

## PLAY THERAPY BEHAVIORS OF SEXUALLY ABUSED CHILDREN

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### Purpose of the Study

The purpose of this study was to develop a comprehensive list of behaviors that children who have been sexually abused may exhibit within the play therapy setting. Whether children in various age ranges and of different gender display different behaviors was explored.

### Summary of Methods and Procedures

A survey instrument was developed using a process that included three major steps. First, a list of play therapy behaviors of sexually abused children was developed from a review of the professional literature; second, a panel of renown experts in the field was used to establish internal validity; third, a field test was completed to establish external validity.

The resulting survey instrument contained 140 items of play therapy behaviors. A Likert scale was developed with the following identified labels: 1. Never, 2. Very Seldom, 3. Seldom, 4. Often, 5. Very Often. This Likert scale was added to each gender and age category of Male, Age 3-6; Female, Age 3-6; Male, Age 7-10; Female, Age 7-10. Therefore, each respondent rated each play therapy behavior four times. There were 12 demographic items regarding the respondent, such as age, gender, experience, training, as well as presence of water and sand in the playroom.

All respondents were entered into a drawing of a relatively expensive play therapy toy (\$132.00) as an incentive to return the survey. A respondent was selected by random drawing to receive the bobo.

Principal Components Analysis with Varimax Rotation was applied to identify clusters of play therapy behaviors that were highly related to one another for each of seven groupings (All Children; All Males; All Females; Males Age 3-6; Females, Age 3-6; Males, Age 7-10; Females, Age 7-10). The factor analysis also identified those play therapy behaviors which were not related to any clustered behaviors. Although a loading of  $\pm 0.30$  is the generally accepted minimum level to obtain significant findings (the data for this study was reviewed at  $\pm 0.30$ ,  $\pm 0.50$ ,  $\pm 0.55$ , and  $\pm 0.60$ ). The benefit of reviewing the items at several loading factors was the ability to choose the level which best demonstrates significant correlation between items for various uses.

### Results and Conclusion

Of the 2,541 surveys sent to the Association for Play Therapy membership, 786 were returned. To insure the strongest and most robust findings possible, it was determined to utilize data from the play therapists most experienced in working with sexually abused children. Therefore, only the 249 respondents who had worked with 16 or more sexually abused children were included in the statistical analysis.

The results of this research indicate there are identifiable and highly interrelated play therapy behaviors of sexually abused children. When reviewed at the typical loading of  $\pm 0.30$ , all 140 items of play therapy behavior showed interrelatedness. This important finding validates what many play therapists in the field already knew from their clinical work: there are many behaviors displayed in the play therapy room which are displayed by children who have experienced sexual abuse. It also validates the robustness of the 140 survey items. It is significant that this research also identifies play therapy behaviors which are unique to children's gender and age. Play therapists' need to be aware of these differences in play therapy behaviors, by gender and age group, in order to better serve and advocate for the children with whom they work.

A brief synopsis of the findings include the following. Comparing the genders with their same age group revealed the following differences (when reviewed at the  $\pm 0.50$  loading): Young girls (3-6 years) displayed a greater need to be rescued, a greater oral focus in their play, and showed more anxiety play therapy behaviors (ptb); young boys had more aggressive, sexual, regressive and nurturing ptb; older girls (7-10 years) expressed more aggressive, sexualized and conflicted ptb; and the older boys hid more in the sessions and produced more drawings with themes of damage and violation. Comparing the younger (3-6 years) and older (7-10 years) age groups of the same gender also noted differences. The younger girls had a more diverse number of themes in their play and expressed more anxiety, regressive and nurturing ptb, while the older girls displayed more overtly sexual ptb along with more aggressive ptb and washing/cleansing ptb. The younger boys had four times the number of ptb when compared to the older boys. The younger boys also expressed more aggression, regression and nurturing to their play. The older boys displayed more conflicted ptb. These findings have impact for the play therapist both within the play therapy session and working with the child's parents.

In addition, there are implications for the use of the play therapy behaviors of the various gender and age groups at the three highest loadings. The play therapy behaviors that were found to be highly interrelated at the  $\pm 0.50$  factor loading may be useful for play therapists in screening children for possible sexual abuse. The number of play therapy behavior items range from 71 to 86 items depending on the specific gender and age group. It is believed that these factors have a sufficient number of play therapy behaviors to provide the play therapist with an ample, but workable, number of items to utilize in this manner. Certainly, using these play therapy behaviors to screen or assess for possible sexual abuse simply indicates that further, more focused exploration of the possibility of sexual abuse would be appropriate.

The play therapy behaviors that were even more highly interrelated could be used as a part of more significant decision making, such as child placement recommendations or court testimony. The individual play therapist would select the level of interrelatedness, either  $\pm 0.55$  or  $\pm 0.60$ , with which they feel comfortable making such decisions. The factors at the  $\pm 0.55$  loading level contain 37 to 46 play therapy behavior items, depending on the gender and age level selected. The factors at the  $\pm 0.60$  loading level contain 12 to 19 items, depending on the gender and age level selected. It must be remembered that none of these lists of highly interrelated play therapy behaviors are diagnostic, in and of themselves, of sexual abuse.

### Educational Importance of the Study

To date, there has been no other research that resulted in a comprehensive list of the play therapy behaviors of sexually abused children. Four primary lists were compiled as a result of this research: Males, 3-6 years; Males 7-10 years; Females, 3-6 years; and Females, 7-10 years. These lists will be highly usable, both on the training of new play therapists and the continuing education of practicing play therapists. This study also highlighted the importance of research in the area of play therapy. Four play therapy behaviors, commonly held as important indicators of sexual abuse, were found not to be interrelated with play therapy behaviors of sexually abused children at a significant level. It is imperative that research continue in the field of play therapy to assist in identifying other "common knowledge" information, which may not stand up under closer scrutiny.