References:


### Appendix A: Summary tables of Interviews

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<tr>
<th>Therapist question</th>
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<th>Therapist Two</th>
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<tr>
<td><strong>Why are they in play therapy?</strong></td>
<td>anxious</td>
<td>loss of a sibling may have impact on him emotionally</td>
<td>poor bonding and early relationships</td>
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<td></td>
<td>tearful in class</td>
<td>anger management</td>
<td>poor mothering</td>
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<td></td>
<td>could not come to terms with his parents divorce</td>
<td>social difficulties</td>
<td>unstable family life</td>
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<td></td>
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<td>difficulties with cultural difference</td>
<td>learning difficulties</td>
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<td><strong>The impact of Psychoanalytical play therapy with this child.</strong></td>
<td>helps understand where the child comes from</td>
<td>used psychoanalytic therapy to a point, found it limiting with him</td>
<td>understanding where the child comes from</td>
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<tr>
<td></td>
<td>understanding he is poorly attached and unbonded</td>
<td>used it to explore his issues</td>
<td>understanding attachment and bonding</td>
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<tr>
<td></td>
<td>have not worked purely because cannot develop transference relationship easily</td>
<td>strong transference but took time to develop</td>
<td>understanding her personality structure</td>
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<tr>
<td></td>
<td>provide him with a safe containing experience</td>
<td>worked slowly with interpretations needed to develop relationship first</td>
<td>transference to understand her ability to relate particularly to her mother</td>
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<tr>
<td></td>
<td>concrete interpretations and simple language</td>
<td>felt as therapist was container (Containing mother) to tolerate projections, anger and frustration</td>
<td>projection onto her therapist</td>
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<tr>
<td></td>
<td>try to re-mother him</td>
<td>displacement of people in his world onto therapist</td>
<td>therapy a holding place for her</td>
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<td></td>
<td>provide a holding space and hold him in mind as it feels his parents cannot</td>
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<td>providing her with a relationship she has not had</td>
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<td></td>
<td></td>
<td></td>
<td>gentle with interpretations</td>
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<tr>
<td><strong>Working with a learning disabled child.</strong></td>
<td>careful with interpretations</td>
<td>had to work a lot on frustration and difficulty with school work</td>
<td>have to work more concretely</td>
</tr>
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<td></td>
<td>awareness that his learning disability has impacted socially</td>
<td>relation to being different to siblings and different school</td>
<td>issues around mastery</td>
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<td></td>
<td>he feels he is a damaged child and being learning disabled confirms this</td>
<td>low self-esteem</td>
<td>have emerged as a prominent theme</td>
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<td></td>
<td>work with being different to his siblings</td>
<td></td>
<td>being different</td>
</tr>
</tbody>
</table>
| Other themes in the therapy. | having a learning difficulty has allowed him to get his needs meet more attention at the remedial school | family relations, large family | *home life and parent relationships*
| - his need to please others | - struggling for space in his mothers mind | - her difficulty showing her vulnerabilities
| - need to be more independent and autonomous | - feeling different from his siblings because of his anger and being in therapy | - developing a sense of mastery
| - untrusting of the adults in his word | - hating rules and structure at school and at home
| - social difficulties = battles to make friends | - mastery = help him feel more in control of all his worlds | - mother-child relationship
| - mastery = help him feel more in control of all his worlds | - mother-child relationship
| Feelings and Thoughts about Play Therapy. | - difficult child | - adorable, wonderful, good sense of humour
| - does not form relationships easily or connect with others | - enjoy working with him but at times difficult
| - fragile relationship | - development relationship
| - splits therapist - idolizes and de-values her | - difficulty developing a trusting relationship
| - difficulty developing a trusting relationship | - development relationship
| Role of mother and family. | - his difficulties are a result of his poor relationship with his mother therefore it is essential to work with her | - crucial for the mother to understand their relationship
| - anxiously attached | - difficult being in such a large family
| - cannot trust his mother | - helping them understand him
| - misreads his mother | - seeing the mother is an important part of the process
| - father and mother's poor relationship also impacts | - difficult sometimes to work with the mother in relation to the child because of the mother's own issues
| - distressed by family dynamics | - working on the parents relationship
| - fear of abandonment when | - helping the parents develop a better relationship with her

| - develop a sense of mastery | - home life and parent relationships
| - her difficulty showing her vulnerabilities
| - developing a sense of mastery

- adorable, wonderful, good sense of humour
- enjoying working with him but at times difficult
- difficult developing a trusting relationship
- seeing the mother is an important part of the process
- difficult sometimes to work with the mother in relation to the child because of the mother's own issues
- working on the parents relationship
- helping the parents develop a better relationship with her

- fundamental bonding
- difficult to bond with her
- not sure if she is attached or bonded to her therapist
- difficult relationship
| Psychoanalytic formulation. | parents fight  
- working with mother to improve relationship is important | anxiously attached  
- reactive attachment disorder  
- unable to trust his objects  
- internalized objects as persecutory and abandoning  
  = feeling unsafe and needs not going to be meet  
- histrionic symptoms  
- self-destructive symptoms | attachment not strong enough, mother not available enough  
- mild anti-social tendencies  
- uses a lot of defence mechanisms to protect his vulnerability  
- high death drive and self-destructive tendencies  
- persecutory anxiety  
- poor internalised object | narcissistic personality structure = difficulty dealing with vulnerability and a level of falseness  
- bonding = poor bonding initially affects her relationships  
- poor attachment resulted in her personality structure  
- internalised a stranger object  
- a sense of deprivation as a result of the poor mother-child relationship |
<table>
<thead>
<tr>
<th>Mother question</th>
<th>Mother One</th>
<th>Mother Two</th>
<th>Mother Three</th>
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<tr>
<td>Why is their child in play therapy?</td>
<td>◾ interact with other children</td>
<td>◾ acceptance of himself and his difficulties</td>
<td>◾ to help her with her low self-esteem, low confidence</td>
</tr>
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<td></td>
<td>◾ whether he is happy</td>
<td>◾ deal with his anger and frustration</td>
<td>◾ to help her become more confident</td>
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<td></td>
<td>◾ day-to-day problems</td>
<td>◾ to deal with his learning difficulties</td>
<td>◾ to discuss her problems with someone outside of the family</td>
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<td></td>
<td>◾ feeling insecure</td>
<td>◾ to deal with being different from his family members, his siblings and other children</td>
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<td></td>
<td>◾ develop his confidence</td>
<td>◾ his low self-esteem</td>
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<td></td>
<td>◾ learning to cope</td>
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<tr>
<td>Feelings and Thoughts about Play Therapy.</td>
<td>◾ a place other than with his parents to confide with someone</td>
<td>◾ it has helped him</td>
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<td></td>
<td>◾ to understand his problems</td>
<td>◾ he is not always happy to go but he has benefited</td>
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<td></td>
<td>◾ to help deal with his problems</td>
<td>◾ it has helped him learn control of his feelings</td>
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<td></td>
<td>◾ a place to give him advice</td>
<td>◾ it has given him support</td>
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<td></td>
<td>◾ it is a safe place to get rid of his anger</td>
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<tr>
<td>The impact of Psychoanalytical play therapy with this child the parents understanding of this impact.</td>
<td>◾ to deal with his insecurity and abandonment issues</td>
<td>◾ it helps him to discuss things at home, relationships with his siblings</td>
<td>initially it was hard, felt left out and that they had secrets</td>
</tr>
<tr>
<td></td>
<td>◾ he is very comfortable in this relationship</td>
<td>◾ helps him understand friendships and peer relationships</td>
<td>had to learn to trust the therapist</td>
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<td></td>
<td>◾ he trusts her</td>
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<td>she trusts her and they have a loving relationship</td>
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<td></td>
<td>◾ helped him to be more confident</td>
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<td></td>
<td>◾ doesn’t take things personally and is not as easily rejected</td>
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<td></td>
<td>◾ a better perception of life around him</td>
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</tbody>
</table>
| Working with a learning disabled child. | - having a learning disability and feeling different
- how he is coping
- other children have called him stupid
- previous school experience of not coping
- to help him realise he is not different to other children
- his relationship with his teacher |
| - learning how to fit into a structure world which was hard for him
- lack of self worth and frustration
- learn to persevere and work hard
- positive aspect had to work hard and learn to understand themselves early on
- having a learning disability affects the family relationships, friendships etc |
| Other themes in the therapy. | - abandonment issues because of the divorce
- his insecurities
- social skills = wanting to be liked by everyone and wanting to please everyone, children being nasty to him
- his relationship with his teacher |
| - social difficulties
- anger management
- sibling and family relationships |
| Role of mother and family. | - to give feedback
- to help the mother work through something if she needs to
- to learn that therapy is about the child
- keep up to date as to what is going on in the therapy
- to discuss siblings and family
- to address any difficulties at school
- general family stresses
- discipline issues at home |
| - to feedback information on school, home etc
- to provide guidance to help him
- for me to be aware of his difficulties, somethings I wasn’t even aware of
- the sibling relationships are important
- to provide information as to his general well-being
- to feedback how he is managing his anger |
| - feedback
- if I have a problem at home with her to discuss it
- the therapist is a role model
- gives me advice on how to deal with difficult or embarrassing situations
- to discuss her relationship with her father
- home life in general
- her behaviour at home |
| - not a main focus rather the social side is
- she does however discuss some of her academic difficulties she has at school
<p>|</p>
<table>
<thead>
<tr>
<th>How the therapy has helped.</th>
<th>a secure place to talk</th>
<th>anger and frustration management</th>
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<tbody>
<tr>
<td></td>
<td>a person who cares about him</td>
<td>understanding his siblings and family</td>
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<tr>
<td></td>
<td>a place where someone does not judge him</td>
<td>understanding being in a different school</td>
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<tr>
<td></td>
<td>provide him and me with support</td>
<td>to understand him better and to find other ways to help him</td>
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<tr>
<td></td>
<td>building her self-esteem and confidence</td>
<td>dealing with family issue particularly her father</td>
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<td></td>
<td>social issues, particularly around relationships with boys</td>
<td>provided me with a role model</td>
</tr>
<tr>
<td></td>
<td>given me advice and guidance</td>
<td>to understand what is important to her better</td>
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<tr>
<td>Child question</td>
<td>Child One</td>
<td>Child Two</td>
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<td>---------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
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<tr>
<td><strong>Why are they in play therapy?</strong></td>
<td>• family problems like fighting</td>
<td>• fears</td>
</tr>
<tr>
<td></td>
<td>• divorced family</td>
<td>• helping you overcome things</td>
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<td></td>
<td>• sibling rivalry</td>
<td>• the therapists says things that help me</td>
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<td></td>
<td></td>
<td>• difficulties at school</td>
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<tr>
<td><strong>Feelings and thoughts about Play Therapy.</strong></td>
<td>• she is nice, soft and gentle</td>
<td>• it helps me</td>
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<tr>
<td></td>
<td>• she thinks that I am a troubled child</td>
<td>• she is nice</td>
</tr>
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<td></td>
<td>• that I need therapy to handle my family and to sort out the problems there</td>
<td>• she likes me and thinks I need her more than I actually do</td>
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<td></td>
<td></td>
<td>• understands things</td>
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<td><strong>The child’s understanding of his/her learning disability.</strong></td>
<td>• problems with either reading, spelling or other school subjects</td>
<td>• you have a problems with learning</td>
</tr>
<tr>
<td></td>
<td>• not learning right</td>
<td>• you can’t understand things</td>
</tr>
<tr>
<td></td>
<td>• the teacher not teaching the correct information</td>
<td>• having a learning difficulty is not important in terms of the therapy</td>
</tr>
<tr>
<td></td>
<td>• it is not important in terms of the therapy</td>
<td></td>
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<tr>
<td><strong>Other themes in the therapy.</strong></td>
<td>• Friends related to divorce issues, like whose weekend is it.</td>
<td>• hi-jacking</td>
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<td></td>
<td>• school difficulties</td>
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<td>• sibling difficulties</td>
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<td>• friends</td>
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</table>
| **Role of mother and family.** | \> to tell the therapist what I am like  
\> discuss my siblings  
\> any problems at home | \> my mother talks about how I am doing  
\> to discuss what is going on at home  
\> the therapist helps my mother with what she needs to do | \> my mom is there to tell the therapist if I forget something  
\> to talk to her about my family |
| --- | --- | --- | --- |
| **How the therapy has helped.** | \> with the divorce  
\> family problems like fighting  
\> friendships | \> help me overcome my problems | \> helped me to deal with my anger  
\> my family  
\> friendships  
\> deal with my feelings and to help me smooth them out |
Appendix B: Interviews with other six participants

Themes for Content Analysis

Each of the themes have been numbered and this number is will be placed at the end of each section where that theme is seen to occur.

1- Family boundaries and relationships
2- Self-concept and self-confidence
3- Understanding clarification, guilt and pity
4- Containment and a holding relationship
5- Having a learning disability is not being “stupid”
6- Social difficulties
7- Anxiety and defences
8- Cognitive versus affective aspects of having a learning disability
9- Insecurity and the ability to think
10- The relationship and the knowledge to help.

Themes for the third reading: reading of the meaning of psychotherapy

11- Making sense of their world
12- Interpretation and containment
13- Psychotherapy as a way of coping
14- Psychotherapy working towards reparation of relationships

The interviews with mother A, child A and therapist A as noted are in the text.
Interview with Mother Participant B

Nicky: Okay, so they’re very open-ended questions, the first thing I want to ask you is, what is your understanding as to why your child is in therapy

Mother#B: I think that my child is in therapy because he needs to come to a level of acceptance of who he is and the difficulties that he faces. He does not have a lot of confidence who he is. The things that he’s been given and his lack of self-acceptance, a lot of it has to do with anger about that, his reactions to it are angry, frustrated and I think the therapy has helped him to first of all vent that anger in an appropriate setting and second of all to come to an acceptance of who he is and to accept the difficulties that he faces which in turn enable him to go forward.

Nicky: Can you be more specific on what you think his issues are?

Mother#B: Well, I mean he’s ADD so his frustration, he also has specific learning difficulties in being unable to do certain reading tasks easily etcetera and his frustration has been different from the rest of the family members, his siblings, and being different from what he perceives other children being able to do, he gets extremely angry and has had a very low self-esteem because of that, a feeling that he could not, there was something wrong with him because he couldn’t achieve it.

Nicky: And what are some of your thoughts and feelings about him being in play therapy?
Mother#B: I've always been very pro-therapy, it's never been something that's ever bothered me. I've seen the benefits of it myself and play therapy for him definitely has helped him. He has never gone willingly though, he's not happy to go, he in fact, we got him into THERAPIST B because of his, because we had that incident at home, that hijacking and that was an excuse so he went with all the other kids and then he kind of just stayed, so it was an easy way to get him in because before then, any other therapist that we tried, he was very reticent and it didn't really work because of that. With THERAPIST B it seems to have worked, it is a safe space for him, I think it is a safe place and it seems to contain him.

Nicky: So if you were to tell another parent about play therapy what would you tell them?

Mother#B: I would tell them to send their kid, in fact I have told many parents who have children with similar difficulties, I tell them that they have to be open-minded about it and they have to try whatever they can, and besides the medication, this is certainly one of the routes to go. Because as a parent I am too involved and I get too emotionally drained and too frustrated with him, something that comes to mind is the day I was taught to help my child when he was completely out of control, just to turn him around and hold him, just that little bit of advice has helped enormously to manage...

Nicky: So your feeling is it's a combination of two things, one is support and one is getting information of how to do things.
Mother#B: Ja, absolutely. And support for him, that there’s a place for him to get rid of that anger in an okay way, without damaging his siblings or his friends or his parents. 1,3,4,6,13

Nicky: How would you describe your child’s relationship with his therapist?

Mother#B: A love hate one!

Nicky: [laughing] you’ve got to tell me more!

Parent#B: It’s interesting because he spends half the therapy every time telling THERAPIST B that he’s not coming back and this is the last time and he doesn’t need to come, but yet when he’s having difficulties he wants to go to THERAPIST B and he wants to talk to her. So I think that he doesn’t like being different and having to be there but he’s aware at this stage, after a long time, of the benefits that he gets from it. 3,10,

Nicky: So on the one hand he sees the benefit, but on the other hand he feels ‘different’ being in therapy?

Mother#B: I don’t know where that comes from, there’s some kind of stigma that the children perceive of them going to therapy. I don’t know where that comes from, it obviously comes from somewhere, it certainly doesn’t come from us at home, so he feels that there’s something wrong with him that he’s got to go, but he sees the benefit of going. 2
Nicky: Can you tell me more about his relationship with his therapist. What do you understand of it?

Mother#B: What do you mean by that?

Nicky: If you were to try and describe it, like you said, it's a love hate relationship, if you were to describe in other ways, how would you describe it, what would he think about it, what would he say to you about it?

Mother#B: I think he likes THERAPIST B, but he won't admit it. That's my child, he likes being there, but won't admit that either to himself or to her, what I'm saying is that he sees the benefit of it but he just doesn't, maybe he doesn't feel comfortable being there, not with THERAPIST B, comfortable being in a therapy situation. 4,3,7,11

Nicky: What is your role as a parent in the therapy process?

Mother#B: I'm simply there to feed information on what's going on at school, at home etc, and I keep in contact with THERAPIST B about that and then we sort of have a feedback session every few weeks, once every six weeks or so, as to how he's doing and what's going on, and then my husband and I both go, but generally, if there's a problem, THERAPIST B will call me and if I have a problem I'll call her, and we'll sort of have a bit of a discussion, if something's happened that she needs to be aware of, but other than that I'm
Mother#B: I think a good relationship, in fact the previous therapist that he had I was very resentful because I felt very shut-out, a lot of therapists have this idea that it’s private between them and MY CHILD, they forget that this is MY CHILD, this is not an adult that we’re talking about and they don’t give you any feedback and you don’t know what’s going on, and it’s exceptionally frustrating as a parent because you need to be involved on that level, that you know what’s going on, so THERAPIST B really has been fantastic, she’s kept me informed and she’s listened to me when I’ve needed to speak and she hasn’t come along with any of this, ‘this is private and confidential between me and your child’. Obviously she asks his permission to discuss things with me, but he doesn’t have a problem with it and at least we have a, I know what’s going on and he knows that I know what’s going on, which is important, for me anyway.1,3,4,10,11,12,13

Nicky: What do you discuss with your child’s therapist? Do you discuss your child’s difficulties with her?

Mother#B: Ja, and things that he does.

Nicky: Give me an idea of general things that you discuss, quite specifically.

Mother#B: We would discuss specifically his relationship with his siblings and go
through each one individually, what he finds difficult with certain relationships and which ones are positive for him and different aspects of those relationships and in fact THERAPIST B has pointed out to me that my child has difficulty with certain aspects with his siblings and something that I wasn't even aware of, which I then used that information to relay it to his sisters and they've had to deal with it to try and help him. We would discuss what's happened at school. If specifically he's had an incident at school where something has happened and it hasn't been positive, we discussed that in detail, how to go about helping him with that incident, we discuss his general emotional well-being, how he's functioning within the home, within school, within the community, his level of anger, his level of happiness, his reactions to his medication. 1,3,4,6,7,10,11,12,14

Nicky: Okay, it's quite broad. What do you think the therapist focuses on, what do you think is discussed in his therapy?

Mother#B: They do a lot of playing, he does a lot of drawing and things. I think a lot of my child's therapy has been to work through his anger because in the beginning he was exceptionally angry, in fact the one day I think he nearly even hit THERAPIST B – I had dragged him into the therapy session and he didn't want to go and he nearly climbed into her. So a lot of it has to do with anger, getting rid of that level of anger and I think that's what's really been achieved, getting to a level of acceptance with who he is. I don't know exactly what they talk about, I know she like tries to discuss with him issues of you know what's going on at school or at home, but obviously she's getting information out of him because she's imparting things that are obviously quite
valid you know, especially, as I said, at home with his brothers and sisters, you know the issues that he has, so he’s giving her that information. I don’t really enquire exactly what’s going on in the therapy sessions. 2,3,4

Nicky: What do you think? You’ve said they focus a lot on the anger and maybe the siblings, do you think there’s anything else they focus on?

Mother#B: I think on his friendships, on where he should have been at school, should he continue here, should he have gone and been mainstreamed, how he felt about that, was he ready to mainstream, which school he was interested in and focusing on when he’s going to be mainstream, I think they discuss all of that, how he feels about it, his friendships in school, and out of school, those kinds of things as well. His family is possibly the main focus for him. 6,5,8,10,1

Nicky: Which really comes to my next question, because you’ve touched on it, what do you think it means to have a learning disability or to have a learning difficulty? What do you think it means?

Mother#B: In what context?

Nicky: For the child?

Mother#B: What does it mean for him?

Nicky: Ja, and even what it means for you as a family.
Let’s start with him individually, I think for him it’s ‘I’m different and I can’t do things like a lot of other kids can easily’, not ‘I can’t do them, but it takes me an enormous amount of effort and perseverance to do it’ – that is difficult for a child. For him it means that a lot of it interprets into I’m not good enough and I’m useless and we’ve been through all of that scenario. I think that they have to get to a stage where they understand that they have other areas in their life and things and all these children are incredibly gifted in many different areas, maybe not in specific learning areas that have to fit into the type of schooling that we have within this country, I’m not sure why they have to fit into a structure, a lot of these kids can learn in different ways and we have to find those ways that enable them to learn, but they still have to fit within a structure, so I think for them, that’s difficult, that’s what’s hard – being able to fit the mould and not managing to do that and that leads to feelings of lack of self-worth and frustration on their part, and they have to learn to deal with that. On the other hand, there’s the other side, that if you deal with it properly and you really embrace this instead of trying to avoid it, I believe that these children come out far superior in many ways who have it easy because they’ve had to work for everything that they’ve got and they learn that level of perseverance and they learn to understand themselves at a much younger age than other kids who maybe never get an opportunity to look at themselves. So on one hand it’s difficult, on the other hand it can be a tremendous thing, but later on in life.

As far as the family is concerned, I mean it hasn’t been easy, it has not been easy having my child go through these things, sometimes I felt to blame for
his difficulties, especially when he was raging, it was extremely trying on me and the family and the extended family, my mother found it hard to watch him in such pain, but once you find the right medication and you have them in the right therapy and working through it I think that in many ways it’s been a bonding thing for the family because kids, although sometimes they drive him crazy and do things that upset him, they very much root for him the whole time and the younger ones adore him and I think that everybody is sort of behind him. 1,3,4

Nicky: Do you think that his learning disability is an important part of the therapy process?

Mother#B: I don’t think it comes into the therapy process. I mean I think that the results of it come into the therapy process.

Nicky: Tell me about the results?

Mother#B: His reactions to that learning disability and what happens, as I’ve said, what happens as a result of him having that learning disability, the effect on him as a person, the effects on his relationships in and out of the family, with friends etc, the effects of him having to be in a different school from the rest of the family, those kind of things are the results of his learning disability, that’s what has to be dealt with in therapy. I don’t think his learning disability itself really comes into it, except maybe in an understanding that this is something he’s been given and he has to learn to accept it as other people have other things that they have to accept. 5,8
Nicky: That’s all the questions that I’ve got, but what I want to ask you, is there anything that you feel I haven’t asked that is important about the therapy process?

Mother#B: No, maybe just from, well for my child what’s been important is the liaison between you and THERAPIST B, that feeling of there’s continuity between what goes on at school and what goes on in therapy and what goes on in home. You know, there’s a holistic approach, which I think he feels supported by that, I know what’s going on and you know what’s going on and THERAPIST B knows what’s going on in all different areas, so he feels helped. 1,10,13

Nicky: Everybody’s taking care of him?

Mother#B: Ja, and everybody is talking to each other so we all know what’s happening.

Nicky: Right, thanks.
Okay, adults often ask what therapy is like for children, if you were to tell another child in your class, like your best friend, what would you say therapy was about?

I would say it’s about helping you and helping you overcome things.

Can you tell me what things it helps you overcome?

I would say fears, something, all that kind of stuff..like family stuff and friend who fight with you.

And if you were to tell them anything else, what would you say about play therapy?

you talk, they talk to you.

And what do they say to you?

they say things that try and help me like ..... feel better about things.

children think lots of different things about being in play therapy. Tell me what you think about being in play therapy?

they help me a lot, THERAPIST B helps me.
Nicky: What does THERAPIST B help you specifically with?

Child#B: well we had a hijacking at our house and she helped me with that and then other stuff

Nicky: and after that?

Child#B: we just talk and stuff, like about family, my sister being horrible to me or I guess other stuff at home... THERAPIST B helps me with things that are like hard for me, things that make me anger, she makes me feel that or helps me cope with it 1,2,3,4,10,11,13

Nicky: why else do you think you’re in therapy with THERAPIST B?

Child#B: ........

Nicky: if you were to just try and answer that what do you think?

Child#B: so that if in case something else happens she’ll be there... to help me with stuff that it hard like my sister fights with me or like my mom gets angry with me then I get mad and she helps me with it... I don’t know stuff like that 1,3,4,10,11

Nicky: what do you do in therapy?

Child#B: play games
Nicky: what sort of things do you discuss with THERAPIST B

Child#B: we talk about school and all of that

Nicky: and what about school do you talk to her about?

Child#B: about my friends being horrible to me and all that. 6

Nicky: now when you say people are horrible to you can you tell me what kind of horrible things they do?

Child#B: they call me names and tease me 6

Nicky: do you ever discuss your family with THERAPIST B?

Child#B: sometimes

Nicky: what do you discuss with her?

Child#B: sometimes if my sisters aren’t being very nice then she helps me with that like to understand it 1,11,2

Nicky: what else about school do you discuss with THERAPIST B?

Child#B: nothing

Nicky: how do you feel about your therapist?
okay, if THERAPIST B was to tell someone about you, what do you think she’d tell someone about you, if she was to tell another therapist, what would she say about you?

Child#B: she’s nice 4,10

Nicky: tell me what you think your therapist may have thought or felt about you?

Child#B: she likes me, she thinks I need her more

Nicky: she thinks you actually need her more than you actually do?

Child#B: yes

Nicky: tell me more about this

Child#B: she says she wants me to stay longer but I’ve feel I’ve had enough

Nicky: okay, if THERAPIST B was to tell someone about you, what do you think she’d tell someone about you, if she was to tell another therapist, what would she say about you?

Child#B: I’m a nice boy and other good stuff 4,10

Nicky: what other good stuff would she say?

Child#B: I’m friendly, and... I don’t know 10

Nicky: why do children come to this school?

Child#B: because they’ve got learning difficulties
Nicky: okay, what does it mean to have a learning difficulty?

Child#B: you’ve got a problem with learning

Nicky: is this school different from other schools?

Child#B: yes

Nicky: How’s it different?

Child#B: teachers are nice and they care about you and they there to help you, there’s much less children in a class so they can help you

Nicky: what would you tell a friend about having a learning difficulty, like someone who wasn’t in your school?

Child#B: just that you not stupid, you just can’t understand things

Nicky: do you ever discuss your learning difficulty with THERAPIST B?

Child#B: no

Nicky: never ever

Child#B: no
Nicky: does your therapist always understand what you trying to tell her, does THERAPIST B always understand?

Child#B: yes

Nicky: have you ever been able to tell your therapist when you were unhappy with her or angry with her?

Child#B: I don’t know

Nicky: sometimes your mom meets with THERAPIST B, what do you think they talk about

Child#B: talk about how I’m doing and things at home, she helps my mom with me, like I don’t know what they talk about 1,3,4,10,11

Nicky: tell me what you think

Child#B: they talk about what is going on and if she thinks I need to go in for longer

Nicky: how do you feel about your mom meeting with THERAPIST B

Child#B: I feel okay about that

Nicky: is it helpful

Child#B: ja
because my mom comes and tells me what THERAPIST B wants me to do, sometimes I forget to tell her stuff and my mom tells her, like if I had a big fight with my sister, I don’t know stuff like that, stuff about what goes on at home. 1,3,4,10,11

I want to ask you, if there was something that you think would help the therapist work with you better, what do you think they need to know about working with kids in therapy?

it’s a problem that you help them……………… overcome and …. 

is that the most important thing?

ja

okay, anything else you can think of?

no

okay, thank you
Interview with Therapist Participant B

Nicky: The first question I'd like to ask you is, what is your understanding as to why this child is in play therapy?

Therapist#B: He was referred to me, first of all there's been quite a traumatic loss of a sibling in his family which we felt might be contributing to some of the emotions that he's experiencing, according to the parents, the main reason he was referred to me was for anger management, frustration, struggling to fit in at school, coming from quite a different religious sect to his fellow school mates which made it quite difficult for him to feel that he had a sense of belonging and that he fitted in. But all-in-all, I'd say anger issues and controlling his temper with his family and with his friends. 12,6,11

Nicky: If you had to discuss this child with another therapist, how would you describe your feelings towards this child?

Therapist#B: I think he's absolutely adorable, first of all, I think he's hilarious, he has a wonderful sense of humour, I actually enjoy working with him but he does give me quite a hard time, we have a very witty kind of therapy, it's quite different to what I've been trained in, but we have quite a sarcastic session, we joke, we laugh, I am very fond of him, I have to say, he's one of my favourites. 4,10

Nicky: How do you see psychoanalytic play therapy assisting your work with this
Therapist#B:  

[laughing] my supervisor will chop off my head! [laughing] I have used it to some limited point in the therapy, although, because he’s kind of pre-pubescent, almost on that curb of being a teenager and quite on some levels, his issues are quite adolescent, I have found that I haven’t really taken on a fully psychoanalytic approach with him, it’s been more a sense of humour therapy, exploring issues, ja but I guess using an analytic approach with humour..

Nicky:  

Do you feel, using psychoanalytic technique such as working with transference, interpretation, things like projective identification and confrontation, work with this child?

Therapist#B:  

Let me just think, shall I go through each of those topics or?

Nicky:  

Just give me anything, that you think there’s a psychoanalytic technique that may have worked with him.

Therapist#B:  

I do think there was quite a strong transference, although I didn’t directly jump in and work in the transference with him as I felt he was quite defensive and it would have been quite destructive, so I’m aware there were transference issues but I did not work in them fully, in terms of projective identification, no I don’t feel that that kind of concept was quite strong in the room, I didn’t often experience the emotions he was feeling. What was the other one? 10,7,11,12
Nicky: Any of them that you can think of? Okay, let me give you this, do you feel this child responds to interpretations that involve his internal world?

Therapist#B: [laughing] you reckon! Not, I would say if I had to give you maybe on a numerical scale in terms of one to ten, I’d maybe say 5. Sometimes he did respond, but sometimes I think, if I’d been completely psychoanalytic in my whole approach with him, I think I would’ve lost him, to be honest with you, after session two, I had to change my interpretations to a more simple framework, more accessible. 3, 5, 8, 12

Nicky: Why?

Therapist#B: [laughing] Because he’s got quite a spunky personality and he’s quite challenging and I think if he had to sit back in a real serious kind of analytic way, I just feel we wouldn’t have connected the way we have connected.

Nicky: the object relations literature contains many analogies between the good enough mother and the good enough therapist, between the holding environment and the holding function of therapy, do you see this as being part of your therapy?

Therapist#B: I actually do. I think that in terms of my therapy there were lots of tests in terms of would I be a container, would I be able to tolerate a lot of his projections, a lot of his anger, and his frustrations and I think that he certainly was quite well aware of them, in the beginning of the therapy he was raging and there often have been sessions where he’s been raging at
me, and obviously I take that as a displacement for other people in his world. So I do feel that having to be a strong enough kind of container mother, has played an important role for him, and the consistency, the availability, ja I do feel that that has. 3,4,10,12,13,14

Nicky: Do you feel your work or understanding in this area is different because you’re learning with a learning disabled child?

Therapist#B: I think that I never kind of processed that in my therapy, I wasn’t kind of thinking ‘shame, poor kid, he’s learning disabled, oh geez, he’s struggling’, I suppose the only time it would come up is when we spoke about sometimes the frustration with his teachers and managing the work, but to me he didn’t present, he’s actually very bright and he didn’t present as a child who does struggle and it didn’t really, in fact NO, unless it was mentioned in the context of being in a different school from his siblings or from his friends, that was the only time it would come up, but in my mind, it really wasn’t prevalent. 5,8

Nicky: So you don’t think having a learning disability came up in any other way?

Therapist#B: Let me just think it through. Well it may contribute to, he’s quite defensive and I think he does have quite, he has issues of self-esteem, I do feel that may be contributing, but from his therapy what he offered in the sessions was more personal family matters, but I do think it probably contributes to his low self-esteem and his defence system that he has developed for himself. 2,5,8,7
Nicky: Do you ever work directly with this child discussing what it means to have a learning disability?

Therapist#B: We had I think one session we spoke about why he’s at this school and it’s different from his siblings and different from his friends and the kids who attend his church group. And he seemed to understand what that was about and it was a very brief discussion, it didn’t seem to come up in his mind. His anxieties are more, he does feel different from the rest of his family members because he’s in the therapy, but not because of the learning, he sees his therapy as more being due to his aggression. 1,3,4,5,8

Nicky: Does this child use his learning disability in any way to have their needs met or to guard against letting on what their true feelings actually are?

Therapist#B: I haven’t experienced that with him at all.5,8

Nicky: so he doesn’t use it in any way?

Therapist#B: In the manipulative sense?

Nicky: In any sense. What I’m trying to get at is the focus of the therapy at all other than one session?

Therapist#B: no

Nicky: what are the other themes that are a major focus in the therapy?
Therapist#B: Family relations, I think part of his struggle is being one child out in a family of quite a large family of lots of children, feeling lost, that would be one of the very strong themes, you know, struggling for space in his mom’s mind, having an important place and his parents knowing that there are quite a lot of siblings in his family, 5 or 6, that would be one of the main themes. Another theme would be initially he was referred to me for a trauma de-briefing, I dunno if it was mentioned at all, and we obviously carried on because we seemed to connect and he did need more deep and long-term therapy, so I think one of the big things is that he does feel quite persecuted being in the therapy feeling different from his siblings why they didn’t continue why they did continue, what makes him different, but I would say overall, just struggling with school work, hating homework, hating rules, he finds the whole structure of that quite difficult, it’s about needing it quite firmly, struggling with adults telling him what to do and the rules in the adult world, very testy, I found him very, he tests limit a lot, wanting also to see the resilience of the people in his world. 1,5,8,11

Nicky: How do you see the role of working with the mother in terms of this child’s therapy?

Therapist#B: Very important, I think the mother, the parents, have been to all the feedbacks, every 7 sessions they there, they on time, they hear what I say, they process, we talk together, I think it’s crucial that the mother has her feedbacks, both at school and with me, the therapist, crucial. To help them understand him better and to help him at home feel more accepted.. 1,3,4,13
Nicky: And this particular mother?

Therapist#B: Um, I find her very responsive, very open to hearing what I’m saying, she does hear what I’m saying, I think, ja I found her responsive, very available, she does, she keeps me in touch with what goes on at school, what goes on at home. For her to understand him better and to be there more for him, ja I feel I’ve had quite a good relationship with the family. 1,3,4,10,13

Nicky: How do family relationships affect the therapy process?

Therapist#B: Hugely. I think in terms of being, he’s kind of in the middle in quite a large family of a lot of children, I think that’s part of his big struggle, I think a lot of his frustration at not being able to have his mom all to himself has been acted out in the therapy context with me, you know, kind of testing that out. Other family relationships, I think the hard part has been because I met a few of his other siblings in the debriefing initially and they haven’t continued, I think it’s been part of his struggle, why him, almost why has he been selected and not the others to continue. 1

Nicky: How does he see that?

Therapist#B: He sees it that he’s the naughty one and the bad one and he needs to continue and they all fine, why does he need to and they don’t. So he’s sees it as quite a persecutory experience. 7,3
Nicky: A tough question, okay. Can you give me your psychoanalytic formulation on this child?

Therapist#B: *[laughing]* you can’t give me one day’s notice!

Nicky: Another way to ask it is how do you understand the child’s difficulties psychoanalytically?

Therapist#B: Okay, let me think. I would say that this boy is, he functions, he uses a lot of defence mechanisms, personality I think is quite vulnerable and he projects quite a tough challenging kid, where I actually think it is a defence mechanism, some of them he uses are omnipotence for example, not needing, being independent, not needing anyone in the world or me. He doesn’t have very good coping skills, but I guess that is not really a formulation. He does have quite a high death drive which does concern me, he engages in quite high risky behaviour and thinks he’s interests are more guns and more self-destructive tendencies. Sometimes I think he’s prone to, well I don’t know if this is psychoanalytical but, negative attention seeking. I don’t think he’s a depressed boy, I do think he has quite a lot of persecutory anxiety, I think that he does feel quite persecuted and not always safe in the world. Sometimes I feel that he is a damaged child because of his early development and he needs containment or re-mothering. 7,3,4

Nicky: Tell me about the early development and impact?
Therapist#B: Okay. I think, we haven’t spent any time looking at what it must’ve been like for him growing up in a family where there was the loss of an older sibling before he was born. I have no doubt that that has to have contributed to some of the issues he struggles with. What specifically are you thinking? I think in terms of attachment, I sense that he doesn’t seem to have separation issues, but I sense that there may not be a strong enough attachment as he would’ve liked, I think the mother may have, I mean I’m not sure what happened losing a son before him, and obviously it hasn’t been, we haven’t looked into it in deep deep analysis, it hasn’t come up with him at all, but I do sense that there has been, I don’t feel that mom is that available, I think having lots of children firstly, LOTS of other children doesn’t offer the availability as much as he needs her to be, I feel that he does defend against needing people, me, therapy, his therapist, his mom, he does defend against that by presenting as quite omnipotent and self-sufficient, which I do feel is a defence. He does have a sense of guilt, although when he’s been quite angry in the therapy I haven’t expressed any recreation unfortunately, have the anger and that’s been it. Ja, I question the attachment, I don’t think he has a bad relationship with his mother but I think that the attachment, I think it has been held back a lot, maybe from mom, after losing a son, having lots of children, I feel that. Separating is fine, individuating is fine, I think it’s difficult because he’s grown up in quite a rigid environment, he grows up in and he does have some different ideas and would like to explore different ways of being and his family rules don’t allow for them, which I think is quite difficult, and he may rebel when he’s older. He does have some mild anti-social tendencies, which hopefully
will be curbed. I mean he does worry with some of the things that interest him and the behaviours, and his guilt isn’t strong enough, risk-taking wise.

Nicky: One last question. Is there anything that you think is important in the process of therapy with this child that I haven’t covered with you. Anything that you can think that would be relevant?

Therapist#B: No, I think you’ve covered most issues. I mean I think obviously exploring the family background is very very important, very crucial, specifically in my mind, especially the loss of a child, and I think considering their religious orientation, having a huge family and it places a huge impact on the relationship with his mother specifically, on his mother’s availability. But I think that you have covered. The therapy has given him understanding and a place to look at his anger and feel it is an ok or a safe place to do that. Let me just think if there’s anything else…. no. 1,3,4,7,14

Nicky: Thanks.
Interview with Mother Participant C

Nicky: The first question I’d like to ask you is what is your understanding as to why your child is in play therapy?

Mother#C: Originally I think it was more of a psychological thing to get her over her, because she came into the school with low self-esteem, low confidence, everything was low, and that was my understanding that she went in there to build up her self-esteem and her confidence and help her deal with, well to be confident, ja. 2

Nicky: And now why do you see her being in therapy?

Mother#C: I think she needs THERAPIST C, she needs the time out, because we, it’s an interesting question, but what I think is that I like her to go to therapy because she needs that time out from everybody else, she needs to go back into a little child again. And if she’s got problems she can’t discuss with me she can always discuss with THERAPIST C and we work together with those problems. 11,10

Nicky: What are some of your thoughts and feelings about your child being in play therapy?

Mother#C: I think play therapy is brilliant for her. I’ve never really actually gone too far into why CHILD C’s there, why, I can just see it’s good for her, what THERAPIST C’s doing is good for her. What was the question again?
Nicky: Well, maybe another way of asking the same question is, what would you tell another parent about play therapy?

Mother#C: That it's helped CHILD C and I would recommend it to any parent.

Nicky: If you can be specific, how do you see it as having helped her?

Mother#C: Confidence is up, she knows how to deal with certain situations I would not have given her the right advice about, my advice to her would've been totally the wrong advice, like with CHILD C, she had a problem with the boys at one stage, and I just was so anti her doing the boy thing, and really at the end of the day it was just her building her self-esteem and that's when THERAPIST C came in and helped her through that situation. 2,3,4

Nicky: How would you describe your relationship with THERAPIST C?

Mother#C: Good. In the beginning it wasn’t, and I think it was also a jealousy thing because now she’s taken a bit of CHILD C from me and CHILD C is, because my belief, and I tried to go right, from when CHILD C started the school, well since she was small, we don’t keep secrets, because secrets can turn into nasty little things, so I, well with THERAPIST C, CHILD C was revealing secrets to her that she wasn’t revealing to me, and I felt left out by this and I had to re-assess myself and my role in SCHOOL, but once I had got over that hurdle, it was fine, I absolutely have a 100% trust in THERAPIST C and if CHILD C has a problem that I know I can’t sort out, I go directly to THERAPIST C and then she can give advice. 3,4,10,12,13
Nicky: And how would you describe your child’s relationship with THERAPIST C?

Mother#C: Very good. Absolutely. Loving, in fact she’s almost like a second, not a second mom but a second person that she can really trust. She understands her difficult relationship with me and that I have not always been able to be good enough. Even before her dad, THERAPIST C comes, in the sort of circle, it would be me, THERAPIST C, her dad and then whoever else is underneath.

Nicky: What is your role as a parent in the therapy process? How do you see your role?

Mother#C: My role in the therapy process, it’s very, how do I see the role, my role, um, as long as I, put it in another way, I don’t understand.

Nicky: Well, what do you see as your purpose when you go and see THERAPIST C?

Mother#C: Feedback, and if I’ve got problems at home that I don’t know how to deal with. It could be homework it could be helping, I’m just trying to think of things, I mean anything I don’t know how to deal with, or I think I’m
dealing with it wrong, then it’s very important that I see THERAPIST C so that we can discuss it and she can give me advice as to how to deal with it. Because you know what, I don’t have a role model, I’ve never, I don’t have a mother, my father I don’t ever ever see, and I don’t have any brothers or sisters, well I do have a brother but he’s down in Cape Town, but I never learnt from anybody, so I always need to get reassured that I’m doing it okay. That I’m doing well, you know I’m divorced, so there’s no dad for any family support, so I actually rely on THERAPIST C to say to me yes you doing it right or maybe you should it this way, because my friends are, you know you can learn from your friends but every situation is different and in some situations you don’t want to speak to your friends about and the one situation was CHILD C at SCHOOL had a problem with taking money, she did it once, but then money went missing, and I don’t know how to handle the situation, and THERAPIST C gave me some good advice with that, and I mean you don’t want to go and tell your friends, you know your child steals. And then she said to me there was obviously something there you know because of her difficulties I had to understand maybe why she needed to steal at that time or why she does the things she does.1,2,3,4,10,11,12,13,14

Nicky: Okay. Do you discuss other things other than your child’s difficulties with THERAPIST C?

Mother#C: Ja, my ex-husband, ja.1

Nicky: And anything other than that? Do you discuss relationships?
Does your child’s therapist ever directly focus on your child’s learning difficulty?

No, I think THERAPIST C, I stand under correction, but I think THERAPIST C is more on the social side and with an, she does but not directly, you don’t say okay maths is bad and you must concentrate on your maths, it’s a very sort of, whole lot of things that she concentrates on.

What sort of things are discussed say about home life?

Going to bed at the right time, I do divulge quite a lot of personal stuff, but whatever happens to me directly affects CHILD C, so we discuss home life in general, when she’s cheeky to me, how she dresses, that’s another thing that we brought up. THERAPIST C helps me understand her and what I should do as I don’t always know what to do.

And then relationships other than we discussed?

CHILD C and myself?

Ja

Yes, well I was involved at one stage and yes we did discuss that because it had a direct affect on CHILD C and also the dad.
Nicky: What aspects of her father do you discuss.

Mother#C: You know I just get very frustrated with her father because I, I know that I'm the mom but it's not my sole responsibility but picking CHILD C up and at one stage he wouldn't allow her to wear certain types of clothes so she's a different person in his house as opposed to my house. She's not as relaxed. And you know what THERAPIST C also told me you know, as much as that irritates me, he is still her father and the last, I haven't got a very good memory, but in the last interview I had with THERAPIST C, we discussed grades, and CHILD C's relationship with her dad is getting stronger and stronger and stronger, and that is so important because later on in life when she marries, I don't want her not to trust a man because she didn't have that trust in her father, so I backed off and he's also backed off in a way, and it's now coming right. I mean there are a few issues, but.

Nicky: Do you ever discuss peer relationships with THERAPIST C?

Mother#C: About CHILD C, not that I can remember, the way she is around the kids at school, the boys has always been a big problem.

Nicky: And is there anything else that comes to mind that you've perhaps discussed with her.

Mother#C: No.

Nicky: I know you said to me earlier that you don't discuss with CHILD C what
happens in therapy, but what do you think they focus on, what do you think they discuss in therapy?

Mother#C: Okay, in the beginning I used to because I know I was jealous of THERAPIST C and I used to almost pull out the questions, I’d ask her and get cross when she didn’t want to answer me, but what I can gather is that they do a lot of playing, they pick-up-stix, she goes into a fantasy world, and that’s fine with me, and I look at her as an adult, I would prefer THERAPIST C to ask the questions but then you know what, to sit her down and say right now CHILD C, this this and this, but it doesn’t work like that, sometimes I want to get answers out or I want to get problems solved that I can’t solve myself.

Nicky: So while they playing, what do you think they talk about?

Mother#C: I dunno. Not now, a year ago it would be about school, about me, about her dad and her dad’s wife. The dad’s wife was a big big issue in our lives at one stage, a very big issue and I didn’t know how to deal with it so I used to say to CHILD C speak to THERAPIST C about it and she did on some occasions, I dunno how she approached THERAPIST C or what came out, but STEP-MOTHER was a big problem. 1

Nicky: And now what do you think they focus on?

Mother#C: Um, just building up her self-esteem. Because she’s from a divorced family, I treat her older than what she really is, so what I can picture is she goes
into THERAPIST C’s office, she goes into her fantasy world, she wishes she was a little girl and you know, baby, and then goes into that world, and that’s really really fine, I think that’s perfect, THERAPIST C helps her to deal with things and helps her to cope better with things, she does always know how to cope with things—so that’s what I think happens. 2,7

Nicky: What do you think it means to be learning disabled, or have a learning difficulty, how do you understand it?

Mother#C: Just that she battles academically. That’s really what I can see, she can’t grasp the concepts like somebody who is able to do it quickly.5,8

Nicky: do you think having a learning difficulty should be an important part of the therapy process?

Mother#C: No.

Nicky: can you tell me why not?

Mother#C: Because I think a lot of children go to psychologists and they okay at school but every aspect of their lives must be A-okay, so if they okay at school but home life is not good, then they should go and see a psychologist or a play therapist.5,8

Nicky: So you don’t see her as being a predominant focus?
Like with CHILD C her self-esteem was very very low when she joined SCHOOL and with play therapy it got better but it was around our relationship and her relationship with her dad. 2,1

Past school, her teacher really just, I think it was over a couple of years, it was me, it was her past school, and I actually wasn’t seeing this little girl for who she was, I made the biggest mistake of my life, I didn’t see she was hurting inside and it took one teacher at her old school to say listen, there’s a problem, and if I’d seen it, and our relationship since we’ve been at SCHOOL has got stronger and stronger, before she was a little girl 5,1,

So was her struggle at school, academically?

Struggle at school and the fact that she was at a new school, she didn’t know anybody, and she had to make new friends and where she was at preschool she was the queen, people copied what she wore, now all of a sudden she came into this new school and nobody knew her and nobody wanted to be her friend and then her teacher was, she pushed this girl down and pushed this girl down, and she was this crumbling little, I don’t want those years back, I really don’t. 6
MOTHER C, one last question. I’ve asked you a lot of different questions. If there’s something that you feel I haven’t covered in terms of the therapy process, or what happens in therapy, is there anything you’d want to add?

No, because you see I don’t really know what happens in the room. I mean THERAPIST C does, she’ll pick up a problem, the last time it was with the boys, last year, but I don’t ask her at all what goes on.

But even in terms of you and your role, anything you’d like to add that maybe I haven’t covered in my questions?

Just not to be jealous or envious of a play therapist because they are really really there at the end of the day for the child.

That was quite an important issue.

Ja.

And you think that would be important for other parents to understand?

Ja, because sometimes also, you don’t, you know that personality thing when you walk into a place and you don’t, immediately you feel threatened by someone, you don’t like that person, but really, that person might not, and I found that with quite a few teachers here, originally I didn’t like the teachers, just on face value, but they not here to teach me and they not here to worry about me, they there for the child, and as long s the child gets on
with the teacher, that’s the most important thing and with THERAPIST C it
was the same thing, I immediately didn’t like it because of the threatening,
it was because of me, not because of THERAPIST C. And once I saw what
the result of what she was doing, you know what, and I didn’t loose my
child, and really CHILD C’s just grown and grown. 3,4

Nicky: A lot of fears?

Mother#C: Ja, but from my side, because I wasn’t adult enough to speak to
THERAPIST C about it.

Nicky: Anything else you’d like to add?

Mother#C: No.

Nicky: Thank you.
Interview with Child Participant C

Nicky: Adults often ask what therapy is like for children, if you were to tell another child in your class, like your best friend, what would you say therapy was about?

Child#C: It helps you like say if you’ve got a problem it helps you remember things and if you’ve got a problem at home and you don’t want anyone else to know they will till you, you will tell the therapist your problem and you can ask the therapist to not tell anyone else, secrets between them, and your parents, you don’t want them to know, so that’s what I think it’s about. It’s fun because I like to play, but the play therapy is you, like with THERAPIST C I play with her and I tell her my problems because sometimes there’s problems I just like to play and it’s something that I play with the toys she can see the feelings like if I’m playing army then that means I’m angry and if I’m playing like something nice it means I’m not angry, I don’t have any problems or anything, and my mom asked THERAPIST C if I could go because I get confused with other things and I like to tell somebody my secrets. 1,3,11

Nicky: (Tape stopped so restarted tape) Okay, so lets try that again, you were saying to me what sort of things you discuss in therapy?

Child#C: Like all my problems and my mom and my dad especially like my mom’s ex-fiancé, well she had a problem with him because he kept on drinking and
that, so that’s why I had a problem with that and like my problems with when my step-mom was being horrible to me and that, she’d like say horrible things to me, that’s what I normally discuss. I worried a lot about things with my dad things at his house.

Nicky: You said to me you discuss a lot about family, did you ever discuss anything else other than family?

Child#C: Maybe some of my friends if they hurt me, but nothing’s happened to me with my friends so far, just with my family.

Nicky: Do you ever discuss school?

Child#C: Sometimes, well it’s only when I’ve got to struggle and don’t understand things like maths sums I’m not perfect with but sometimes I struggle a little bit but that’s not really important, it’s just normally my family and not school.

Nicky: Okay, how do you feel about your therapist?

Child#C: She’s kind, she understands me, she understands my feelings and I trust her.

Nicky: If your therapist were to tell someone about you, what do you think she’d say about you?
My secrets, because if my therapist wasn’t kind or trusting, she’d tell my secrets yes. 3,4

She wouldn’t tell your secrets to anyone?

If I could trust her and she was an honest person she wouldn’t tell anybody about my secrets but if she wasn’t she’d tell everybody my secrets. 4

How would she describe you?

Maybe as a difficult person because I struggle, I normally complain, ja, she would explain me as a person who is cross and that sometimes and if I was just happy she would just smooth me out, she wouldn’t do anything else.4,11

That’s great. Why do you think children come to this school?

They’ve got a problem, like say reading or maths, because some people, their minds just go different, like my sister and my brother, they used to come to this school, they had problems with maths and reading, I’ve got a problem with reading, because I can’t read words, I get difficult, I normally add words into it. 5,8

Is this school different to other schools?

much
Nicky: How is it different?

Child#C: The way the teachers teach the children, the way the therapists, they kind and the way the food is brought up in the tuck shop is no sugary sweets and that. 5,8

Nicky: What would you tell a friend about having a learning difficulty? Someone who didn’t have one, what would you say to them.

Child#C: It’s difficult, it’s difficult to try and do everything right because the other person, if they don’t have a problem, then you like feel jealous because they got a problem, I’ve got a problem and they don’t. So it’s a little bit difficult to describe to the person. 5,8

Nicky: Okay, do you ever discuss having a learning difficulty with THERAPIST C?

Child#C: No not really, actually no.5,8

Nicky: You don’t discuss anything about having a difficulty at school?

Child#C: No, I’m improving my reading, no not really. 5

Nicky: Does your therapist always understand what you trying to tell them?

Child#C: I think so, because when I have a problem, I don’t know if THERAPIST C
understands but I’m sure she does.

Nicky: If she doesn’t understand, what do you do?

Child#C: I would tell her, I’d go from the beginning to the end and tell her the whole story.

Nicky: Have you ever told or been able to tell THERAPIST C when you unhappy with her or angry with her, have you ever been able to do that?

Child#C: Well, I’m never unhappy or angry with her, but if I was, I would, it would be easy to tell her.

Nicky: Sometimes your mom meets with your therapist, what do you think they talk about?

Child#C: Me and my mom likes to tell THERAPIST C, like say when I go to THERAPIST C I forget to tell her some things that my mom asks me to tell her so when my mom comes to see THERAPIST C she talks about private stuff I don’t know anything about but things my mom wants to speak THERAPIST C about, like my step-mom, my dad, something like that. She is there to help my mom with her private stuff. 1,4,13,10

Nicky: How do you feel about your mom meeting with THERAPIST C?

Child#C: It’s fine because I’ve got my secrets and she’s got her secrets so I’m happy
with it, I don’t mind.

Nicky: Do you think it’s helpful?

Child#C: Ja, for my mom, if she has a problem she can tell THERAPIST C. 4

Nicky: So it’s helpful for your mom?

Child#C: Ja

Nicky: Is it helpful for you

Child#C: Ja, [laughing], it’s helpful for me! It helps my mom then help me like she understand my worries better. 10,3,4

Nicky: One more question.

Child#C: Ok.

Nicky: Do you think there’s anything that I haven’t covered that’s important about being in therapy, that you think I should know about.

Child#C: No, not really, I don’t have anymore secrets no.

Nicky: Thank you very much.

Child#C: Pleasure
Interview with Therapist Participant C

Nicky: The first question I’d like to ask you is, what is your understanding as to why this particular child is in play therapy.

Therapist#C: I think she’s got a lot of problems. She’s got a very difficult background to deal with. I know you focussing specifically on learning stuff but I think a learning problem is part of the problem but I don’t think it’s the main problem for her actually. I think her main problem is her background. Her mom really battled with her when she was a little girl, so did her dad, but her mom’s the primary caretaker now and I suppose the bond with the mom is more important in some ways for her emotional growth. They never bonded properly, and her mom had her own stuff to deal with, she never had good mothering, her own mother died when she was three I think, and so I don’t think she could really be a good mom to CHILD C. That was the early time of CHILD C’s life which was very difficult for her, and because her mom battled so much herself, she’s had an unstable life, the mom got divorced, she’s had different partners, things have been very unstable in their home in terms of actual material things available to her and then she’s had the learning problem as well, so she’s just had a helluva lot to deal with and I think that’s affected things, like a sense of herself and her self-esteem and I think it was clear to the parent that she needed some sort of help, and I think play therapy is the right sort of help. 1,2,,11

Nicky: And if you were to discuss this child with another therapist, how would you
I'm very fond of her, but I worry about her, my main thing is worry, because I know that therapy is helping and there's something of a connection between us, but I feel that the odds in a way are so loaded against her that I wish I could do more in a way, but ja, I suppose I'm doing what I can. I was thinking today, maybe if she was private child I'd have her in therapy twice a week. But she's a sweetie, she is a sweet girl, she engages, I don't know that she's a bonded child so I don't know if she's bonded to me or attached to me, but she certainly likes coming and certainly the therapy seems to mean something to her, so there's definitely a connection between us. 3,4,10

Nicky: So if you were to describe the relationship, how would you describe it?

Therapist#C: That's quite difficult, to just kind of tone it down to one phrase. I care about her and I'm very concerned about her.

Nicky: How do you see psychoalytic play therapy assisting your work with this child?

Therapist#C: Well I think because her problems are so deep one has to look at the early years, more dynamic than analytic I suppose, so understanding how things went wrong with her and her mom in terms of attachment and bonding. Although I know strict psycho analytic people don't talk about attachment, but I think they can tie in. I won't get all theoretical! And then to look at her
sort of actual dynamics in terms of how she functions personality-wise and in the way she relates to the world. So I suppose enough depth, it helps me to understand her. 1

Nicky: Could you elaborate further on techniques that you use, maybe it will be helpful to give you some examples like transference, interpretation, projective identification, do you use any of those techniques with her?

Therapist#C: Ja, I think I do, certainly transfer, because certainly the way she relates to me I’m sure is very similar to the way she relates to her mom. I’ll give you one example of that, I’ve found in the therapy that when she is more open her mom is more okay, when her mom is in a very bad place she has been quite shut down and quite conciliatory and there were months at a point in the therapy where she wouldn’t beat me in a game and it was as if she felt I couldn’t handle either kind of her neediness or her aggression and so I interpreted that it was like she couldn’t burden mom with herself and she needed to kind of make things right for me just like she made it right with mom and that went on for a long time but then when mom got better she started being more open and I think she could see that there was some similarity, so transference definitely, I can’t immediately think of examples of projection but I’m sure I do use it. 1,3,4,14

Nicky: Just in terms of what you said, the object relations literature uses a lot of reference to the good enough mother and the good enough therapist. Do you feel that’s part of your process with her, is providing a holding functioning in the therapy?
I do, because I’m consistent and I think her home has been inconsistent and I think her mom is quite volatile in terms of moods and CHILD C so sensitive to how her mom is and it has such an effect on how she can be, so I would say that it’s a holding place, definitely, because it’s consistent and it’s once a week and all that sort of thing, ja, so I do think that I’m providing her with things that haven’t been provided in her life and in her primary relationship.

Do you feel this child responds to interpretations that involve her internal world?

Ja, definitely, not easily all the time, and she sometimes resists them, so I’ve had to learn to be very gentle and sometimes strategic in the way that I make the interpretation and sometimes I can’t and I just speak about the process like she doesn’t like it when I say that, or that’s hard to hear about, but she does respond.

Do you think different things or issues emerge when working with learning disabled children as opposed to other children?

I think they can, I mean I’ve wondered if it relates to learning disability or actual IQ because CHILD C is of average intelligence, if I think of some of the kids that I’ve had, she’s been quite low average maybe, and very concrete, you certainly have to work differently and more concretely and they can’t, they wouldn’t be able to listen to the kind of interpretations that CHILD C can. So I suppose I think it depends on the kind of learning
problem and the actual intelligence level. I don’t think I’ve approached the therapy differently with her than I would approach it with any other child, I don’t know if the learning thing’s been a big part of it except in one way which I tell you, you can tell me if I should say it now or later? Okay, there has been a big theme and quite a few of the sessions in the later part of the therapy where she’s been a bit better have been about feeling like she doesn’t have mastery especially over learning and in the classroom, so there’s been lots of teacher teacher games, and her feeling nice to be the clever teacher and feeling like she can boss me around, which she’d like to be able to do, and I’ve never used the actual word learning problem with her but I’ve certainly spoken about she wishes the work were easier or that she knew the answer or she didn’t have to battle so much or that sort of thing. 5,8

Nicky: Does the child use their learning disability in any way to have their needs met or to guard against letting on what their true feelings actually are?

Therapist#C: I don’t think she uses her learning disability to do that, I think that’s part of her defence, I think her defence structure is that she can’t let on how vulnerable she is. 5,8

Nicky: Is that because she’s learning disabled, is that your understanding?

Therapist#C: No, that’s not my understanding. My understanding is that that’s the kind of
personality structure that she’s developed because of her life circumstances. But I wouldn’t relate it to her learning problem.

Nicky: If you were to put it in a nutshell, how would you say her learning disability has impacted on the therapy?

Therapist#C: I think it’s given us some issues to work on, mastery of particularly the scholastic realm and I don’t think it’s broader than that. Actually, I don’t think it’s broadened out to mastery over her life in general because there are things she’s very good at, like she’s a good dancer and I think there are areas where she feels very competent but I think her learning disability has given us material to work on in terms of her feeling like learning is a battle for her and learning to interact socially and what is ok socially. 2,5,8

Nicky: What other major things can you think offhand have you focussed on in therapy?

Therapist#C: Her home life, definitely, and her relationship with her parents and the difficulties in her background, the fact that she came from a home where she didn’t feel like she had enough emotionally and materially, her relationship with her mom who she finds quite impatient at times, although they definitely have a close, very loving but quite fraught relationship. Her dad, her relationship with her step-mother quite a lot and difficulties with her step-mom, so all the family relationships have taken up a lot of the time. And then I suppose a theme of herself and how it’s hard for her to show vulnerability because she’s had to manage so much in her life and in a way
when she’s shown the vulnerability, it hasn’t been met, or it’s been met with adults equally vulnerable or who kind of take up an equal amount of space. Ja and socially she sometimes battles to understand why people do things or behave in a particular way, she sometimes lacks confidence in herself which affects her socially and she needs reassurance of her social abilities.

Nicky: And how do you see the role of working with this mother in terms of this child’s therapy?

Therapist#C: It’s been quite a tricky one, maybe in an ideal world this is the sort of case where the mother shouldn’t see me, but see someone else, but I started off with this case in private practice so I saw both parents and CHILD C and I say maybe I shouldn’t because CHILD C is quite protective of her space with me and she gets quite threatened when I see her parents, particularly her mom. There was one point in the therapy where MOTHER C was very down and actually suicidal where I had to see her more often, and I’m sure on some level CHILD C understands that that ultimately helps her but I think that has been quite difficult for her, the fact that I see her mother. But then in terms of actual work that I do with MOTHER C is important, an important part of the process because CHILD C needs a lot from her, she needs more consistency, she needs more boundaries from her mom, she needs more understanding, so all those things I’ve tried to convey in my work with the mom. Basically she needs to understand her child’s needs better so they can have a better relationship.
Nicky: So how do the family relationships affect the therapy process for this little girl?

Therapist#C: Well I haven't spoken about the dad, but one of the big things has been that the mom and the dad spend a lot of their sessions, which are individual sessions, because in the joint session they just fought and it didn't work and we decided it would be more fruitful for them to meet separately, they spent a lot of time moaning about the other parent and blaming the other parent, so we've had to get beyond all that. And then, I mean the other side of the coin is that because I know the parents so well I know what CHILD C lives with, so I suppose that's had a positive effect on my working with her because I can see how the parents are and can then speculate how they relate to her. I suppose it cuts both ways that in some way it's been difficult for CHILD C and there's been a lot of stuff that I've had to work out in my mind about which parent was giving the accurate view or where they were coming from when they were speaking so badly of each other and blaming stuff on each other about CHILD C and so on, but on the other hand, I suppose it's given me a rich picture of the family life.

Nicky: And the last question, what is your psycho-analytic formulation of this child, if you were to formulate it?

Therapist#C: I suppose the whole idea of formulating isn't, I mean it's fairly new for me so when I say the formulation, it's stuff that I've come up with but it does come out of supervision as well, and I suppose that I think that the formulation that my supervisor has given does fit, I took this case to
supervision for the first time at a time that I spoke about earlier when CHILD C was not bringing any difficulties or any vulnerability, she was just playing, there was no real stuff in the therapy, so it was first of all no vulnerability, then that it felt quite false to me, and those are two important aspects of her I think, and the suggestion was that she's got a narcissistic personality structure, which means that she finds vulnerability very difficult to deal with because of shame, and also that there's falseness involved, she can't feel real, she can't be real in and of herself because she's never been allowed to be real. And then what I said earlier about her bonding is an important part of the formulation, her mother was depressed when she was little and I think MOTHER C herself said that she didn't cope and she didn't feel that she bonded, and CHILD C's step-sister was very central in bringing her up in those early years, so I think that her bonding didn't go nicely, so her attachment is quite shaky, which allows that sort of personality structure to emerge I suppose. And then the other thing that I just don't know much about, this Kerberg stuff that my supervisor said that what she's internalise is a stranger object so it's someone that she never really got to know, I mean that makes sense to me but that's not a way that I've ever really thought about her, but I can certainly see that MOTHER C does have quite anti-social traits in the way she's conducted her affairs, he has not paid people back money and whatever and CHILD C, certainly in the years, has done things that are mildly conduct disordered, she has lied, and before she came to SCHOOL there was patch of stealing, which I've related all to the early not bonding and the deprivation but I suppose if one wants to attach a label to that, it is psychopathic in the making, which I
don’t like saying, I don’t like using those terms, but I suppose it’s true, and as you know I’m not mentioning her name, I don’t know if it matters, but my supervisor is very straight but she’ll always say if the absolute worst case scenario and I suppose CHILD C fits into that and has the potential for that and I hope she won’t but I think realistically there’s the potential. 1,4,7

Nicky: Just to ask you, would there be anything that you feel is important in terms of the therapy process with this particular child that you haven’t covered?

Therapist#C: I don’t, I think we’ve pretty much covered it.
Appendix C: Letters of Consent

University of Pretoria  
Department of Psychology  
Pretoria  
0002  
Tel (012) 420-4111

Nicola Powell  
P.O.Box 69022  
Bryanston  
2021  
Tel (011) 782-5378 or 082-899-6108

Dear Mrs

I am doing research in play therapy for my doctoral thesis in psychotherapy at the University of Pretoria. When a child enters into therapy the process involves at least three individuals, the child, the parent and the therapist. In order to obtain a more in-depth understanding of the process of therapy with children who are learning disabled I would like to interview your child, your child’s therapist and yourself to obtain an understanding of the process of your child’s therapy. It is felt research on the process of child psychotherapy can increase the already existing knowledge on the course of treatment and how process affects the outcome or benefit of the therapy, as well as improving the therapist’s understanding of the therapist-client relationship. Such information can be seen to aid the development of maximally effective interventions. The title of the research is "Understanding the Process of Psychotherapy with Learning Disabled Children."

The questions I would like to ask are around the experience of therapy and tend to focus on ones thoughts about the therapy. The approach of the research is to use broad open-ended questions to obtain an understanding as to what the child, parent and therapist perceive to be important issues. As a result the research is designed to focus on the meaning given to the therapy as opposed to imposing ideas onto the subjects.
I would therefore like to interview your child, the therapist that is working with your child and you as the mother of the child. I would also like to obtain permission to use the confidential material held in your child’s file of assessments and reports at SCHOOLs Remedial School. The interviews will be taped so that the information obtained can be analysed. No identifying information will be used in the research such as the name of the child or the parent.

I hope that the interviews will also be beneficial to yourself, the therapist and your child in that it will allow expression of feelings about being in therapy and a time to reflect on the process.

If you are willing to participate and allow your child to participate in the research, could you please sign this consent form. The participation in this research is voluntary and should you at any point not feel comfortable with your involvement in the study you may withdraw. I thank you for your time and co-operation.

Yours sincerely,

Nicola Powell
Educational Psychologist
CONSENT FORM FOR PSYCHOLOGY DOCTORATE RESEARCH

I ________________________________

(Name of parent) give consent for my child ________________________________

(Name of child) to participate in this research project examining the process of psychotherapy with learning disabled children. I am aware that my child and my child’s therapist will be interviewed as to the process of my child’s therapy and I, the mother of my child will also be interviewed. I am also aware that identifying details will not be used in the research. I hereby also give permission to use my child’s assessment records and school records.

Signed: ________________________________

Date: ________________________________

Researchers Name: Nicola Powell

Researchers signature: ________________________________

Signed on (date) ________________________________

Of (month) ________________________________

At SCHOOL's Remedial School

UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUBISETHI YA PRETORIA
I am doing research in play therapy for my doctoral thesis in psychotherapy at the University of Pretoria. I would like to obtain permission to use some of the children who are currently in therapy at NAME school and interview those children, their parents and the psychologist with whom they are in therapy with.

When a child enters into therapy the process involves at least three individuals, the child, the parent and the therapist. In order to obtain a more in-depth understanding of the process of therapy with children who are learning disabled I would like to interview all the participants involved with the process of the therapy. It is felt research on the process of child psychotherapy can increase the already existing knowledge on the course of treatment and how process affects the outcome or benefit of the therapy, as well as improving the therapist’s understanding of the therapist-client relationship. Such information can be seen to aid the development of maximally effective interventions. The title of the proposed research is “Understanding the Process of Psychotherapy with Learning Disabled Children.”

The question I would like to ask is “Tell me the story of your experience of the therapy process, how it evolved and what it means to you?” The approach of the research is to use a
broad question to obtain an understanding as to what is important to the subjects as opposed to imposing ideas onto the subjects.

I would also like to obtain permission to use the confidential material held in the children’s files of assessments and reports at NAME Remedial School. I will obtain consent from the parent to be allowed to use the information in these files for the research. The interviews will be taped so that the information obtained can be analysed. No identifying information will be used in the research such as the name of the child or the parent.

Yours sincerely,
Nicola Powell
Educational Psychologist