination of clients. In Step 2, the client and counselor co-construct an action plan based on the clients' reflective thinking. In Step 3, the final step, clients implement the as if behaviors and they discuss their experience in session with the counselor (Watts et al., 2005).

Step 1. In Step 1, the counselor asks the child to draw a picture responding to one of the following reflective questions:

- If you were acting as if you were the person you would like to be, how would you be acting differently? If I were watching a movie of your life, what would be different?
- If a good friend would see you several months from now and you were more like the person you want to be or your situation had significantly improved, what would this person see you doing differently?

When asked to respond *verbally* to these questions, children often respond, "I don't know." However, they are often able to communicate an answer when given the opportunity to draw their response. Sometimes younger children may still have a difficult time drawing an initial response. In this case, the counselor may want to narrow the scope of the questions as he or

she helps the child draw the *big picture*. Examples of *narrowing the scope* questions include the following:

- How would you be dressed?
- What do you see happening around you?
- Who would be nearby?
- If we could look inside your thoughts, what might you be thinking?
- What is something you might be doing that would show others you have changed?

A subtlety sometimes missed is the importance of the counselor's tone of voice. The counselor should strive to *sound* encouraging in terms of being supportive and patient and in helping the child stay with his or her imagination and creativity. Here—and throughout the counseling process—the language of encouragement is crucial. A counselor can encourage a child by conveying unconditional acceptance, demonstrating faith in the child by pointing out improvement and progress, focusing on effort rather than a completed product, focusing on strengths and assets rather than weaknesses and disabilities, focusing on deeds rather than the doer, demonstrating interest in the interests of the child, not doing anything for the child that the child can do for himself or herself, modeling the courage to be imperfect by acknowledging that we all make mistakes and can learn from them, and helping children discover positive ways to belong and gain significance. There are many ways for counselors to encourage a child in play therapy. Key elements in the encouragement process include emphasizing the child's feeling of self-efficacy and avoiding evaluative language (e.g., "good" or "well"; Carlson et al., 2006; Kottman, 2003).

After the child has completed the initial "as if" drawing (or drawings), the counselor will want to dialogue with the child regarding the content of the drawing(s). This includes not only how the questions were answered but also how the child gives meanings to the content within the drawing(s).

Next it is useful to ask reflective questions that help the child consider some initial indications of successful movement toward his or her "as if" goal(s). The child can draw one or more pictures responding to one or more of the following reflective questions:

- What might be some of the first things someone would see that show you are headed in the right direction?
- What is the first thing they would notice about you?
- Who do you think will be the first person to notice your change?
- Who will be most surprised by how you are different?
- How might this person respond to you differently?

Often as children communicate via drawing, they feel greater liberty and a sense of empowerment to communicate verbally as well. As with the

previous drawing(s), it is important to dialogue about the meaning(s) the child gives to the elements contained therein.

Step 2. In Step 2, the child and counselor construct a list of “as if” behaviors that are indicative of how the child will act as he or she moves toward his or her desired goals. If the child has difficulty generating a verbal list, the counselor might ask the child to draw pictures to communicate the goals, providing a drawing for each goal. If the child struggles, it may be useful to revisit the drawings from Step 1 and use them as a catalyst for developing the list of “as if” behaviors.

After developing the list of behavior drawings, the child—in dialogue with the counselor—ranks the “as if” behaviors from least difficult to most difficult. In ranking the behaviors, the counselor might encourage the child to draw a thermometer and use temperature numbers to scale the level of difficulty from “really easy” (low temperature) to “really hard” (high temperature). After the behaviors have been ranked, the client is ready to begin Step 3.

Step 3. Prior to the next counseling session, the client selects one or two of the least difficult behaviors to begin enacting. Commencing with the least difficult behaviors increases the potential for client success, and success is typically encouraging for clients and often increases their perceived self-efficacy. Having had some success, clients’ motivation to engage courageously the more difficult tasks on their list is usually stronger.

In the following sessions, the child and counselor discuss the enactment of the “as if” behaviors selected for the previous week. Again, drawing may be useful in helping the child communicate how the enactment process worked and in giving the counselor opportunity to encourage the child and investigate the meaning(s) the child gave to his or her experiences. Enacting new behaviors often helps clients perceive themselves, others, and their world differently. As the child attempts the more difficult tasks on his or her “as if” behavior list, it is crucial that the counselor (and parents) encourage him or her to frame success in terms of effort and potentially smaller amounts of successful movement. Children (and parents) may be more patient and find the process less frustrating if they understand success in terms of effort and incremental growth rather than simply final outcomes (Carlson et al., 2006; Watts, 2003; Watts et al., 2005).

Conclusion

Expressive art and play media are useful tools in helping children communicate their understandings of themselves, others, and the world. Although the literature suggests that Adlerians tend to use these expressive media, including drawings, more often during the assessment phase

of Adlerian counseling, we have demonstrated the helpfulness of using drawings in facilitating the acting as if process with children, a procedure from the reorientation/reeducation phase of Adlerian play therapy. This expressive and reflective acting as if process helps children and counselors collaboratively choose behaviors that may increase the likelihood of success and may be useful for evaluating treatment progress.

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