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# The Emotional Power of Play. Drama and Child-Centered Play Therapy as Effective Teaching Support on Social and Emotional Learning

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## Abstract

This presentation will introduce Drama and Child-Centered Play Therapy as effective interventions based on play, aimed to improve social and emotional skills in children. The contemporary and multidisciplinary nature of Drama and the child-centered approach of Child-Centered Play Therapy are considered, respectively, group and one-to-one effective teaching support on Social and Emotional Learning. They both use play as a communication tool to understand the children's inner world and to help them deal with emotional development. In particular, this presentation focuses on Drama and Child-Centered Play Therapy in schools, in order to address the importance of a deep understanding of a child's inner world for an informed teacher-pupil educational relationship. This presentation will illustrate how early relationships and experiences affect the child's psychophysiological system, as reported by neuroscientific research on interactions between sympathetic and parasympathetic nervous systems. According to this bidirectional brain-body model, Drama and Child-Centered Play Therapy interventions in school can operate as a "window of affect tolerance"[1] for children. The experience of a non-judgmental space for creative expression, within an empathic and attuned group or on a one-to-one basis, as a consistent routine in school (once a week), generates, in the developing brain of the child, new connections (synaptogenesis) and new neurons (neurogenesis), modifying its structure, its functions and its emotional regulatory skills. The Play Therapist and the Drama facilitator, working in schools as psychobiological regulators [1], improve children's social and emotional learning and support teachers in their practice. This presentation will show examples of Child-Centered Play Therapy and Drama interventions in schools, with a focus on practical resources for teachers' effective understanding of the educational power of Play.

Keywords: Keywords: Play, Drama, Play Therapy, Social Emotional Learning, Teaching Support;

#### **Definition of Drama and Child-Centered Play Therapy**

Drama and Child-Centered Play Therapy are practices based on the emotional power of enactment and play. Based on the safety of metaphorical space, these practices allow children to process their own stories through somatosensory communication (verbal and non-verbal), in order to find coping mechanisms for better management of feelings and social interactions. Child-Centered Play Therapy is the dynamic process between a child and a Play Therapist in a one-to-one relationship, happening in a deputed space (the playroom). "During Child-Centered Play Therapy the child explores at his or her own pace and with his or her own agenda those issues, past and current, conscious and unconscious, that are affecting the child's life in the present" [2]. Drama is a group activity that implies a process of role-play through metaphors and symbols. It is important to distinguish Drama from Theatre: Drama is process oriented, while Theatre aims to a final product (the show). Drama, in its contemporary and interdisciplinary approach, is a space of freedom and exploration. According to Sue Jenning's research [3], Drama is also an important feature of child development. In her EPR paradigm, Sue Jennings draws the early attachment between mother and infant as a strong dramatic process based on playfulness and 'role-reversal'.

# How early relationships and experiences affect the child's emotional regulatory system

According to research on attachment, containment, and interpersonal neurobiology, the first months of human life play a crucial role in the social and emotional learning process. Neuroscientific studies state that the regions of the brain responsible for the development of the emotional system, create a threshold of risk, which the body-mind system unconsciously evaluates as situations arise. The concept of neuroception: "describe how neural circuits distinguish whether situations or people are safe, dangerous, or life-threatening" [4]. For example, if the caregiver, in the first years of her baby's life, responds with a reassuring and emphatic feedback, the newborn's brain will assess the

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experience as safe, and the neuronal message will be stored in the limbic region of the baby's brain, the one that is completely formed at birth. Badenoch states that the baby, in his early relationships and experiences, is forming what "we often experience as The Truth or The Way Things Are" [5]. Caused by specific experiences or dysregulated relationships, trauma occurs when an event is felt as life-threatening, and when the body-mind system unconsciously perceives it as real danger. In this case, the body becomes highly aroused, the pituitary-hypothalamic adrenal axis is triggered and the primitive survival response such as fight, flight or freeze is automatically enacted. If this dysregulated stress response occurs during the early years of life, it will affect the whole body-mind system with significant consequences on social and emotional learning.

#### How emotions impact school achievement

In order to have a deeper understanding of a child's behaviour, schools should improve the support of specialists, which investigate early relationships and experiences, in order to understand the child's psychophysiological background and avoid misinterpretations. "This is worth remembering when one is interpreting trauma-related and attachment-related behavioural problems with children; exhausted and frustrated caregivers, teachers, and therapists are quick to personalize and infer deliberate intention to automatic, elicited behaviours" [6]. Emotions and cognition are different psychobiological processes, and when they occur, they activate different parts of the brain. Cognition mainly involves the cortex, while activity in the lower brain is responsible for emotions. If a child is facing emotional dysregulation, such as fear, anxiety or threat, his brain will automatically enable his defence system, activating the lower part of the brain, engaged to fight, flight or freeze response. Cognitive functions in the cortex (the higher part of the brain) will be deactivated. Consequently, the child will stop learning and will eventually perform aggressive (fight response), avoidant or non-interactive behaviour (flight or freeze response).

#### What a teacher could do

Somatosensory processes and their influence on affect regulation have been described by Porges in his Polyvagal Theory. This research gives teachers a new strategy for interventions based on the positive action of playful and non-verbal interaction, using sensory activities. In his research, Porges focuses his study on the parasympathetic nervous system. He investigates the action of the vagus nerve on human emotional regulation and illustrates how, in specific situations, it inhibits the sympathetic nervous system response (arousal), operating as a brake, decreasing the heart rate and metabolic activity, maintaining a calm state that is the prerequisite for emotional regulation and social connection. Being connected to the muscles responsible for gaze and gesture, facial expression, sound recognition, mastication, sucking, breathing and head turning, the vagal system is considered responsible for social engagement based on somatosensory stimuli [7]. Sensory materials might be introduced into the classroom, in order to offer a sensory option to the child-led intervention: pillow sandwiches, lycra hugs, weighted blankets, crawling tunnels, play dough, and clay are resources that intervene into proprioceptive senses and activate the involuntary visceral responses of the autonomic nervous system. Yoga also has been researched to be beneficial in Post Traumatic Stress Disorder treatments [8].

#### How Drama and Child-Centered Play Therapy could help teachers

Winnicott, in his observational studies, highlighted: "the teacher aims at enrichment. By contrast, the therapist is concerned specifically with the child's own growth processes, and with removal of blocks to development that may have become evident" [9]. The aim of Child-Centered Play Therapy and Drama is to support both the teachers, in their educational practice, and the children in their life journey. Often children struggle with learning outcomes and find the educational setting in contrast with their spontaneous attitudes. According to Carl Rogers [10], the development of personality is the result of a cross-correspondence between the external world and the individual valuing process. A defence mechanism occurs when there is a deep discrepancy between the self-concept and the external world. Developmentally the children need unconditional positive regard from their caregivers and the important others, as a form of containment for their life learning process. When the unconditional positive regard is poor or inconsistent, children tend to abandon their true feelings, in order to meet the given standards. This process is known as introjection. Children's positive selfregard becomes conditional on satisfying the introjected conditions of worth. The child's total experience becomes divided, and anxiety arises. During Drama or Child-Centered Play Therapy, children have the possibility to feel safe and engaged, because their emotional internal valuing system is respected. Drama and Child-Centered Play Therapy are child-centered activities, and children are



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not required to perform a task or to successfully accomplish a goal. The unconditional positive regard used in Child-Centered Play Therapy and Drama offers children a safe place where to explore their organismic values and better understand how to reinforce coping strategies in case of discrepancies between self and external world.

### The psychobiology of Child-Centered Play Therapy and Drama

According to research about brain plasticity, during Child-Centered Play Therapy and Drama, children are not simply turning off their fear system and experiencing a relaxed moment of playful time. While playing, they are actively shaping their brains, activating the regions responsible for emotion regulation (right prefrontal cortex) and the vagus system. Through play and creative enactment, Drama and Child-Centered Play Therapy offer a safe environment where children can freely work on the five core competencies of Social and Emotional Learning: self-awareness, self-management, social awareness, relationship skills, responsible decision making [11].

## Conclusion

It is the school's responsibility to offer children a "window of affect tolerance" [1] within the educational setting, namely an optimal range of arousal for different positive and negative affects and motivational states. When performed by professionals with recognised training and proven skills in Drama and Child-Centered Play Therapy, an attuned therapeutic relationship develops. Where an empathic and attuned therapeutic relationship is created, within the group or in a one-to-one intervention, the developing mind of the children generates new connections (synaptogenesis) and new neurons (neurogenesis), modifying its structure and its functions. The play therapist and the drama facilitator work as "psychobiological regulators" [1] for the children, facilitating the developing brain in its connections with social and emotional regulation. In her practice with emotionally challenged children, an informed teacher must take into consideration the importance of Play Therapists and Drama Facilitators as professional support on social and emotional learning, in order to widen the educational experience and offer a holistic approach to children's development, where play and creativity are considered a powerful means of growth.

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