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THERAPIST INTERACTIVE PLAY WITH A CHILD
***NOT FOR DIAGNOSIS**

Interventions listed are drawn from child development practices and are intended to help children progress developmentally; to better explore and express feelings; and to help children work through anxiety producing life experiences and/or experiment with new behaviors (primarily interactive social behaviors).

These interventions should not be used for diagnosis per se, since they can lead children to create scenarios that may have not previously occurred. Interventions/interpretations in this approach are often leading the child toward scenarios and feelings the therapist already is aware of from intake and client history; in effect the therapist is guessing (appropriately) that the play may symbolize or otherwise express an underlying issue already identified. Used diagnostically (inappropriately), the therapist could end up creating memories of experiences that did not occur.

Basic Role: Observe and then make developmentally appropriate decisions.

Interactions and questioning techniques- avoid yes/no questions.

INTERVENTIONS:

1) Describing what child is doing.

(Providing language that the child may not otherwise self-produce due to developmental or language immaturity).

Example: (for a preschooler) "You're having the daddy leave the room" (if the child has already identified the doll as the daddy- do not name the doll as the daddy for the child). "You're putting lots of toys in there." "Looks like you are keeping your pieces close to the base."

2) Asking child to describe what he/she is doing.

(When an individual explains what he/she is doing, he/she usually end up understanding it better or develop great insight).

Examples: "What are you doing with these?" "What is this for?" "Tell me, what are you making?" "What are you doing with the cars?"

3) Asking questions that invite children to examine their own play and look for new possibilities.

(Focusing and extending the play can lead to new possibilities and/or to areas that the child wishes to express- this can give the child permission to do so).

Examples:

Focusing: "Look at this piece." "What do you think the baby wants?" "What's happening over here?" "What are the dinosaurs doing?" "I see a big space over here."

Extending: "What happens next?" "What about these dolls?" "What else do they want?"



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4) Asking questions that encourage children to put together their information in order to arrive at an answer.

(Facilitating higher order thinking may help children come to some resolution).

Examples: "So, what do you think that means?" "What would be the best way?" "With all those chairs, what could they want?"

5) Asking questions that help children look for many possible ideas or solutions to problems.

(Alternative thinking is a higher order of cognitive development that may allow release for absolute thinking that precludes healthy resolution).

Examples: "What's another reason she did that?" "What else could he be looking for?" "What's another way to build that?" "What else can we do with this?"

6) Asking questions that encourage the child to explore their feelings and emotions.

(Self-awareness facilitates choices in behavior; questions that encourage exploration of feelings inherently also validate feelings).

Examples: "How do you feel when you win? lose? got frustrated?" "How does the doll feel when he can't find his mommy? How would you feel if you couldn't find your mommy?" "It must be scary for the puppy now. What do you think?" "How does it feel to be the baby? the mommy? the big brother?" "I bet you like to win, huh? How does it feel?"

7) Modeling expression of feelings or of behaviors that may be beneficial to the child to experiment with.

(Child look to adults for behaviors that he/she often copies- from Bandura's social learning model).

Examples: Therapist may talk gently to the doll that has misbehaved. Therapist may put the character on time out using a firm voice that explains why (in terms of behavior) time out is necessary. Therapist may pretend to make up with another character- or have an argument (without abusive language or behavior). Therapist may set firm and fair limits.

8) Self-disclosure by the therapist can encourage the child to disclose as well.

(Through therapist's self-disclosure, children may get a sense of permission to broach certain topics themselves).

Examples: "I used to get mad at my father and we would argue all the time." "I had a teacher once who was so mean to us." "I used to fight with my brother like that a lot." "I remember once when my friend really hurt my feelings."

Extending and Enriching Children's Play

Adding new materials, equipment, and props,

Asking questions, offering suggestions, answering questions,
bring in outside resources.



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Biography

Ronald Mah, therapist and educator, combines concepts, principles, and philosophy with practical techniques and guidelines for effective and productive results. He uses humor and stories from his many experiences to illustrate important points in a stimulating and highly motivating and engaging style.

A Licensed Marriage & Family Therapist, his experiences include: Asian-American community mental health, Severely Emotionally Disturbed mental health & school partnership programs, vocational programs for at risk youth, welfare to work programs, clinical consulting & cross and multi-cultural training for Head Start, other early childhood education programs, social services organizations, & mental health agencies, supervising a high school mental health clinic, training and supervising therapists, private practice in Castro Valley, author of the Asian Pacific Islander Parent Education Support curriculum.

Professional Education experiences include: 16 years in ECE, including owning and running a child development center for 11 years, Kindergarten, elementary, & secondary teaching credentials and experience, ethnic studies curriculum writer, community college instructor, Masters of Psychology instructor, and former member Board of Directors of the California Kindergarten Association and of the California Association of Marriage & Family Therapists.