

The Contribution of Play Therapy to Children With Autism Spectrum Disorder

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Abstract: Play is a fundamental and integral activity of human nature, especially during childhood. It plays a crucial role in children's development and education, providing opportunities for learning, creativity, socialization, and emotional awareness. This study focuses on the contribution of art therapy, specifically play therapy, and its benefits for children with Autism Spectrum Disorders (ASD). The subject was chosen to highlight both the usefulness and significance of play therapy for children with typical and atypical development, as well as the essential role of play in the overall development of children with ASD. The research was conducted through the search, collection, and selection of international scientific studies, articles, and books related to this subject. The findings emphasize the benefits that play therapy can offer in various developmental areas for children with ASD.

Key words: play therapy, play, Autism Spectrum Disorder (ASD), autism

1. Introduction

Art is a powerful medium through which emotions, inner desires, and thoughts can be externalized. It acquires therapeutic properties as it touches aspects of the unconscious mind, thus triggering a process of personal development. The journey of self-discovery can be achieved in many ways, one of which is play, both for children with typical and, primarily, atypical development. Play is considered a vital factor for the holistic development of children, as it provides multiple stimuli that contribute to their overall growth. Through play, children practice a comprehensive set of skills, laying the foundation for their future well-being (Drewes & Schaefer, 2015). Moreover, play has been recognized as an effective therapeutic method for children with Autism Spectrum Disorder (ASD), as it addresses their challenges in a playful manner. This study examines the contribution of play therapy, a method that combines art and play, in supporting children with ASD. The aim is to explore and highlight its usefulness, particularly in developing social skills in children with ASD. One of the key characteristics of this disorder is difficulty in social interaction, as well as the presence of stereotypical behaviors (Guldborg, 2016). Play therapy uses play as a means of expression, which, beyond entertainment, provides insight into the child's inner world and thoughts. To be effective, play therapy must be tailored to the child's abilities, encouraging their active participation and leading to awareness and personal growth (Kavoura, 2022). This study presents the potential benefits of play, and more specifically therapeutic play — play therapy — examining how it functions as a therapeutic tool for children on the autism spectrum.

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2. The Contribution of Play to Child Development

Child well-being is a fundamental factor in shaping a balanced personality, ready to integrate into society. Play has a crucial role in children's lives, as it enables them to experience feelings of freedom, joy, and satisfaction. It serves as a tool through which children engage in activities that foster creativity, stimulate their imagination, and develop problem-solving skills. Through the sense of enjoyment, children have the opportunity to experiment, explore the world, reflect, and gain new experiences (Drewes & Schaefer, 2015). At the same time, as Erikson highlights, play alleviates anxiety and enhances the feeling of catharsis. Moreover, it is a voluntary and optional activity, established within free social rules and defined by spatial and temporal boundaries. In conclusion, play contributes to the holistic development of the child, which serves as the foundation for achieving well-being (Schaefer & Drewes, 2015).

There are various types of play, each focusing on developing different skills or a combination of them. According to Ginsburg (2007), play is categorized into physical, social, role-playing, and constructive play. The benefits of each category are determined by the specific developmental goals achieved through a child's engagement with each type. More specifically, physical play enhances motor skills, promotes a healthy lifestyle, reduces obesity, and improves the child's overall physical condition. Role-playing or pretend play helps develop social skills through communication and interaction, as children take on roles and engage in imaginative scenarios. This type of play also fosters creativity, as children must use their imagination to adapt to different roles (Lillard et al., 2013). Constructive play involves activities such as building with LEGO or engaging in artistic projects, which support problem-solving techniques and enhance logical reasoning and spatial organization skills (Ginsburg, 2007). Lastly, social play strengthens both soft skills, such as adaptability and emotional intelligence, and social skills, including empathy, cooperation, and conflict resolution. It is important to maintain flexibility in categorizing types of play, as multiple forms often coexist simultaneously during a child's activities (Ginsburg, 2007).

Regardless of the category of play, it serves as a therapeutic tool, offering benefits through communication and interaction, as well as through the sense of satisfaction that emerges upon completing the playful process. Various theories confirm that play is not only an enjoyable method for understanding emotions but also a means of self-expression and conveying feelings to others. Additionally, it serves as a medium for cultivating social skills related to social norms and, consequently, for strengthening personality development (Morfini & Samaras, 2015).

3. Therapeutic Play

3.1 Play Therapy

Therapeutic play, as defined by the Association for Play Therapy in Ray et al. (2001), is "the systematic use of a theoretical model to create an interpersonal process in which trained play therapists utilize the therapeutic powers of play to help clients prevent or resolve psychosocial difficulties and achieve optimal growth and development." This definition highlights that the use of play within a therapeutic framework is an ideal intervention for children facing social difficulties (Ray et al., 2012). Therapeutic play — play therapy — was first implemented in the 1920s by psychoanalysts. Therapeutic play — play therapy — was first implemented in the 1920s by psychoanalysts. However, it is no longer exclusively associated with a psychoanalytic approach. The therapeutic value of play was initially recognized by Winnicott (1971), who stated, "Play is in itself a therapy."

Nevertheless, Axline (1981) was the first to recognize that play, as a therapeutic tool, serves as a form of communication for children. She clarified that: “Play therapy is based on the fact that play is the natural medium of self-expression for a child. It provides an opportunity for the child to ‘play out’ their feelings and problems, just as in certain types of adult therapy, an individual ‘talks out’ their difficulties.” Focusing on the management of emotional difficulties, Guerney (2001) defined play therapy as a form of treatment in which children engage in play activities of their choice. These activities enable them to recognize and address their behavioral and emotional challenges.

Play therapy sessions aim to foster development through imitation, theory of mind, and skills cultivated in symbolic and functional play. More specifically, children enhance their social interaction through the technique of joint attention. This technique helps children move beyond fixation tendencies and adopt a more “open” perspective toward their environment (Satler et al., 2016). In other words, play serves as a tool that reshapes emotions and, consequently, the child’s behavior during therapy (Schaefer & Drewes, 2015). According to the Association for Play Therapy, play therapy is not entirely identical to spontaneous play. However, in this context, play is structured under an educational and systematic approach. Through this process, social skills improve — children learn to communicate their desires, exchange opinions, and engage in dialogue. This results in increased self-confidence, enhanced self-esteem, and ultimately, a redefinition of self-image (Landreth, 2012). Through play, children express accumulated feelings of anxiety, anger, fear, and insecurity, allowing them to process, understand, and ultimately confront traumatic experiences (Axline, 2011). By becoming aware of their emotions, they take initiative, gain psychological strength, and develop skills for independent living, self-awareness, and emotional resilience.

3.2 Art Therapy Techniques

Play therapy is part of the broader category of art therapies, which use art as a means of expression. Other forms in this category include drama therapy, music therapy, dance therapy, and visual arts therapy. These are alternative psychotherapeutic approaches that rely on active participation to promote self-awareness, understanding, and self-acceptance. As a result, they contribute to personal transformation, the improvement of interpersonal relationships, emotional regulation, and ultimately, the enhancement of self-image and overall well-being (Filippou & Karantana, 2010).

3.3 Methods of Play Therapy

There are numerous methods of play therapy, many of which have also been used in collaboration with adults. However, the most prominent approaches are classified into structured (directive) play therapy and non-directive play therapy. In 1942, Carl Rogers introduced non-directive, child-centered play therapy, which is based on the belief in human potential for growth and the innate desire for self-determination (Landreth, 2012). Landreth (2012) states that non-directive play therapy does not involve any form of control over the child, nor does it seek to impose change. Instead, it is based on the theory that behavior naturally reshapes and evolves through the child's innate desire for self-discovery. In this approach, the child independently selects the type of play, leading to self-awareness and, consequently, behavioral change.

On the other hand, in directive play therapy, the child is guided by the therapist, who takes the initiative in selecting the type of play, determining the duration of activities, and shaping the roles to be explored. In this structured approach, the therapist takes a more goal-oriented role, and the play process becomes more defined, as

it is no longer entirely child-led.

4. Autism Spectrum Disorder

4.1 Definition

The concept of autism is difficult to define universally, as it encompasses a wide range of behaviors related to social interaction, often presenting unique challenges. Key characteristics of autism include difficulties in social interaction, repetitive behaviors, stereotypical speech, and limited interest in the surrounding environment. The variability in these traits and their degree of manifestation make each individual unique. This broad spectrum of characteristics results in a diverse population with differing symptomatology. However, a common trait among all individuals with Autism Spectrum Disorder (ASD) is their difficulty in social communication (Heward, 2011). According to the American Psychiatric Association (2013), ASD is defined as a neurodevelopmental disorder characterized by repetitive, stereotypical behaviors and challenges in communication skills and forming social relationships.

4.2 Social Difficulties

Children with Autism Spectrum Disorder (ASD) often exhibit challenges in developing social skills. Research by Greenspan & Weider (2006) identified difficulties in emotional expression and social closeness. This characteristic has led to the misconception that individuals with ASD choose to avoid social interaction and engagement. However, when placed in a safe and supportive social environment, where they feel comfortable expressing their desire for communication, these individuals show significant improvement in their social interactions.

Preschool-aged children with Autism Spectrum Disorder (ASD) often struggle with both verbal and non-verbal communication, making them less likely to initiate conversations. Additionally, limited eye contact and difficulty responding to their name further hinder their ability to engage in social interactions. On the other hand, older children face challenges in forming relationships due to discomfort in social settings and difficulty understanding socially accepted communication norms (Koegel et al., 2012). These difficulties can make it harder for them to build and maintain meaningful connections with others.

4.3 Communication Difficulties

Many individuals with Autism Spectrum Disorder (ASD) experience delayed or impaired language development and difficulty understanding communication codes. Additionally, stereotypical and repetitive language patterns are often observed, which can interfere with effective communication (Wolfberg, 2015). Tuchman (2008) further highlights that individuals with ASD may exhibit a wide range of intellectual functioning, from low to high. They often face challenges in understanding spoken and written language, particularly with figurative speech and idioms, as well as reduced attention span, difficulty making decisions, and struggles with taking initiative. These deficits in communication skills often lead to social withdrawal and difficulty engaging in play that fosters communication and interaction. Due to these challenges, children's participation in play is not as expected, and the outcomes may not align with typical developmental milestones. Children with Autism Spectrum Disorder (ASD) typically exhibit a reduced ability for spontaneous expression and imitation, which further hinders their ability to fully engage in social and interactive play.

4.4 Sensory Difficulties

Research by Leekam et al. (2006) concluded that the majority of children with Autism Spectrum Disorder (ASD) have not fully developed sensory integration. Sensory thresholds significantly impact an individual's functionality in daily life, affecting their mood and overall routine. Individuals with ASD often exhibit: increased pain tolerance, hypersensitivity to touch, strong reactions to certain stimuli. Children with ASD are often aware of their sensory preferences, leading them to choose play activities that fulfill their specific sensory needs (Wolfberg, 2015).

5. The Role of Play Therapy in Children with ASD

Guerney (2001) established Child-Centered Play Therapy (CCPT) as a therapeutic approach that helps children manage behavioral and emotional distress. Interventions become more accessible and effective when integrated into play, making therapy more engaging for children. Research by Guerney (2001) demonstrates that play therapy can enhance the emotional and social development of children, both with and without autism. Similarly, Josefi & Ryan (2004) highlight that in non-directive play therapy, children with Autism Spectrum Disorder (ASD) have the autonomy to choose the areas they want to improve, the difficulty level of activities, and the frequency of therapy sessions, fostering a sense of control and self-direction in their therapeutic process. According to Josefi & Ryan (2004), when children with Autism Spectrum Disorder (ASD) take the initiative in non-directive play therapy, they enhance essential life skills, including decision-making, self-regulation, and problem-solving. This approach directly targets areas where children with ASD often face significant challenges. On the other hand, structured play involves specific games, objects, or activities designed with predetermined goals. In ASD therapy, structured play is commonly used to teach skills such as taking turns, communication, and problem-solving. Activities may include puzzles and board games. Research by Baranek et al. (2015) suggests that children with ASD who engage in more unstructured play show better social and cognitive outcomes than those who participate in fewer free-play activities.

Neely et al. (2016) identify the following core aspects of play therapy for children with Autism Spectrum Disorder (ASD): 1) targeted intervention: Play therapy serves as an interventional method that guides the child through specific goals, promoting productive engagement. Self-Discovery & Environmental Awareness: Through therapeutic play, children explore their surroundings and the world, strengthening self-awareness. Building Relationships: Play acts as a catalyst for social connections, fostering comfort with people, speech, toys, and the environment. Holistic Development: The ultimate goal is to support the child's cognitive, social, and emotional growth.

6. Research Methodology

The search for articles was conducted using the Google Scholar search engine, and the keywords specified for data retrieval were: play therapy, play, Autism Spectrum Disorder (ASD), autism. The articles found were seven in total. All of them are in English language and relevant to the research topic. All studies were conducted on children up to 12 years old. Additionally, all the articles are recent, having been published within the last decade. Regarding the research samples, they vary in each study. However, all studies involve children attending mainstream schools. In other words, children with Autism Spectrum Disorder are independent. Finally, the research topics differed from one another, meaning that the objectives were defined according to the specific needs of each study.

6.1 Review of Research Studies

Table 1 presents seven recent studies regarding the application of play therapy in children with ASD.

| Research | Research sample | Type of play | Play therapy techniques | Conclusions |
|----------------------------|---|---------------|-----------------------------|--|
| Wolfberg et al. (2015) | 48 students | Symbolic play | Group play therapy | • Development in social play |
| Henning et al., (2016) | 5 students with ASD 5 students without ASD | Social play | Group play therapy | • Improvement of social skills |
| Salter et al. (2016) | 3 students | Social play | Child-centered play therapy | • Development of social and emotional skills |
| Barajas et al. (2017) | 9 students | Symbolic play | Cognitive play therapy | Advancement in play and interaction |
| Muller & Donley (2019) | 4 students | Symbolic play | Directive play therapy | Improvement of social skills Enhancement of emotional intelligence |
| Daniel (2019) | 1 student | Motor play | Child-centered play therapy | Development of self-regulation and independent living skills took place Development of positive social behavior |
| Schottelkorb et al. (2020) | 12 students (Intervention group) 11 students (control group) | Symbolic play | Child-centered play therapy | Reduction of repetitive and stereotypical behaviors |

6.2 Results

Regarding the studies presented, it should be noted that the research samples confirm the theoretical framework, namely that the application of play therapy can be effective for children with ASD. More specifically, the studies by Henning et al. (2016), Muller & Donley (2019), and Salter et al. (2016) reported improvements in social skills. Beyond this finding, some studies showed that participants reduced stereotypical behaviors, while others demonstrated progress during play. Daniel's (2019) study concluded that play therapy contributed to the development of self-regulation skills. The participant in this study followed rules and instructions and adapted to the flow of activities. Additionally, Schottelkorb's (2020) research led to a more general conclusion regarding an overall reduction in ASD-related symptoms.

Out of the seven studies recorded, three employed the child-centered approach, which revolves around the child's preferences and follows a non-directive method. In contrast, one study, conducted by Muller & Donley (2019), utilized the directive approach. Two studies implemented group play therapy, which led to conclusions focusing on improvements in social play. The children participated in group settings and successfully engaged in cooperative play. Lastly, one study applied a cognitive play therapy approach. Most of the studies incorporated symbolic play combined with social play, except for Daniel's (2019) study, which utilized physical play.

All studies concluded that play therapy has a positive impact on children with ASD, helping them overcome social barriers that hinder interaction. Through play therapy, children become more functional in communication and the development of interpersonal relationships.

7. Conclusions

The benefits of play therapy for children with ASD stem from the fact that play is an accessible activity for

all children. When adapted to a child's capabilities, it can yield therapeutic results through targeted interventions. A structured, playful, and therapeutic framework provides children with a sense of security, enabling them to develop and refine their social skills, become more tolerant of different stimuli, and enhance their flexibility in social interactions. This process fosters greater patience and resilience in challenging situations. Play serves as a tool for promoting social interaction by encouraging behavior imitation, scenario creation, and role-switching. Under the therapist's supervision, children have the opportunity to develop concentration, initiative, decision-making, and emotional self-regulation skills. They learn to follow rules, self-regulate, solve problems, and explore the world around them. Each child progresses at their own pace, as feeling comfortable in the therapeutic setting is essential for their success. Establishing a trusting relationship is a fundamental prerequisite for effective therapy. This relationship must be built on security and sincerity, allowing children to express their thoughts and concerns. The quality of this relationship directly influences the therapeutic outcomes. In conclusion, play therapy is a method that enhances the socialization of children with ASD and helps them form functional personal relationships by addressing maladaptive behaviors. It serves as an alternative channel of expression for both verbally communicative children — helping them overcome social barriers — and non-verbal children, enabling them to learn how to express their needs. The successful implementation of this therapeutic approach requires specialized and well-trained professionals who can create the right environment for improvement and growth. Future research on play therapy for children with ASD could explore its application in multicultural settings. Additionally, narrative therapy could be incorporated into play therapy as an area for further investigation.

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