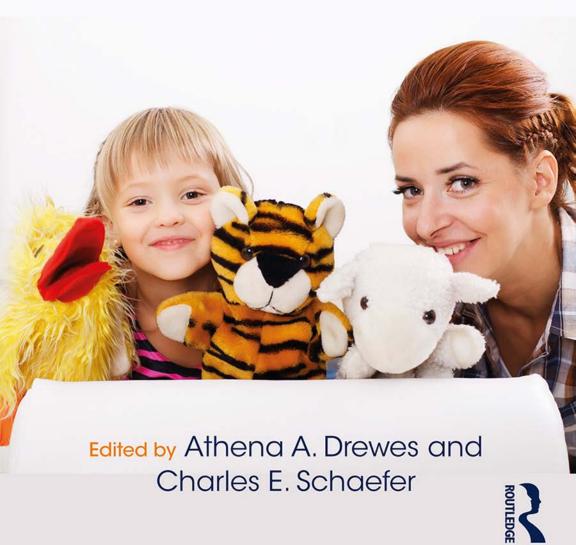
# Puppet Play Therapy

A Practical Guidebook



### Puppet Play Therapy

Puppet Play Therapy is a comprehensive guidebook that describes the basic skills, techniques, and applications for selecting and working with puppets in specific types of settings and populations. Written by preeminent voices in the field, chapters offer invaluable guidance on selecting, using, and assessing puppet-based therapeutic interventions. Both beginning and experienced clinicians will also appreciate the inclusion of practical, step-by-step approaches and reproducible handouts that will aid them in their puppet play therapy sessions.

**Athena A. Drewes, PsyD, RPT-S**, is a licensed child psychologist, founder, and president emeritus of the New York Association of Play Therapy, as well as a national and international presenter and editor/coeditor on play therapy. Dr. Drewes is also director of clinical training and the APA-accredited doctoral internship at Astor Services for Children and Families, a large multi-service nonprofit mental health agency in New York.

**Charles E. Schaefer, PhD, RPT-S**, is cofounder and director emeritus of the Association of Play Therapy as well as professor emeritus of psychology at Fairleigh Dickinson University in New Jersey. He is also a renowned author, editor, and coeditor of over 100 research articles and 60 professional books.



# **Puppet Play Therapy**

A Practical Guidebook

Edited by Athena A. Drewes and Charles E. Schaefer



First edition published 2018 by Routledge 711 Third Avenue, New York, NY 10017

and by Routledge

2 Park Square, Milton Park, Abingdon, Oxon, OX14 4RN

Routledge is an imprint of the Taylor & Francis Group, an informa business

© 2018 Athena A. Drewes and Charles E. Schaefer

The right of the editors to be identified as the authors of the editorial material, and of the authors for their individual chapters, has been asserted in accordance with sections 77 and 78 of the Copyright, Designs and Patents Act 1988.

All rights reserved. The purchase of this copyright material confers the right on the purchasing institution to photocopy or download pages which bear the photocopy icon and a copyright line at the bottom of the page. No other parts of this book may be reprinted or reproduced or utilized in any form or by any electronic, mechanical, or other means, now known or hereafter invented, including photocopying and recording, or in any information storage or retrieval system, without permission in writing from the publishers.

*Trademark notice*: Product or corporate names may be trademarks or registered trademarks, and are used only for identification and explanation without intent to infringe.

Library of Congress Cataloging-in-Publication Data

Names: Drewes, Athena A., 1948- editor. | Schaefer, Charles E., editor. Title: Puppet play therapy: a practical guidebook/edited by Athena A. Drewes and Charles E. Schaefer.

Description: New York: Routledge, 2017. | Includes bibliographical references and index.

Identifiers: LCCN 2017030243 | ISBN 9781138707214 (hbk : alk. paper) | ISBN 9781138707221 (pbk : alk. paper) | ISBN 9781315181349 (ebk)

Subjects: LCSH: Puppets—Therapeutic use. | Play therapy. | Child psychotherapy.

Classification: LCC RJ53.P85 P87 2017 | DDC 618.92/891653—dc23 LC record available at https://lccn.loc.gov/2017030243

ISBN: 978-1-138-70721-4 (hbk) ISBN: 978-1-138-70722-1 (pbk) ISBN: 978-1-315-18134-9 (ebk)

Typeset in Bembo by Apex CoVantage, LLC

De	edicated to t	he magical	world of pi	ippet play (	herapy	



# Contents

Preface

ATHENA A. DREWES AND CHARLES E. SCHAEFER

	Editors	xi
	Contributors	xii
SE/	CTION I	
	croduction	1
1	Fundamental Concepts and Practices of Puppet Play Therapy CHARLES E. SCHAEFER AND ATHENA A. DREWES	3
2	Puppet Play Therapy With Children of All Ages ELEANOR C. IRWIN	17
SEG	CTION II	
Pu	ppet Assessment Techniques	27
3	The Berkeley Puppet Interview for Child Assessment Jeffrey Measelle and Jennifer C. Ablow	29
4	The Family Puppet Interview CATHERINE FORD SORI	48
5	Puppet Sentence Completion Task (PSCT) SUSAN M. KNELL	59
SEO	CTION III	
	neoretical Approaches	75
6	The Child-Centered Approach to Puppet Play With Children ELIZABETH KJELLSTRAND HARTWIG	77

X

	0
V111	Contents
VIII	Comenis

7	The Use of Puppets in Psychodynamic Child Therapy DAVID A. CRENSHAW AND JILLIAN E. KELLY	
8	Puppet Play in Adlerian Therapy KRISTIN K. MEANY-WALEN	98
9	Puppet Play in Solution-Focused Brief Therapy ELSA SOTO LEGGETT	108
	CTION IV ppet Therapy Techniques	119
10	The Use of Puppets to Externalize a Child's "Problem" BRIE TURNS AND BRANDON EDDY	121
11	"Mr. Fox Is Sad": Puppets as Symbolic Clients in the Playroom Susan M. Carter	126
12	Teaching Children to Problem-Solve Through Puppet Play Interactions CAROLYN WEBSTER-STRATTON AND M. JAMILA REID	130
13	Storytelling Through Puppets: The Turtle Technique PAM DYSON	143
14	Finger Puppets in Play Therapy JO ANN L. COOK	149
15	Play Therapy Puppet Techniques for Childhood Sexual Abuse Trauma ATHENA A. DREWES	155
	CTION V pulations and Settings	163
16	Puppets in Family Therapy With a Case of Trauma and Sexual Abuse  ELIANA GIL AND QUINN K. SMELSER	165
17	The Wonder Continues: Captivating and Engaging Adults Through Therapeutic Puppet Play and Puppet Therapy JOANNE F. VIZZINI	174

		Contents	1X	
18	Puppet Play in Medical Settings JUDI PARSON		189	
19	The Application of Therapeutic Puppet Play in the Schools SIOBHÁN PRENDIVILLE		199	
	Index	2	215	

#### **Preface**

The widespread popularity of puppets is evident by the fact that puppets are found in almost every play therapy room throughout the world. They have proven to be wonderful engagement tools and a safe way for children to act out conflicts, express feelings, reenact and gain mastery over stressful events, and learn and practice more adaptive behaviors. Unfortunately, most therapists, including play therapists, have received little or no training in the use of puppets in therapy.

The purpose of this book is to provide a practical guide in the use of puppets for therapeutic purposes. The aim is to present the basic skills, techniques, and applications underlying the effective practice of puppet play therapy, including both pioneering insights and new directions. Eclectic in scope, the volume also describes the major theoretical approaches underlying puppet play therapy so that the reader can select the principles and practices most compatible with his or her personal beliefs and values. The book is intended to be an essential guide for enhancing the clinical skills of both beginning and experienced professionals from mental health and allied fields.

Athena A. Drewes Charles E. Schaefer

#### **Editors**

**Athena A. Drewes, PsyD, RPT-S**, is a licensed child psychologist, certified school psychologist, and registered play therapist and supervisor. She is director of clinical training and APA-accredited doctoral internship at Astor Services for Children and Families. She has over 40 years of clinical experience in supervising clinicians, specializing in working with children and teens experiencing sexual abuse, complex trauma, and attachment issues in school, outpatient, and inpatient settings utilizing an integrative play therapy approach.

She is a former member of the board of directors of the Association for Play Therapy and founder and president emeritus of the New York Association for Play Therapy. She has written extensively on play therapy and is a frequently invited guest lecturer throughout the United States and around the world.

Dr. Drewes has 11 edited/coedited books, including School-Based Play Therapy, Second Edition; Cultural Issues in Play Therapy; Supervision Can Be Playful: Techniques for Child and Play Therapy Supervisors; Blending Play Therapy with Cognitive Behavioral Therapy: Evidence-Based and Other Effective Treatments and Techniques; Integrative Play Therapy; and The Therapeutic Powers of Play: 20 Core Agents of Change. Her most recently published book, by the American Psychological Association, Play Therapy in Middle Childhood, includes a companion clinical video of Dr. Drewes' integrative prescriptive play therapy work.

**Charles E. Schaefer, PhD, RPT-S**, is professor emeritus of psychology at Fairleigh Dickinson University in Teaneck, New Jersey. He is cofounder and director emeritus of the Association for Play Therapy. Dr. Schaefer is the author/coauthor of more than 100 research articles and author/editor of over 60 professional books, including *Handbook of Play Therapy, Second Edition; Foundations of Play Therapy, Second Edition; The Therapeutic Powers of Play, Second Edition; Essential Play Therapy Techniques: Time-Tested Approaches; Short-Term Play Therapy, Third Edition;* and Play Therapy for Preschoolers.

#### Contributors

- **Jennifer C. Ablow, MA, PhD,** associate professor, Department of Psychology, University of Oregon, Oregon
- **Susan M. Carter, PhD, RPT-S,** licensed psychologist in private practice, Center for Change & Growth, PLC, Kalamazoo, Michigan
- **Jo Ann L. Cook, EdD, NCSP, ABSNP, RPT-S,** private practice, Winter Park, Florida
- **David A. Crenshaw, PhD, ABPP, RPT-S,** clinical director, Children's Home of Poughkeepsie, New York
- **Athena A. Drewes, PsyD, RPT-S,** director of clinical training and APA-accredited doctoral internship at Astor Services for Children and Families, Middletown, New York
- **Pam Dyson, MA, LPC-S, RPT-S,** DFW Center for Play Therapy Training, Plano, Texas
- **Brandon Eddy, MSc,** Professor, Department of Community, Family & Addiction Services, Texas Tech University, Lubbock, Texas
- **Eliana Gil, PhD, RPT-S, ATR, LMFT,** Gil Institute for Trauma Recovery and Education, Fairfax, Virginia; director, Starbright Training Institute, adjunct faculty member, Family Therapy Department, Virginia Tech, Virginia
- **Elizabeth Kjellstrand Hartwig, PhD, LPC-S, LMFT, RPT-S,** Professional Counseling Program, Texas State University; president-elect, Texas Association for Play Therapy, Texas
- **Eleanor C. Irwin, PhD,** clinical psychologist, drama therapist (RDT), certified child and adult psychoanalyst, clinical assistant professor of psychiatry, Department of Psychiatry, School of Medicine, University of Pittsburgh; faculty, Pittsburgh Psychoanalytic Center, Pennsylvania
- Jillian E. Kelly, LCSW, RPT, private practice, Asheville, North Carolina
- Susan M. Knell, PhD, LLC, clinical psychologist, Highland Heights, Ohio

- **Elsa Soto Leggett, PhD, LPC-S, RPT-S, CSC,** program coordinator and associate professor in counselor education, University of Houston Victoria at Katy, Texas
- Kristin K. Meany-Walen, PhD, LMHC, RPT, NCC, assistant professor of counseling, School of Applied Human Sciences, Cedar Falls, Iowa
- **Jeffrey Measelle, PhD,** associate professor, Department of Psychology, University of Oregon, Oregon
- Judi Parson, PhD, MA Play Therapy, MHthSc, Grad Dip Pediatrics, BN, RN, lecturer in Mental Health, Deakin University, Geelong, Victoria, Australia
- **Siobhán Prendiville, ME, MA,** child and adolescent psychotherapist and play therapist, core trainer at Children's Therapy Centre, Westmeath, Ireland; Irish Association of Play Therapists and Psychotherapists (IAPTP)
- **M. Jamila Reid, PhD,** Child & Teacher Professor, Incredible Years Program, Seattle, Washington
- **Charles E. Schaefer, PhD, RPT-S,** professor emeritus of psychology at Fairleigh Dickinson University in Teaneck, New Jersey; cofounder and director emeritus of the Association for Play Therapy
- **Quinn K. Smelser, MA, LPC, RPT, NCC,** The George Washington University, The Gil Institute for Trauma Recovery and Education, Fairfax, Virginia
- **Catherine Ford Sori, PhD, LMFT,** full professor, MFC Track Leader, Division of Psychology and Counseling, Governors State University, University Park, Illinois
- **Brie Turns, MS, LMFTA,** Department of Community, Family & Addiction Services, Marriage and Family Therapy Program, Texas Tech University, Texas
- Joanne F. Vizzini, PhD, LCPC, NCC, licensed clinical professional counselor, Freedom Through Psychotherapy, LLC, Columbia, Maryland; former adjunct professor and clinical supervisor, Loyola University in Maryland; Puppet Therapy Institute; Puppeteers of America, UNIMA (International Puppetry Association)
- **Carolyn Webster-Stratton, PhD,** professor emeritus, University of Washington; Incredible Years, Inc., Seattle, Washington



# Section I Introduction



# 1 Fundamental Concepts and Practices of Puppet Play Therapy

Charles E. Schaefer and Athena A. Drewes

#### **Brief History**

For over three thousand years, puppets have had a universal appeal to adults across the world, who have used them to entertain, inform, relate myth and legend, and enhance tribal rituals and religious ceremonies. There is something magical and wonderful about watching inanimate objects come to life. Because puppets display the human qualities of speech and movement, people identify with them and see their self or parts of their self in the puppets. Puppets transform internal mental states of the operator into a physical form, which enlivens communication and transports people of all ages to a world of fantasy and delight. Puppets are the quintessential childhood toy whose power to stimulate the imagination cannot be replicated by modern electronic toys that flash and beep.

#### Puppet Play Therapy

It was not until the 1930s that mental health professionals began to explore the value of puppets with children—both for diagnostic and therapeutic purposes. The earliest pioneers were Adolf Woltmann and Loretta Bender, who used puppet shows to help children in psychiatric hospitals freely express and find solutions to their problems through the processes of identification with and projection onto the puppets (Bender & Woltmann, 1936; Woltmann, 1940). The puppet shows contained plots based on themes or conflicts commonly experienced by children, such as sibling rivalry or the expression of aggression. The children were asked to provide solutions to the conflicts and problems expressed by the puppet characters, and these solutions were used as a basis for therapy.

Puppet play therapy is a form of play therapy that involves the use of puppets by mental health professionals for diagnostic and therapeutic purposes. Puppet play therapy has become a mainstream practice in contemporary child psychotherapy. Moreover, the use of puppets to promote healing and development has expanded widely in recent years. Puppets are now being applied effectively across the human life cycle—from infancy to old age. In

#### 4 Charles E. Schaefer and Athena A. Drewes

addition, parents and professionals are finding puppet play to be beneficial for children in medical, educational, and home settings. Section Four of the book describes the application of puppet play across diverse environments.

#### Fundamental Concepts of Puppet Play Therapy

#### Therapeutic Powers of Puppet Play

The main ways that puppet play can foster therapeutic change in clients are by the following healing processes:

#### 1. Self-Expression

Talking through puppets can provide the necessary psychological distance for clients to disclose troublesome thoughts and feelings that are not easily expressed in their own voice. People feel safe having the puppets describe their inner world because they could always deny that the puppet talk refers to them. The children can project onto the puppet feelings and thoughts, without taking responsibility for the action and words projected, since they view them as the words and actions of someone else.

#### 2. Access the Unconscious

Puppets provide a window to a client's unconscious processes through such defense mechanisms as *projection*, that is, unconscious attribution of one's own feelings or desires onto a puppet; *symbolization*, where one object stands for another, for example, a witch puppet can represent a mean mother figure; and *displacement*, that is, directing negative feelings toward a family member to whom they were originally intended onto a puppet.

#### 3. Catharsis

Instead of acting out feelings of violence or frustration themselves, clients can imbue puppets with those feelings. If they have an angry feeling, for example, and it is safely expressed through a puppet, it can be followed by great relief and joy.

#### 4. Direct Teaching

Puppets have been found to capture children's interest, attention span, and involvement in learning (Remer & Tzuriel, 2015), thus facilitating the acquisition of more adaptive thoughts, feelings, and behaviors, such as rational thinking, emotion regulation, and social skills.

Also, puppets can be used by teachers and clinicians to teach conceptually through visual symbols—for example, an angry puppet face is the symbol for

angry feelings—and integrate oral expression, comprehension, and retention of knowledge (Peyton, 2001). Puppets can help children readily remember what they have processed, associating what they hear the puppet say with what they see. The visual element combines with the conceptual element to form a potent blend of visual education (Peyton, 2001).

#### 5. Abreaction

By puppet reenactment of stressful or traumatic events, clients can gain: (1) emotional release of blocked affects related to feeling powerless and anxious during the event, and (2) the opportunity to repeatedly practice corrective actions so as to obtain a sense of mastery over the traumatic experience.

#### 6. Awareness of Feelings

Puppets can model for a client how to label and express their feelings, as well as empathize with the feelings of others. This expands the child's "feeling" vocabulary. Children will confide in puppets and will often do something to please a puppet that they would not do for another child or adult, thus developing empathy.

#### 7. Rapport

The fun of playing with puppets can help a therapist establish rapport with children, who are by nature playful. Even "hard to reach" children tend to respond positively to puppet play. Puppets can quickly break down resistances and help to enhance trust and motivation that might otherwise take weeks to develop.

#### 8. Problem-Solving

A therapist's "helper" puppet can be the voice of reason and suggest ways for a child to solve his or her presenting problem. Conversely, a child can act as a "helper" for a puppet who has a problem similar to the child's, such as troublesome worrying. Also, by playing different roles in puppet play, clients may find their own solution to real-life problems.

#### 9. Behavioral Rehearsal

Therapists can use puppets to model coping strategies for a stressful event that a child will soon experience, such as a medical procedure or starting school. The goals are to reduce the unknown aspects of the stressor and demonstrate coping strategies, such as deep breathing and self-talk (Shapiro, 1995).

#### 10. Assess Family Dynamics

Puppet play assessments provide therapists with the opportunity to directly observe family interactions, that is, patterns of communication, roles, and coalitions, rather than rely on assumptions about family relations based on background material.

#### Theoretical Approaches

These and additional therapeutic powers of puppet play have been applied in distinctive ways by all the major play therapy approaches. Section Three of this book contains an overview of how puppet play therapy is practiced by therapists following different play therapy models—both directive and nondirective. It describes the specific application of the healing powers of puppet play by the following theoretical orientations: child-centered, psychodynamic, Adlerian, and solution-focused.

#### Types of Puppets

A puppet is an inanimate object that is manipulated by human agency so that it moves and appears to be alive. There are six general types of puppets: (1) hand puppets, (2) marionettes, (3) shadow puppets, (4) Muppets, (5) dummies, and (6) finger puppets.

#### 1. Hand Puppets

They can be used from ages 3 to 103! These comprise a broad array of puppets that are worn on the hand and operated by the puppeteer. They include mouth puppets, which have a movable mouth that is manipulated by the puppeteer's hand to facilitate self-expression. Hand puppets are more convincing in their movement and capable of more aggressiveness and expression than string marionettes (Bender & Woltmann, 1936). They should be lightweight, comfortable, portable, and inexpensive. Glove puppets are slightly more complex, with an internal division for fingers allowing independent manipulation of the puppet's arms as well as the head.

#### 2. Marionettes

A small figure of a person or animal having jointed parts operated from above by pulling strings and rods. Typically, a puppet stage is used to conceal the puppeteer's hands.

#### 3. Shadow Puppets

These are mostly rod puppets that are flat, opaque, or colored figures that cast a silhouette when manipulated behind a light source and a screen.

#### 4. Muppets

A Muppet is a cross between a hand puppet and a marionette. One or two Muppeteers operate the mouth in a manner similar to a hand puppet, while the extremities are operated by strings and rods like a marionette.

#### 5. Dummies

The most realistic type of puppet is the ventriloquist's dummy. The operator places his or her hand inside the dummy and manipulates the dummy's jaws, arms, and legs by strings and rods. Quite a bit of skill is needed by the ventriloquist.

#### 6. Finger Puppets

These are tiny puppets that fit over a finger. They are the easiest type of puppet for a young child to operate. They can be easily stored, and a child can support a whole family of characters on the fingers of just one hand.

Each type of puppet has its own particular advantage, but hand puppets are the "must-have" play therapy puppet. They are lightweight, comfortable, highly portable, relatively inexpensive, and easy to operate by people from early childhood to old age. Since they are the simplest, most versatile, and most popular type of puppet, they will be the specific focus of this guidebook.

#### Selection of Puppets for the Playroom

As a general practice it is best to display a diversified collection of 15–20 puppets (Carter & Mason, 1998). Too few puppets will not allow for enough range of expression; too many offer too many choices, which is likely to overwhelm the client. A basic collection should include:

Realistic Family Figures (e.g., Mom, Dad, two children) Wild and Tame Animals (e.g., wolf, dog, mouse) Human Characters (e.g., police officer, doctor) Fantasy Figures (e.g., witch, good fairy, devil, superhero)

The puppets in one's standard collection should include symbols for people a child may meet in his or her life, such as a good fairy for a helpful woman, or should symbolize internal personality characteristics, such as a mouse for timidity.

Every play therapist, of course, will have his or her personal favorite puppets. A recent survey of American play therapists (Schaefer, 2017), about the puppets that have proven most useful in their practice, found they reported the following puppets most often. The reason they believe these

specific puppets have been so therapeutic for children is also summarized below.

- 1. Dragon. (Express and master scary and traumatic experiences.)
- 2. *Turtle.* (Many shy children wish to draw in their heads and hide in social situations.)
- 3. Family. (Portray family interactions.)
- 4. Shark. (Express aggression and feeling protected.)
- 5. Bird. (Flies and easily escapes danger.)
- 6. Dog. (Comforting and nurturing.)
- 7. Dinosaur. (Express themes of power and protection.)
- 8. *Alligator*—With mouth that zips to open and close. (Express oral aggression by angrily eating up anything in its path.)
- 9. Snake. (Express power and aggression.)
- 10. Wizard. (Has magical powers to make things better in one's life.)

Additional guidelines for the selection of puppets for your collection:

#### Choose puppets that

- are easy for children to manipulate.
- are soft and "cuddly" as opposed to firm and rigid.
- are washable or can be cleaned.
- have a "personality." This is an intangible quality that is easier to recognize than to define. But when you look at the puppet you intuitively know how that puppet should talk and act.
- are visually and texturally appealing.
- have a movable mouth (for children over age 5).
- are culturally diverse, including skin color.
- are likeable.

#### Basic Puppetry Skills

On sensitive hands, puppets can live, but they demand more than your hands, you must give them your heart.

-Tom Tichenor

The following basic puppetry skills will enhance an adult's ability to make hand puppets come alive. Like any other skill, they need to be practiced frequently so as to develop proficiency. Practicing in front of a mirror is particularly recommended.

#### 1. Movement

Movement is the essence of bringing a puppet to life (Astell-Burt, 2001). As much as possible, make your puppet's movements mimic the real-life

movements of the animal or human character the puppet represents. Thus, a puppy would likely move quickly with lots of energy, while the movement of an "old man" puppet would tend to be slow and deliberate. A puppet that is sad might express it by dropping its head. Manipulation, that is, making your puppet move, is not as easy as it might seem. Initially, you are likely to move your puppets too much, so they appear hyperactive, or too little, so they seem dull or lifeless.

Vary the movement and keep the action both continuous and lively enough so as to maintain the interest of the child. As long at the puppet's head, mouth, or body is moving during the dialogue, the child will not be concerned about where the actual origin of the voice is.

#### 2. Focus

It is essential that a puppet should look at and establish eye contact with the person or puppet to whom it is speaking. Also, when your puppet is speaking, look at the puppet to draw attention to it, rather than looking at the person(s) to whom the puppet is speaking.

#### 3. Mouth Action

When people speak, their lower jaw moves up and down, while their upper jaw remains stationary. So try to move the lower jaw of the puppet more than the upper jaw. Since your thumb in the head of a hand puppet controls the lower jaw, move it downward when the puppet speaks while keeping the other four fingers stationary on top of the head.

#### 4. Lip Synchronization

Synchronize opening your puppet's mouth an inch or two with each important syllable or word spoken. Reserve a wide-open mouth for exaggeration or loud expressions. Keep in mind that the beginning and ending syllables of a sentence are the most noticeable to an audience for mouth synchronization. What happens in between is not so noticeable. The most common mistake in lip synchronization is closing the mouth on each syllable, which will seem like the puppet is "eating its words."

#### 5. Appropriate Voice

Alter your voice to match the character of the puppet. A weak voice for a dinosaur or a loud voice for a mouse will seem inappropriate for the puppet and be difficult to believe. Exaggerate your voice; make it fun, dramatic, magical! A unique voice makes the puppet easy to identify with and interesting to listen to. Discover a voice contrasting to your own; it can be shocking, surprising, dramatic, fun. Look at the puppet and see what characteristics its