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Jungian Play Therapy: Bridging the Theoretical to the Practical

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Sexual abuse of young children may produce deep psychical scars: children may internalize the aberrant feelings, images, and bodily sensations associated with abuse, which obfuscates and obstructs psychological development (Allan & Bertoi, 1992; Allan & Brown, 1993). Jungian play therapy promotes psychical healing by emphasizing the salience of the positive therapeutic dyad and encouraging the emergence of the self-healing archetype that is embedded within children’s psyches (Allan, 1988). Once the self-healing archetype unfolds within the therapeutic container, children will play out themes significant to their inner struggles (Thompson & Allan, 1987). By reconciling polarities that surface within the playroom, Jungian play therapists facilitate children’s inner healing by working through complexes centering on internal struggles, which may include the dichotomies of good and evil, shame and pride, and condemnation and redemption (Kalsched, 1996).

Jungian Play Therapy Rationale

With its origins in psychoanalytic theory, Jungian play therapy focuses on the psyche’s role in personality development. Jung (1963) explained that the evolving nature of the collective unconscious, with its archetypal manifestations, influences the process of individuation. Individuation characterizes a progression from psychic fragmentation toward wholeness—the acknowledgement and reconciliation of opposites (Jung, 1964).

Jungian theory describes the instinctive yearnings in humans as archetypal remnants that are motivated by a psychospiritual proclivity for growth and soulful evolution. Jung (1959) believed humans have a capacity for conscious self-growth through innate symbols, or archetypes. Allan (1988) stated the self-healing archetype is an innate symbol that promotes psychospiritual healing by recognizing and achieving a balanced intrapsychic communication between the ego and the self.

Jungian play therapy is a spiritualized approach to counseling children and emphasizes symbolic meaning (Jung, 1959). Jung believed that children contain a transcendent function—an innate striving for wholeness and personality integration that occurs by symbolic identification (Jung, 1963). Symbols are produced unconsciously and appear most commonly in dreams, artwork, and fantasies. Jungians grasp children’s symbols only in the context of the macrosystem in which they are contained (Allan, 1988).

Allan and Bertoi (1992) stated that one reason Jungian therapy is appropriate and efficacious as a treatment modality when counseling elementary school children affected by sexual abuse is because of the specialized communication that occurs between therapists and clients. Allan (1988) described children’s understanding of the world through visual and symbolic methods. Children express their perceptions of the world most easily through graphic representations, such as picture drawings or symbolic play under metaphorical guises (Allan, 1988; Allan & Bertoi, 1992; Landreth, 2002; Oaklander, 1978). According to Piaget (1962), the symbolic function of play with elementary children bridges the gap between concrete experience and abstract thought most efficiently. Jungian therapists utilize different symbolic interventions, such as spontaneous drawings, to engage children in expressing wishes and repressed or unconscious emotions (Allan, 1988).

Role of the Jungian Play Therapist

The therapist’s role is an observer-participant, utilizing nondirective or semidirective techniques that harness children’s creativity in spontaneous drawings to bolster their available ego-energies (Allan & Bertoi, 1992). Jungians utilize art interpretation and analysis of transference to assess the archetypal or symbolic complexes within which children are operating (Jung, 1959). Jungian therapists facilitate children’s discovery and integration of the dark side of their personality, the shadow, in an effort to maintain psychic equilibrium and promote psychological health (Allan, 1988).
Jungian Play Therapy Techniques

The spontaneous drawing is a semidirective technique that assists young children affected by sexual abuse to express their thoughts and feelings in nonthreatening ways (Allan, 1988). According to Allan and Berto (1992), the purpose of a spontaneous drawing is to provide children a safe, therapeutic container in which they exhibit self-control and mastery by freely choosing the content of their drawings.

With autonomy, clients are allowed to symbolically and artistically abreact repressed emotional anguish, stemming from the abusive anomaly they experienced (Kalsched, 1996). As critical issues sometimes appear during the course of treatment, Jungian play therapists may choose a more directive drawing technique, emphasizing a topic germane to the client’s psychosocial healing and adaptation to the traumatic event (Allan, 1988).

When utilizing spontaneous drawings in play therapy, the client chooses the content to draw: perceptual distortions, reenactment of the trauma, and regressions may appear in children’s artwork (Allan, 1988; Allan & Berto, 1992). Moreover, compensatory symbols from the unconscious may appear in spontaneous drawings, expressing the psyche’s need for healing through fantasy. Compensatory symbols illustrated through spontaneous drawings may facilitate curative change through psychic integration and balance, by bringing the neglected areas of the unconscious to conscious awareness (Kalsched, 1996). Identification with salubrious symbols in play therapy activates the healing potential that exists in children (Allan, 1988); thus the self-healing archetype emerges.

Self-Healing Archetype

Jungian play therapists facilitate children’s activation of the self-healing archetype by encouraging creativity and accepting the inexplicable mystery and psychic energy associated with the unconscious symbol (Allan & Berto, 1992). Specifically, symbols tell children where they are by pointing to the area of the unconscious that is most neglected. Therapists unconditionally accept children’s symbolic and developmental position and support children along their therapeutic journey. After the self-healing symbol appears, Jungian therapists explore children’s inner language by reconciling the meaning of the symbol, utilizing a phenomenological perspective (Allan & Berto, 1992). Therapists assist children in reconciling the meaning of their symbols by asking them what the symbols mean and by asking them to externalize the accompanying inner dialogue associated with their symbols. Because children are free to draw and because play therapists empty all preconceived notions of the meaning of the healing symbols in play, therapists are able to facilitate an open path for children to experience inner healing and psychological wholeness (Allan, 1988).

Allan and Brown (1993) stated that once the self-healing archetype surfaces, children’s identification to the archetype and feelings associated with the archetype permeate throughout their inscapes. The image tells children where they are, and therapists trust a vis naturalis (a natural life force) is working between children’s minds and bodies to help release the power and emotion of living in an unconscious, mythical underworld (Allan & Berto, 1992).

Case Study

A 32-year-old male relative sexually abused Jana, an 8-year-old Native American female living in an underprivileged section of an urban city. Jana reported the sexual abuse to a teacher whom she trusted, and she was referred immediately to counseling.

Jana’s presenting problems were decreased socialization, mild depression, and diminished academic performance in school. Jana’s counselor, a Jungian play therapist, utilized spontaneous drawings from the initial counseling session. The counselor noticed Jana’s vivid and colorful creations were exquisite with detail. Jana symbolically depicted many of the issues related to the sexual abuse that she was unable to express verbally. Jana drew images of a white picket fence surrounding a two-story home with a yard and dogs and a bright sun with a smiling face. Jana’s therapist observed that her drawings conveyed wish fulfillment, which possibly depicted her need to feel loved in a safe way. After processing the pictures and exploring her individual perspective, the counselor conceptualized Jana’s drawings as internalizing positive affects of hope and stability in a fantastic, mythical world that Jana created.

Goals of Therapy

One of the primary goals of Jungian play therapy is to restore a child’s functioning to a developmentally appropriate level (Allan, 1988). The spontaneous drawing technique became a significant component of Jana’s therapeutic journey because it partially assisted her in restoring hope to her insecure outlook on life, following the feelings of uncertainty from the sexual violation that she experienced. Jana conveyed her unconscious or tacit psychic longings through
spontaneous drawings in a warm, therapeutic relationship, and her self-healing archetype emerged.

After contemplating the images, Jana internalized feelings of security and contentment, previously obliterated by the sexual abuse she experienced. Jana commented, “When I don’t feel good, I can think about the sun, ‘cause that makes me happy.” Once Jana internalized positive affects of her world as stable, and connected those internalizations to her outer world, Jana’s school grades began to show improvement. After approximately 6 months of therapy, Jana’s mother reported an elevation in Jana’s socialization—evidenced by an increased level of peer interaction in school and at home.

A second goal of Jungian play therapy is for therapists to facilitate children’s dynamic inner and outer struggles by supporting their heroic self-efforts in healing through symbolic play (Allan, 1988). The traditional paradigm of counseling children that utilizes talking methods, often associated with adult psychotherapy, is sometimes insufficient to guide a child through self-healing (Landreth, Baggerly, & Tyndall-Lind, 1999). Spontaneous drawings are an integral, nonverbal technique utilized in Jungian play therapy because drawings assist children in artistically externalizing emotions stemming from sexual abuse. Drawings and interpretations of drawings may enable children’s psyche to consciously identify the self-healing potential that talking alone cannot accomplish (Allan & Bertoi, 1992). Spontaneous drawings are one way to encourage children affected by sexual abuse to penetrate deep psychic substrates, where hidden fears and ambivalent feelings are made conscious and produce psychic healing (Allan, 1988).

**Conclusion**

Throughout the clinical play therapy process of bringing the unconscious to the conscious, and by connecting the inner world to the outer world in a nonjudgmental therapeutic relationship, children’s self-healing archetypes activate (Thompson & Allan, 1987). In the therapeutic container, Jana’s self-healing archetype emerged when she shared her individual creative art expressions with her therapist. After 6 months, the therapist noted the combination of the nonjudgmental therapeutic dyad, along with the spontaneous drawings that Jana enjoyed and frequently shared during play therapy, as effective in alleviating Jana’s psychic pain and reducing her morbid self-alienation stemming from the sexual abuse she experienced.

Once the recognition of opposites occurred within the therapeutic container, Jana felt empowered psychically and engaged in positive self-talk: “I feel better now, and I know it’s not my fault anyway.” Furthermore, play therapy facilitated Jana’s inner healing because of the frequency of the counselor’s affirmations—consistent verbal acknowledgements of Jana’s personal struggle with overcoming self-condemnation. The counselor’s affirmations were praises of Jana’s efforts: “Jana, you are putting so much effort and energy into this exercise. I just wanted to acknowledge that I appreciate your commitment to this process.”

Spontaneous drawings are a therapeutic mechanism utilized to reconnect children’s inner beauty and creativity with the sometimes painful external realities of human existence (Allan, 1988). Jungian play therapy espouses reintegration of all parts of the child—including happiness and sorrow, death and rebirth, light and darkness—into a functioning being that feels valued and loveable (Allan & Brown, 1993). The spontaneous drawing technique, coupled with a warm, nonjudgmental therapeutic relationship, benefited Jana by the process of connecting her ego to her inherently healing, numinous self. The process of Jungian play therapy facilitated Jana’s awareness of the slow transformation occurring within. She discovered inner strength to transform her pain and darkness into love and light.

**References**


