
FEATURE ARTICLE

THE USE OF SAND TRAY THERAPY WITH ADOLESCENT MALES WHO WERE SEXUALLY ABUSED AS CHILDREN

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The use of sand tray and/or play therapy has been the domain of pre-adolescents and tray therapy in particular has been identified with smaller children.

For adolescent males who were victims of abuse and may have been diagnosed with a variety of DSM diagnoses ranging from adjustment

disorders to PTSD to depressive disorders to various substance abuse diagnoses, clinicians tend to favor more traditional talk therapies including the group process.

When adolescent males are forced to "talk about or deal with issues" of childhood sexual abuse they are re-traumatized over the event and this may be in terms of their sexuality and fear of being labeled as something other than heterosexual. Boys may or may not identify with the abuser assuming the abuser is male and especially if he is a family member or close friend. We, as clinicians, often expect adolescent males to be more oppositional than afraid or sad and often view the sexual abuse of males as not as damaging as when it is done to girls. Boys are expected to "stand up to the abuser" and often are rewarded for "beating him up". If the abuser is female, the boy is often congratulated by society for having sex so early and "learning how to be a man" when in fact the boy is traumatized by events of abuse from males or females in the same manner as girls.

My use of sand tray with adolescent male survivors of sexual abuse happened quite by accident:

Case Study: Client to be identified as Matt.

Matt was a 16 year old male who had been referred for counseling by the juvenile court with a three year history of criminal offenses ranging from vandalism to simple assault and a five year history of drug use. The treating diagnosis from the psychiatrist was a behavior disorder with secondary depression. Matt proved to be resistant to traditional talk therapy and said he was coming in "only because they make me".

One day during the session he asked what the sand tray was used for. I explained to him that some people liked to play in the sand and often built the kind of world they wanted in the tray. He asked if he might try.

Within 10 minutes during which this clinician said nothing, he began to cry. When asked what was going on, he said, "Ron, I want to show you something." He opened his shirt revealing many scars which he said his step-father had inflicted on him with steel tipped darts before having sex with him. As a result, Matt had always

associated sexual feelings with pain and violence. He stated he had never told anyone about this before even when the abuser had been to trial and subsequently jailed for the abuse. He said he had always been ashamed to tell anyone about this because he should have "beaten his step-father off or killed him: even though he was 10 years old at the time. He also said that he had always been afraid that he was gay because sometimes the sex felt good which made him more ashamed. During the rest of the session Matt remained very tearful and continued to play in the sand.

As Matt would "arrange his world in sand" he would talk about what his world was like growing up with his mother and step-father and how afraid he was and how lonely most of the time. He would alternate between tears and anger. Often, he would smash the world he had made in sand out of anger and frustration. Initially, he was unable to build "his" world in sand as he wanted it to be. He also requested that I not tell anyone he was playing in sand or crying. For Matt, this type of behavior and self-disclosure was unusual. When asked to describe himself he would answer, "I'm just a redneck".

Each time Matt returned he appeared eager to use the sand tray and over the six month period that I saw him he used the sand tray about 10 times. His diagnosis was changed and he was treated with antidepressant medication. He saw some lifting of depressive symptoms, started some recreational activities he had stopped, was able to maintain sobriety and deal with the legal involvement.

This was not, by any means, a cure-all for Matt nor has it been for other adolescent males I have seen use sand tray, but it may have been a start for Matt. Adolescent males should never be forced to deal with sexual abuse even with sand tray or play therapy. In this clinician's experience with adolescent males, the use of sand tray has proven valuable as a non-threatening milieu for expressing emotions surrounding the abuse and subsequently beginning to heal some of the emotional scars.