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Canadian Association for Child and Play Therapy

Contents

- Hello from the President Theresa Fraser CPT-S
- 3 Update from your Executive Director Elizabeth A. Sharpe CAE
- 4 Play Therapy in a Hospice Setting Brianne Thompson M.S.W. R.S.W
- The Fantastic Four in 'The Play Therapy Internship'
- 8 Monica Herbert Award 2013
- 10 A Tribute to Dr. John Allan Dr. Judith Bertoia CPT-S
- 14 Healing Spaces
 Theresa Fraser CPT-S
- The Difference Between the Professional College and the Professional Association Elizabeth Sharpe CAE



Hello from the President



Dear Members of CACPT

Here we are in 2014. 2013 was a big year of growth for CACPT.

We had certificate programs operating in Toronto, Kitchener and Winnipeg. Thanks to Elizabeth and Kip and the Education committee for their hard work helping so many Play Therapy students begin their learning journey.

The first ever CACPT Supervisor's training program occurred in Brampton with the support of Branching Out Enhanced Therapeutic Programs. This agency donated their beautiful Play Therapy space to four potential Canadian Play Therapy Supervisors over a weekend.

Branching Out also sponsored a Play Therapy Connections Event in January where we met to discuss the new College of Psychotherapists. Members travelled from as far away as Brantford to attend.

Online training for Continuing Education Credits will begin in February – look for the upcoming E-blast announcing course choices including an online Supervisor Renewal Course. This E-blast will also tell you how you can register.

Our 2014 conference is in Victoria and as usual; we have an amazing array of Canadian and American presenters. I have to share my appreciation to our Conference committee (Chaired by Board Member Cheryl Hulburd) for organizing an amazing event. The topics featured will appeal to new and experienced Play Therapists in a beautiful setting. Please join us. bring your friends and others who are interested in Play Therapy. For the first time ever we also will have a Parent education program about the value and efficacy of Play Therapy.

Finally, I have to thank Elizabeth and Kip from BPI Consulting. Their support and vision is both inspiring and reassuring. Also thanks goes to our Committee members and our Board members who donate countless hours to improving Play Therapy resources in Canada for you our membership. We also have CACPT Ambassadors who travel far and wide to promote both play therapy at local conferences and educational institutions.

In the coming year, we will have CACPT board position openings. This is a great way to share your expertise, learn new skills and be directly involved in inspiring the Canadian Play Therapy community.

One skill I have mastered is that I have learned how to chair a National Board meeting via telephone conference in under two hours. On one occasion while I have been President I did this while teaching in Ireland! I am proud of the connections our association has made with International Play Therapy Associations and I am not surprised that CACPT is a well-respected organization worldwide. It has been a privilege supporting this process as your President.

Thank you for your support. See you in Victoria!

Theresa Fraser CYW, M.A., CPT-S President

Canadian Association for Child and Play Therapy (CACPT)

Update from your Executive Director



Winter 2014

As we embark upon 2014 at the CACPT headquarters, we are reminded of all of the great successes that have been accomplished over the past year by our staff and volunteers. We thank all of you who participated with us as we grew CACPT not only in numbers but in information sharing. A key indicator of success in a not-for-profit association is not, however, how much information is shared. Social media statistics show us how much information is processed and how many people read the various publications, postings etc. of CACPT. But more importantly, how was the information that we shared applied?

Information vs. application.

Being the go-to association for play therapy in Canada is not easy in 2014. There is so much information out there. Everyone has access to hundreds of thousands of sites that will provide us with information on play therapy. To emphasize my point, I Googled "Play Therapy Courses in Canada". I got 805 thousand responses. No wonder potential members of CACPT find it very hard to sift through the information and decide what good information on play therapy is and what it is not. For students to determine their career path based on information delivered daily through social media sites is almost impossible.

At the top of the Google list however was the website of the Canadian Association for Child and Play Therapy (CACPT). Of 805 thousand sites to review on "Play Therapy Courses in Canada", CACPT came out on top. That's an accomplishment in itself! Why? Because it means that CACPT, as an association, is not only sharing information, but the application of that information in the form of hands on programs, developed services, real activity and creative, one-on-one instruction is being developed and shared. Application at CACPT is what it is all about. We not only deliver information but we determine what the best application is and we invite you in to apply what you learn.

I ask you this year to examine how you are applying the information shared with you through CACPT this year not only in your own practice but through CACPT. We often share information on our association and our needs internally. When you read this information, please think about getting involved by:

- Applying to join a Committee or the Board of Directors of CACPT;
- Become an Ambassador and help spread the word about play therapy in your own region;
- Attend the Annual Conference and AGM in Victoria, B.C. on April 25th and 26th;
- Consider the CACPT Play Therapy Certificate Program in various cities in Canada this year;
- If you are trainer in a child psychotherapy or play therapy related program, become an Approved Provider;
- Write an article or submit a best practice for Playground Magazine or our E-newsletter; or
- Write a note of thanks to someone from CACPT who made a difference in your life this year.

Wishing all of you the Very Best Year Ever for 2014! Happy Playing!

Elizabeth A. Sharpe CAE Executive Director

Canadian Association for Child and Play Therapy (CACPT)

Play Therapy in a Hospice Setting

By Brianne Thompson M.S.W. R.S.W

am a Social Worker at the Hospice of
Windsor-Essex. I have the privilege of working
with families who are currently facing a life
threatening illness. The Hospice in Windsor
provides support to people from point of diagnosis
on. One of the first questions I hear after a parent
is diagnosed is: "What about my children?" Play
Therapy has helped change my response to
ensure that children receive education, support
and the feeling of involvement.

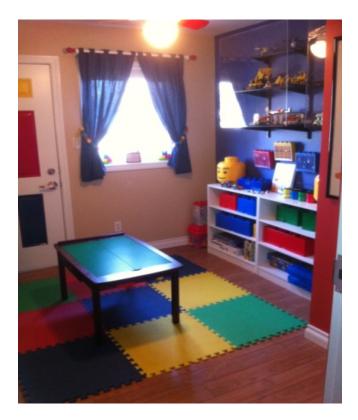
I attended the CACPT program for Levels 1, 2, and 3 May of 2012 in London. After returning to work with the new knowledge, I set up a play room and a travel kit and got started implementing this unique form of support.



It made sense when Play Therapists taught how the universal language of children is play. When I changed my style at Hospice from talk therapy to play therapy, I immediately saw the benefit. Prior to the Play Therapy program I had been working with a young child to work on recent trauma and anticipatory grief. When I came back to work I brought a new puppet, Henrietta the Hedgehog, to a session. The child told the puppet more than she had told me in four months of counseling. It was at that exact moment that I realized this could help so many children at Hospice.

The ways I use play therapy at Hospice are endless. I do 1:1 sessions in the playroom, at schools, in the hospital, or in the child's home; I run support groups and play groups for children to normalize their experiences and provide optimal support. I also provide education to parents on play therapy, filial therapy and the use of family play at home. On May 28th I presented at the Hospice Palliative Care Association Conference about the importance of involving children in plans of care, and the use of play therapy in a Hospice setting. I shared stories of how I have seen play therapy make a difference in treatment for families with hopes that medical professionals will be aware of how a diagnosis affects the entire family and how we can best support each member.

This unique form of support has assisted many children in understanding diagnosis, prognosis and bereavement. Hospice care has expanded to include many multi-disciplinary services to patients to focus on their physical, emotional, spiritual, mental and social symptoms. Play therapy incorporates all of the elements of holistic care, which makes it a positive fit. It has also increased communication within individual families and created a greater understanding of how



children are key players in a family going through a life-altering illness.

Often times, children are referred for emotional support at Hospice due to issues with behavioral management. However, frequently, the root of the issue is the child's anxieties around the family situation and lack of understanding about the illness. Through play, many children have expressed the fear of catching their parent's illness. The children were unable to verbalize that question, but felt safe within the play room to act out the scenario with dolls and puppets. Many of my clients are affected by a diagnosis of cancer. One of the main pieces of education for children I utilize is the "3-C's" where I review how you cannot catch cancer, didn't cause your loved one to get cancer, and you have people who care about you and will take care of you.

One of the forms of play therapy that I utilize very frequently is sand tray. I continue to be amazed with the work that comes out of the sand. When children release their feelings into the sand it provides the therapist with clues as to how to provide support. I find it helpful to be able to review some of the themes that I see through Sand Tray with my Play Therapy supervisor.

In addition to the play room at Hospice, we have a Lego room. We had a very special child at Hospice



who loved Legos. He got joy out of building wonderful creations. When he passed away, his family donated all of his creations and new Legos for other children to enjoy in their son's memory. I run a monthly Lego Club for children in order to encourage team work both with peers and at home. The room is also used as a play therapy treatment room.

There are various uses for play therapy. My hope is that therapists become more aware about how play therapy can help people at Hospice and other palliative care facilities. Parents and teachers are noticing a difference in children who received play therapy. Children are reporting less fears and anxieties as well when they are provided with age appropriate education and support in a safe environment. I am very excited to continue this work, and add on a couple new play therapy children's programs in the fall.

About the Author

Brianne Thompson M.S.W. R.S.W. is a clinical Social Worker at Hospice of Windsor Essex. She works with all of the children and young families at Hospice. She has also worked with children with Autism for eleven years through various organizations in the Windsor-Essex area. She is currently working on completing her Play Therapy supervision hours to become a certified Play Therapist.

The Fantastic Four in 'The Play Therapy Internship'

A True Learning Story by Play Therapy Interns: Michelle Baer, BA., MA. Creative Arts Therapies (Drama Therapy), CCC.; Sevda Bahtiyar, MA, PhD-ABD in Developmental Psychology; Alyssa Catzman, M.Ed. Counselling Psychology, CCC.; Mariya Kochetkova, Hon. B.A. Msy. Candidate in Clinical Psychology.



Imost one year ago, four Play Therapy students began an incredible and exciting journey, playfully known as, "The Fantastic Four in The Play Therapy Internship." They were graciously guided by their clinical supervisor, Liana Lowenstein, and supported by Edwin Schild at Regesh Family and Child Services in Toronto. The days were long, the nights longer, the challenges challenging, but in the end, they looked back and reflected on how far they had come, and how much they had learned! The Fantastic Four welcome you to join them for a glimpse into their journey, exploring the key lessons learned during "The Play Therapy Internship."

Lesson 1: Develop a Positive Therapeutic Relationship with the Client and Caregivers

It is often said that the therapeutic relationship is the most integral element of the treatment process, regardless of the modality of therapy. During our internship, we observed that this statement was particularly relevant when working with young children who had experienced loss, trauma, abandonment or other traumatic experiences in their lives. For many of these children, this adult-child relationship was safer and more predictable than any that existed in their lives outside of the playroom. As such, each intern focused on conveying a strong sense of acceptance and permissiveness with her clients, while nurturing feelings of self-efficacy and self-esteem by setting appropriate limits. Even though we were just beginners in developing our

clinical play therapy skills, we believed that as long as we had cultivated a positive therapeutic relationship, we had achieved our most significant goal. The importance of the client-therapist relationship was particularly relevant in one case, which involved a child who had been placed in two different foster homes prior to starting therapy. He was actively seeking an adult figure who would accept and value him unconditionally and whom he felt would not abandon him. We also learned from this case that, when working with children, cultivating a positive and trusting relationship with parents and caregivers was also vital to the process. In all of our cases, the greatest progress was made when therapists and caregivers collaborated; moreover, establishing a strong relationship from the get-go, lays the foundation for this partnership to be achieved.

Lesson 2: Blend Directive and Non-Directive Play Therapy Approaches

Throughout 'The Play Therapy Internship,' we had the chance to familiarize ourselves with various assessment tools and a number of play-based therapy activities. The activities we implemented in each session varied from client to client and week to week. Although each session was different in itself, one thing remained the same: we always began with a directive part in the session, followed by a nondirective part. We, the therapists, took the lead in the directive section, and then passed it to the clients during the second half. Splitting the sessions to include both directive and non-directive play therapy has provided an enriching learning experience. It was very interesting to note that some of issues that came up in the directive part also showed themselves in clients' play in the non-directive part. Also, the directive part has been very helpful particularly in the assessment phase of therapy. We believe that using a variety of directive activities is a great way to pinpoint the core issues and provides a strong direction for the treatment plan.

Lesson 3: Be Self-Aware and Explore Counter-Transference Issues in Supervision

As professionals beginning in this field, we recognize that it is important for us to be self-aware and reflective about what we each bring to therapy sessions from our own personal experiences.

During supervision, we talked about the counter-

transference we were experiencing with specific clients and families. We came to understand that there are many emotions involved when working with children, and at times it was challenging to take a step back and remain entirely neutral and unbiased. This was especially true when something was triggered from our own histories or lives. As interns and colleagues, we relied on one other's support to help us identify these triggers and channel our counter-transference in positive and adaptive ways. Our clinical supervisor, Liana Lowenstein, also helped us to recognize that, with more play therapy experience and honing our skills, we would continue to learn how to most effectively use our own "baggage" therapeutically to bring a richer, deeper perspective to our work.

Lesson 4: Improvise, Integrate and Play

A key learning opportunity for the Fantastic Four in 'The Play Therapy Internship' was integrating our previous professional experience with the techniques, skills, and theories of play therapy. In order to best serve our clients, we were adaptable and flexible, bringing with us, not only our "baggage" but also our "bag of tools" which came from a rich array of backgrounds: Drama Therapy to Education, Clinical Psychology and Counselling Psychology to Clinical Research Studies. While attempting to bring everything into harmony, there were moments with our clients when we felt at a complete loss as to what to do next. One such case example was with a young client coping with the death of his father. We were playing with foam swords, engaged in an intense battle, when suddenly he dropped to the floor and began playing with the dollhouse. The therapist had no idea what to do in that moment. It is likely that other beginner, (and perhaps seasoned!) clinicians have experienced these moments- there is a heavy stagnation followed by the vibration of possibility, anything could happen. There is a pregnant pause, awaiting us to give birth to the perfect solution, and yet it feels as though none will come. The therapist in this case, simply did what impulse led her to do, she dropped down on the floor beside him, tracking his play, and as he played out a scene of the father doll falling down the stairs to his death, was struck by how significant this moment was for him, as he replayed a trauma within the safety of play therapy. It is in these moments that we found spontaneity, improvisation

...continued on page 9

Monica Herbert Award 2013



Chris Conley CPT-S and Kathy Eugster CPT



Susan Garafolo CPT-A and Theresa Fraser CPT-S

t the Annual General Meeting of CACPT, the Monica Herbert Award was announced. This year, congratulations go to joint award winners Kathy

Eugster of British Columbia and Susan Garofolo of Ontario. This award has been inspired by the courage, devotion, hard work and commitment to working with and helping children that has been demonstrated by long time member and contributor to CACPT, Monica Herbert.

The establishment of The Monica Herbert Award allows the members of CACPT to recognize and appreciate the accomplishments and contributions Monica Herbert has made to the children she worked with. This award is an annual award which will recognize outstanding achievements in or contributions to the field of play therapy as demonstrated in one of the following ways:

Contributions to the play therapy literature through:

- Outstanding clinical work using play therapy;
- Research related to play therapy; and/or
- A written book, article, or paper

Kathy Eugster CPT

Kathy is a wonderfully respected colleague/therapist who has donated much of her time volunteering with her respective Associations all in the name of growing Play Therapy across Canada.

Kathy has Master of Arts (MA) Degree in Counselling Psychology from the University of British Columbia and is a Registered Clinical Counsellor (RCC # 2267) and a member of the BC Association of Clinical Counsellors.

Kathy joined CACPT in 2007 and became a CACPT board member in 2007. She was a Board Member for the BC Play Therapy Association from 2003 – 2009. She is also a Registered Play Therapist with the Association for Play Therapy (APT).

Kathy has had extensive specialized training as a parent education group facilitator, Level I and II EMDRIA-approved training in Eye Movement Desensitization and Reprocessing (EMDR) and is registered with the Crime Victim Assistance Program as an approved therapist all to ensure she continues to follow best practice.

She opened up her private practice in Vancouver in 2004 and has been helping children and families ever since.

Her volunteer work on the Board of CACPT has been extensive and includes being CACPT's Board Secretary for 4 years. Kathy also developed the model for the Approved Provider Program for CACPT and all of its policies and procedures for four years.

Susan Garofolo CPT-A

Susan has made outstanding contributions for 16 years, through her clinical work using play therapy in her full-time private practice, Play Therapy for Children, and through community work furthering the field of play therapy.

She was a contributor to the second edition of Theraplay: Helping Parents and Children Build Better Relationships Through Attachment-Based Play by Ann Jernberg and Phyllis Booth, and has written an article for the CACPT Fall 2012 Playground Magazine. Over the years, Susan has made several radio and television appearances, promoting the benefits of play therapy, and conducts "Playshops" in Canada and the United States helping families learn healthy fun ways to be with their children. In 2008 she was the spokesperson for Crayola Crayons "Kids' Choice" program. Since 1996 her website, "Play Therapy for Children" and Facebook fan page has reached out to hundreds of families and professionals worldwide.

Susan's full-time private practice began in 1996 and has been well received by the medical community in Halton Region, Toronto, and surrounding areas. Her work has been described as a successful "non-medicalized approach" to child mental health which has helped raise awareness of play therapy as a viable treatment modality.

Her work has also drawn the attention of the Halton and District School Board, the University of Guelph and Mohawk College where she has offered seminars about the benefits of play therapy.

and play to serve the most vital purpose – that of presence. It is in being present with our clients that we are able to respond authentically, genuinely, and offer them the experience of being deeply heard and validated.

We believe that our capacity for spontaneity and improvisation makes us better play therapists, as these elements are vital to play itself, but perhaps even more importantly, allow us to respond in the moment, and to discover new possibilities alongside our client when we are at an impasse. A quote about clowns from Jan Henderson, says that, "clowns are the embodiment of hope in the face of hopelessness, and possibility in the face of the impossible," (2005). We, as play therapists also do this, by providing opportunities for hope and possibility in being present, encouraging the client's own spontaneity, and nurturing improvisation as a response to the challenges they face.

It has been a wonderful adventure. We would encourage all play therapy students to take advantage of this internship opportunity. Finally, we, the Fantastic Four would like to share our sincere gratitude to Liana Lowenstein, Edwin Schild, and most importantly, our clients, for allowing us to go on this journey with them. Thank you!

**ANNOUNCING **

CACPT Research Award for Active Research in Play Therapy

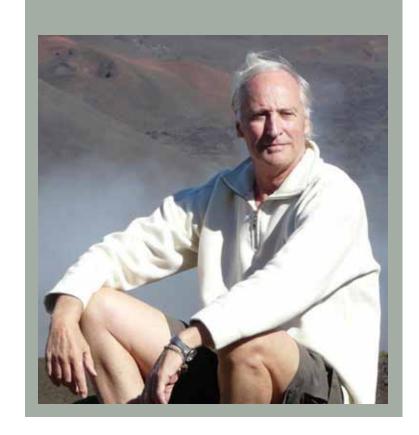
Approved By An Ethics Board – to be granted in 2014

Award Amount: \$1,000

Submit Inquiries and Interest to nrbowers@aol.com (Research Chair)

A Tribute to Dr. John Allan

By Dr. Judith Bertoia



"Why am I here?"

This existential question, from an anguished 10 year old referred for counselling because of outbursts angry enough to intimidate even some adults, could well have challenged a beginning counsellor. The child's belief was "to make my family and everyone else miserable." The pain in this child's voice was heartbreaking, especially when "It's eating my soul," described the rage's impact. Once drawn, this door-sized *Soul-eater* was absolutely terrifying, scowling down at us and intimidating in its fearsome presence.

Fortunately there was yet another presence in the playroom, that of the now retired UBC Professor Emeritus, Dr. John Allan. John was honoured with a Lifetime Achievement Award by the Association for Play Therapy in 2011 in recognition of his contribution to the field of play therapy. Although the number of individuals John has touched in various aspects throughout his career is vast, seven of us share a small sense of the impact he had on our lives here. We write this for two reasons: first, and most important, we wish to honour John and his enormous contribution, but second, it is also our hope that others who are educators, supervisors, and those working in the field of play therapy recognize their potential, never knowing how an interaction can resonate into the future.

Thankfully I had been blessed to train with John. He instilled in us a core belief that by following psyche's lead, the child will be guided into the work that needs doing. The child's psyche will provide the symbols we are destined to encounter and engage as we journey through the child's interior landscapes. By knowing how to hold the safe psychological space for these encounters and to creatively de-potentiate the toxic negative power and intense emotions such as this child's rage, John's students and supervisees had learned to how help children integrate the energizing and growth-promoting elements while letting go of components that consumed the soul.

John's wise counsel and gentle probing enquiries directed us to understand what processes were happening within us as therapists, and to deepen our own capacity to confront darkness, the self-defeating nervousness arising when faced with impassioned negativity in a frightened child's internal wilderness. His wisdom helped us understand the depth of the human psyche, its symbolic language, and its yearning to self-healing. John noted and encouraged strengths and potential in his students; often we had not yet recognized them ourselves. My own love of writing became clear through co-authoring with him. I came to believe that just as we, as students and therapists, had skills – such as creating techniques uniquely suited to a specific child – so too, the children had idiosyncratic approaches to address their own challenges, to grow, to follow their own destiny if we were open to them.

John offered strength when we felt shaky, wisdom when we felt adrift, and encouragement to follow our heart when we knew what it was that needed doing. He challenged us, supported us, encouraged our growth, and offered a sounding board for life decisions. Pertinent questions helped us clarify where our journey called us. By helping us ponder or find the next life undertaking, John helped shape how we worked with our clients, lived our lives with integrity, and how we, in turn, carried an opportunity to continue the legacy of our heartfelt learning whether through our connections with students, supervisees, readers, audiences, or even our family and friends.

He encouraged me to do my doctorate at Pacifica whose motto is "For the sake of tending soul in the world." I later realized I had already begun that tending through doing my graduate work with him.

John's students have gone on to impact not only their clients, but also vast numbers of individuals of all ages and groups globally.

Barry Macdonald, clinical counsellor, noted author, educator, and sought-after international speaker (including Ted Talks) is an authority and advocate for boys and creative educational reform. He shared this comment about John's influence:

"John Allan encouraged me to value intuition, sometimes even more than logic. I can still hear him saying: "Don't worry about capturing every detail of what is being said. Stay tuned to the moment and your inner response. Trust that anything you miss will be revisited again. Staying present is all that is essential." At many junctures in therapy I have felt engulfed by obscurity, and have appreciated John's gentle insight."

Another former student who shared her thoughts is Shoshana Levin Fox, a psychologist and play therapist currently living and working in Jerusalem, Israel.

"Many years since completing doctoral studies under John Allan's wise and sensitive tutelage, watchwords of his teaching still echo strongly. John taught us the intricacies of "the safe and protected space" of the therapeutic playroom. He shared his style of compassionate, effective professionalism, relaying how he would ask children warmly "Do you want to draw while we talk?" John reminded us that "to be an effective therapist you need both heart and muscle" and that we should be aware that we have "an educative function" as well.

The theorists whose work he emphasized—object relations theorists, Bowlby, Winnicott—were those who were concerned with the genuine inner life of the child. Beyond the relevant theory base, John himself served as a role model of the values a clinician should reflect: caring, sensitivity and integrity, or as he cautioned us: "Don't forget that you are first of all a human being—and then a professional."

The watchwords that John shared have become part of who I am as a clinician, working with children or supervising new therapists, passing along to a new generation the essence of his training that I was fortunate to have experienced."

Linda Shekerdemian, another of John's former students, is a Licensed Professional Counselor and Registered Play Therapist in Bend, Oregon.

"When I first met John in 1989 I had no idea the impact he would have on my life, both professionally and personally. It is very moving for me to think about how a single decision to attend UBC, made so long ago, would have such lasting and positive impact on my life and on the lives of the children and families I have worked with over these last 22 years. I cannot imagine a richer and more diverse professional life than the one that Dr. Allan launched me on when I graduated.

What a gift it was to be taught and supervised by someone with the compassion, humanity, humour and depth of understanding of the psyche and how it heals. I had no idea how much it would change my life and how passionately I would feel about the concepts I was introduced to by John

– the richness of the Jungian perspective. He showed us a world beyond short term techniques and the use of medications that I continue to use in my work to this day. I learned how healing was driven by the archetype of the Self, and how Play Therapy, the playroom, and the therapeutic relationship could provide a place for the Self to unfold and heal.

For many years, after graduating, I could hear John's voice in my head, guiding me, while I engaged with my clients and I still do at times. I am so grateful to have been a student of John's those many years ago. My relationship with him has gone from an awestruck student, to supervisee, being mentored as a new counselor, working together with other dedicated professionals to form the BC Branch of the APT, and finally I am honoured and grateful to consider John Allan a dear and treasured friend. Thank you John! The impact you have had on my life is like that stone that is tossed into a lake, the ripples will continue on and on."

John had guided a group of us to found the BCPTA and to host a joint conference with APT in Vancouver. Another member of our group was Sue Elliott. Sue went on to earn her Ed.D. in Educational Leadership and has held diverse roles in school districts as counsellor, educator, and staff developer. She has worked as an educational consultant since her retirement and now travels globally training educators in effective practice. Most recently Sue volunteered in Africa teaching English to adolescents girls and doing staff development.

"Dr. John Allan's deep seated value in the far-reaching impact of effective therapeutic intervention has always stuck with me. As a professor of counselling psychology, John's instruction of the importance of positive unconditional regard for the client, along with deep listening, paying attention to the messages of the unconscious that are evoked through play, art and dreams, have been a foundation of my work. I often reflect upon the passion with which John taught his students, and the fact that for each person he taught, the ripple effect would occur with the many lives we in turn would have the opportunity to touch. His talents for encouraging, while at the same

time challenging his students to stretch and strengthen their practice, are foundational to his many gifts as a teacher. These attributes were gifts that enhanced both my development as a school counsellor, and as a human being. John's integrity of ethical practice sits with me to this day – guiding me in my interactions with clients and colleagues."

Another classmate and co-founder of the BCPTA is Mary Anne Pare, also a sought-after play therapy educator, supervisor, and family and play therapist.

"John was our consultant and supervisor at UBC and PACE, a therapeutic child and family program. We met weekly to view session tapes and discuss cases. My clearest memory is when I showed a video of a child using a puppet to bite my arm. My reflection to the child was "Oh, you want to nibble on my elbow." John said, "No he doesn't, he wants to chew you up, to devour you, he wants to hurt you, to draw blood! Reflect on the aggression, the anger, the urges beneath the play." I went back to the playroom with a passport to the dark side and these little kids, who had all seen more struggle in their few years than I had in all of mine, went deeper and deeper into their journey from pain to healing.

Following two years of intensive training I had received in family systems and practice, I became similarly immersed in play therapy. I was reintroduced to the richness of the language of symbol. I learned to enter the remarkable world of the child's imagination and to stay at the level of feeling of the child. I discovered the potential for transformation and joy in play. And I felt hugely supported both by the PACE program and by John, as guide and mentor.

In the 25 years since that training, the direction of my career has been the practice and teaching of an integration of both models. And my biggest supporter in this endeavor has been John himself. Though traditionally trained as a Jungian psychoanalyst and play therapist, John has theoretical flexibility and awareness of the critical role of family systems in the child's life. Whenever I have felt daunted by the task I set for myself, his words of encouragement have been there to keep me going.

Finally, this chronicle is a story of heart, because John and I are celebrating 21 years as life partners. We continue to weave discussions about therapy and the mystery of the human soul into our daily practices of gardening and meal making, kayaking and cycling, singing and yoga, reading and poetry writing, parenting and grand-parenting. The learning and growing and changing continues to enrich our lives."

These individuals all initially encountered John as a teacher and supervisor while training at UBC. Eric Green's first experience was different. Eric, Faculty Associate Professor at John Hopkins and Associate Professor at the University of North Texas, is a prolific author and much sought-after keynote speaker and lecturer throughout North America and overseas. He also responds to natural disaster crisis and support with agencies such World Vision.

"I attended one of John's Jungian play therapy trainings at the University of North Texas in 2003. I had been studying Jungian psychoanalysis, child play therapy, and sand play at that point. I purposely attended John's lecture as I had read his book, Inscapes, several times and been quite moved by it. The training experience was outstanding. John, and his clinical case slides, along with his erudite wisdom (that came across as very accessible and humble), inspired me. The inspiration, not only of his words and legacy of work, but also the authenticity in the way he lives his life, has been a significant influence in my personal and professional development over the past decade, especially in my application of Jungian play therapy with traumatized children. Fiercely loyal and unwaveringly supportive, John's mentoring has guided me, my writings, and my research with children and their families in clinical practice as the Daimon¹ leads us to action in our own lives. It is his wisdom and humility that have, to me, mattered the most."

John was a dedicated teacher and supervisor, a skilled clinician and analyst, a mentor, friend, and strong guiding presence as we learned from him. He continues to shape our lives in less formal ways now, often through friendship and professional encounters, but his influence invariably touched us, all the clients we encounter, and those we touch and train in turn. That ongoing, powerful influence, unobtrusive yet integrated into our being is the sign

of a master teacher. Each of us can strive to share such soulfulness with those we teach or encounter in therapy. Current teachers may not recognize the soft chords they touch in their students or supervisees, nor do therapists always grasp the healing they have engendered. Yet beautiful melodies whisper into the future when they, like John, have resonated with exactly the right note in mentoring the next generation. The legacy of one conscious individual activates subtle music that reverberates farther and longer, initiating the souls of still others into healing harmony.

1. Daimon – A Spirit full of mana often an inward mentor, a source of inspiration, and a moral guardian to an individual.

About the Author

Judith D. Bertoia, Ph.D. is a Registered Psychologist, CPT-S and RPT-S, APT Approved Provider, BCPTA co-founder, and CACPT Board member. She is in private practice serving children, adolescents, couples, and families. In addition to her therapeutic and supervision practice, Judith is an author and educator, specializing in play therapy, parenting, and marriage enhancement.

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Healing Spaces

By Theresa Fraser CYW, MA, CPT-S

Healing Spaces is an ongoing article in Playground. If you would like your playroom featured please contact theresafraser@rogers.com. Theresa is particularly interested in hearing from therapists from other provinces. Thus far therapists from Nova Scotia, Ontario, Manitoba, British Columbia and the North West Territories have been featured in Playground. This edition of Healing Spaces is focused on The Northern Aurora Counselling Centre in Leduc Alberta.

The Northern Aurora Counselling Centre in Leduc Alberta provides clients with Play Therapy, Attachment based interventions, family counselling and group counselling. There are six clinicians who share the two Play therapy rooms one of which is an observation one way mirror. Three colleagues are Registered Psychologists, one a Provisional Psychologist one a Clinical Counsellor and a Masters of Counselling student. All utilize playful approaches to support the healing process of their clients. Therapist Tanya Johnson states that," healing, laughter, tears, growth create new perspectives and all are experienced within the warmth and safety of a beautiful play therapy room that contains puppets, a sandtray, a dollhouse, an art center and much, much more! I cannot think of another career path that would be so incredibly rewarding, not to mention fun."

Tanya, who grew up in South Africa, received her first level training at Rocky Mountain Play Therapy Institute but had also participated in other introductory workshops. While completing her graduate degree she worked with clients from the Cancer Treatment Centers of America. She also has training in Dyadic Developmental Psychotherapy Art Therapy and Traumatology to name a few.

She suggests that new clinicians volunteer in therapy centres so they make connections with other therapists and can gain supervision and experience. Tanya and her colleagues agree that working with the child's family is pivotal to



their work so they meet with families/caregivers approximately every 3-5 sessions. Tanya supports many children who have grief and loss issues. If needed, she will invite different family members into the therapeutic process in order "to optimize and nurture growth and development".

Tanya identifies that she utilizes Client Centred approaches as well as Narrative and Mindfulness based approaches. The centre's sandplay tools are well used. She states that "children tend to love the sandtray figurines which sometimes are used in the sandtray, and sometimes used as part of elaborative play that encompasses the large carpeted area in the play room. Her colleague, Tammy Schamuhn,

also shares the belief that children find the sandtray healing given "when a psychological injury has occurred, the use of sandplay creates a platform for healing and increased consciousness. Sandplay provides an opportunity to make abstract psychological processes more concrete and allow a space for client's move towards a place of healing and resolution". Tammy also shared that as her family work has increased she is "adding blankets and pillows as a place for children to seek comfort and to expand the play space to utilize aspects of Filial Play Therapy and Theraplay activities."

Tammy trained at Rocky Mountain Play Therapy Institute (Calgary) with Lorri Yasenik and Ken Gardner - both CACPT and APT Supervisors. Ken is Tammy's current Play Therapy Supervisor. Tammy identifies that supervision is key to clinician growth. She recommends that Play Therapy Interns get a supervisor they can trust and connect with for Supervision and Case Consultation. She also recommends recording sessions to use in supervison so you increase and enhance your Play Therapy skills.

Director Aspen Gowers did all three levels of the Canadian Association for Child and Play Therapy Play Therapy Certificate Program in Ontario in 2009. She has also completed all of her theoretical training to become a Sandplay Therapist through the Canadian Association for Child and Play Therapy. She is preparing to be certified with both organizations having Dr. Amanda Bell (CPT-S) provide supervision as well as Bea Donald (CAST). Aspen is the centre's founder and feels that the team is able to share the therapeutic space because they "understand how sacred it is." Though Aspen shared that Sandplay work is the main focus of her therapeutic work, she identified it really depends on where the client's psyche takes them during each session. The "clients participating in Play/ Sandplay Therapy tend to become very familiar with the collection and tend to notice if something has been moved or changed".

Agreeing with what colleagues have shared she suggests to therapists beginning their practices



that they can be mindful to choose warm colors and calm lighting when creating healing spaces so clients feel welcome and not overwhelmed or overstimulated.

All staff at the Northern Aurora Counselling Centre agrees that in order to effectively share a healing space, clinicians need to work "collaboratively to be very respectful of the space and of one another's needs within the space. Realistic issues like scheduling time, adding new toys, taking away toys, and maintaining a clean, beautiful space need to be addressed in a manner which honors the integrity and healing energy of the play therapy room". With this in mind the Northern Aurora centre offers support to their clients in many issues including attachment challenges, parent-teen conflict, divorce/separation, grief and loss, anxiety/depression, identity issues and relationship issues.

If you are interesting in visiting the centre go to: http://auroracounsellingservices.com/



The Difference Between the Professional College and the Professional Association

By Elizabeth Sharpe, CAE

Many Certified members of CACPT are also members of a regulated provincial "College" in the various provinces and territories across Canada. As a fully Certified member of CACPT, there is a requirement that you be affiliated with the professional college that best represents your profession whether it be Social Work, Counselling, Psychotherapy or another medically related discipline. It is important to understand why you would belong to CACPT as well!

In simple terms, the College is formed for the protection of the public. The Association is formed to support and protect the growth, advocacy, training and ongoing support of the member which is you.

To elaborate and more specifically:

The Value of Belonging to the Association – Canadian Association for Child and Play Therapy (CACPT)

CACPT is in place to speak on behalf of child psychotherapists and play therapists and to be the voice of the members for the profession provincially and federally.

The ways in which CACPT is able to support its members are as follows:

- Engage with like-minded alliances and associations to advocate on behalf of the members for legislative reforms.
- Provide critical analysis of government policies and practices that will impact the profession of child psychotherapy and play therapy in each province.
- Promote and enhance the understanding of child psychotherapists and play therapists in the clinical environment
- Promote the efficacy of play therapy through research in Canada and throughout the world.
- To support the member through the provision of training and continuing education programs.

- To engage in the practice of knowledge management for clinicians and therapists in order that they remain current in the profession.
- To provide a place to network with play therapists and child psychotherapists in similar areas of practice.
- To access services and products specific to the field of child psychotherapy and play therapy.

CACPT works for you, on your behalf as a professional child psychotherapist and play therapist.

The Value of the Regulated College

A regulatory body's primary duty is to serve and protect the public interest. Its mandate is to regulate the professional practice it represents and to govern its members.

Regulation of a profession defines the practice of the profession and describes the boundaries within which it operates, including the requirements and qualifications to practise the profession. The primary mandate of any regulatory college is to protect the public interest from unqualified, incompetent or unfit practitioners.

Regulation brings credibility to the profession. Practitioners of a regulated profession are subject to a code of ethics and standards of practice.

Self-regulation allows a profession to act as an agent of the government in regulating its members because the government acknowledges that the profession has the special knowledge required to set standards and judge the conduct of its members through peer review.

CACPT as a Standard Setting Body

Although CACPT also sets standards and performs within a professional Code of Ethics very specific to play therapy and child psychotherapy, it goes one step further in providing its members with additional credibility specific to this field of practice.



Kalffian Sandplay Therapy Training

"CAST trainings provide complete fulfillment of theoretical training hours required for certification with both CAST and the International Society for Sandplay Therapy"

Introductory level trainings available in the following cities:

Montreal - Dates pending

Contact: barbara.dalziel@sympatico.ca

Toronto (English) June 9-13, 2014 Contact: maria@mariaiosue.ca

For more information please consult our website: sandplaycanada.ca jeudesable.ca

Or email: maria@mariaiosue.ca

BCPTA-CAST Conference 2014

Play and Process: In Play, Sandplay, and Expressive Therapies

Hosted by the British Columbia Play Therapy Association and the Canadian Association for Sandplay Therapy

February 28 - March 2, 2014 UBC Robson Square, Vancouver, BC

With tremendous excitement, the British Columbia Play Therapy Association (BCPTA) and the Canadian Association for Sandplay Therapists (CAST) invite you to join our first joint conference. The conference committee of 2014 has prepared a unique and rich selection of presentations, including our keynote with Dr. Eric Green, which will both affirm your convictions and challenge you to new understandings of the work we share.

For more information and to register, please visit our website:

http://bcpta-cast-conference2014.com

CACPT Membership

The Canadian Association for Child & Play Therapy is the professional organization for those interested in child psychotherapy, play therapy and counseling with children. CACPT performs many important functions for its members, including:

Professional Standards

CACPT sets high professional standards for clinical practice. These standards help to ensure that skilled and effective therapy is available throughout the community. CACPT has a code of professional ethics to which each member must adhere. Policies and procedures are in place to govern CACPT and guide professional and ethical practices.

Specialized Training

CACPT sets standards of education and training for professional therapist as well as establishing programs of continuing education and training. CACPT examines and accredits programs and training centers in child and play therapy. CACPT has established a Play Therapy Certificate Program, which is an intensive program, in order to meet our member's needs. Information is available upon request. Bursaries are available for the CACPT Play Therapy Certificate Program. Information is available upon request.

Professional Publications

The Association periodicals are published to advance the professional understanding of child and play therapy. Articles are published on clinical practice, research and theory in child and play therapy. CACPT members receive these periodicals as a membership benefit.

Membership Benefits

1. Specialized Training

CACPT members receive a discount at all CACPT sponsored conferences, workshops and other events. The CACPT Play Therapy Certificate program is an intensive program available to members.

2. Publications

CACPT members receive the Association's periodicals including e-newsletters and Playground magazine as a membership benefit.

3. Discounts

CACPT is involved in arrangements with an increasing number of organizations, i.e. bookstores, toy stores, to provide discounts to Association members.

4. Insurance

CACPT provides professional liability insurance packages for its members.

To join go to www.cacpt.com and click on Members.

Cutting Edge Training in Child and Play Therapy



CACPT Play Therapy Certificate Program

The Canadian Association for Child and Play Therapy (CACPT) offers cutting-edge training in Child and Play Therapy. Sign up for oneday courses in any of our locations, or apply to Levels I, II or III (or all) in Kitchener in Spring or Toronto in Summer. Earn 180 educational units for the six week program. The six-week program is one of the steps needed to become a CACPT Certified Child Psychotherapist & Play Therapist.

For further information on courses or on becoming certified as a Child Psychotherapist & Play Therapist please visit our webpage at www.cacpt.com or call CACPT at 519 827-1506.





Courses are offered in the following locations:

- Waterloo, May 12 to June 20, 2014
- Toronto, July 7 to Aug 15, 2014
- Winnipeg, April 3 to 7, 2014

The application deadlines for the Play Therapy Certificate Program are:

- March 15 for Waterloo
- May 15 for Toronto so apply soon!

Applications are accepted after the deadline for an extra \$100 fee but priority is given to those who apply by the deadline. If you are interested in applying for an individual workshop, there will be limited space so you are encouraged to register early.

Some of our cutting edge courses include:

- Trauma-Focused Cognitive-Behavioral Play Therapy
- Autism Spectrum Disorders
- Disruptive Behavior Disorders
- Anxiety
- Sexually Abused Children
- Children with Sexual Behavior Problems
- Bereaved Children and Children of Divorce
- Sandtray
- Attachment Theory and Therapy
- Theraplay
- Family Play Therapy

