



MODULE CODE: ECCY7008

ASSESSMENT COMPONENT: Essay

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AI Acknowledgement

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The Effectiveness of Therapeutic Play in Supporting the Emotional and Social Development of Children from Diverse Backgrounds: Implications for Inclusive Practice

It has been widely noted how play has a big impact on the wellbeing of the child (Moyle, 2010) and how it supports the social and emotional development of the child (Mason et al, 2024). Where does play then cross over into the role of therapy rather than a free activity that children use to explore the world and is the use of play in therapy beneficial to the child through the child's active engagement and personally directed play (Hughes, 2015). This essay will be looking at therapeutic play techniques, how these are used when working with children and looking into the use of therapeutic play is appropriate for all children with a focus on neurodiverse children with autism spectrum disorder (ASD) and attention deficit hyperactivity disorder (ADHD).

When looking at the effectiveness of therapeutic play it would be first important to define what therapeutic play is and where it fits the support needs of children. Inclusive teach (2024) describe therapeutic play as play that is designed to support the social and emotional goals while still preserving the child's choice and freedom in play. Therapeutic play is based on skills development and emotional regulation support; it is used as an aid to help children cope with difficult situations and is usually run by school staff or children's practitioners who have had specialist training. This is not to be confused with play therapy, which is run by qualified play therapists and is based on the goal of deep emotional work and processing trauma, allowing the child to express emotions and experiences (British Association of Play Therapists, 2024).

Therapeutic play is based on the work of Virginia Axline who used play in their therapeutic work with children (Turley Stich, 2020). Axline developed nondirective play therapy which allowed children to express themselves freely through play and use play as a method of communication (Wisen-Vincent, ND). The theories of play however originated from Piaget's theories of play and how children play in order to make sense of life experiences (Pellegrini, 2011), Piaget believed that the child would use experience adaptation to change the scenario, rather than replaying it as it was, to help them to make sense and understand their lived experiences. Piaget believed that between the ages of two and seven years old (the pre-operational stage of development) that children free play to explore, use play as communication and to learn to socialise with others, and to develop their language. However, between the ages of seven and eleven (the concrete operational stage) children use play as a way to learn, build skills and learn academically (O Alharbi, 2022). Through both of these stages the children are trying to make sense of their world, this could be seen as the basis for therapeutic play as a way for children to make sense of their feelings and experiences. It could be questioned that if children are given ample opportunities for play and discovery in the classroom with the classroom staff then is there a need for a child to be pulled from the classroom environment, and their peers that are taking part in learning activities, to take part in therapeutic play sessions on a one to one or small group bases.

'Play is a range of voluntary, intrinsically motivated activities associated with recreational pleasure and enjoyment' (Bianquin, Encarnação & Ray-Kaeser, 2018), this is supported by Nijhof (2018) who states that play is vital for a child's development and the act of play supports all areas of a child's growth and development. If this is correct then it can be seen why play is such an important part of childhood, this can be seen in the UNCRC

(UNICEF, 2019) and Article 31 states that “article 31 (leisure, play and culture) Every child has the right to relax, play and take part in a wide range of cultural and artistic activities.” Osgood & De Rijke, 2025 however suggests that through the lens of developmental psychology, so much analysis is put on a child’s play that it leaves little opportunity for the child to engage in play without it being scrutinised by adults. Vygotsky believed that children use play as a way of learning about the world around them, however emphasised that children learn through social guidance by others (Guy-Evans, 2025) which would suggest that guidance during therapeutic play could be seen, to Vygotsky as a positive. Pramling et al (2025) highlights how children should engage in ‘free play’ without the intervention of adults in their play, if this is the case then should the adults be intervening in the therapeutic play sessions or should they be merely facilitators and observers. Pramling et al (2025) also describes play as the children’s own domain, without interference from adults. This is contradicted by Brown & Lynch (2023) who looked at therapeutic play used by occupational therapists when working with children with additional needs. They questioned if the play is led and guided by the professionals, in order to achieve the desired outcome by the occupational therapists then is the play authentic as it professional led to achieve an outcome not child led. This would question if play that is guided to a particular outcome is play at all.

Cognitive Behavioural Therapy (CBT) is often used as a therapeutic strategy for children who have experienced some form of trauma or mental health difficulty. CBT is described as a problem focused intervention that aims to equip the participant to achieve their treatment goals (Suganya, Prabakar & Rao, 2022), this leads to CBT being used in the therapeutic treatment of children. However, Seiler (2008) questioned if children have the cognitive understanding when completing CBT to benefit from the process. While both

CBT and therapeutic play are in place to support the wellbeing of the child, CBT is goal focussed and driven where therapeutic play is more free allowing children and young people to manage and cope with difficult situations and supports healthy development (Frame of Mind Clinic, 2025).

Psychodynamic theory focusses on unconscious thoughts or awareness (Knox & Leshen, 2023). This would link closely to the use of therapeutic play for children, as the use of play allow for children to engage in their subconscious knowledge and understanding and provides an outlet for their understanding. Loscalzo (2025) emphasized the importance of imagination in psychodynamic therapy as it is through imagination that the participant is able to display their subconscious feelings and experiences. For children, play encourages imagination, so through therapeutic play the child is able to engage their subconscious feelings and work through what they are feeling in a safe and encouraging space. However as is stated by the British Association of Play Therapists (2024), therapeutic play workers have different qualifications to a play worker and so it could be argued that a school staff member who has not had specialist training is not equipped or prepared to manage these difficult situations and so the child would be better supported by a play therapist in these situations.

Attachment has a large part to play in therapeutic play as the relationship between the caregiver and the child is important in allowing the child to feel comfortable to express themselves, there needs to be a relationship of trust and a secure attachment. Ritblatt & Longstreth (2019) describe how teachers within the school setting are in a position to build secure attachments with children and are able to role model situations for children to help them to learn and grow. They use the example of role-playing social situations;

the teacher then slowly introduces the child's peers into the group while still supporting and acting as a role model before stepping away from the group. This technique uses Vygotsky's theory of a more knowledgeable other to scaffold skills and understanding for the child. (Smolucha & Smolucha, 2021). For many children with additional learning needs there is a team of professionals that work with the family to provide support, in a school setting these professionals would meet during the individual development plan (IDP) meeting that are held annually to look at what is working for the child, what is not working and where support could be given. For children who engage in therapeutic play sessions it could be of benefit for the adult in these sessions to attend these meetings as they will be able to get a better understanding of the needs of the child and know if there are any particular areas that could be supported by therapeutic play. The adult would also be in regular contact with the class teacher to see what support the child would need as they can work on this during their therapeutic play sessions. Although the staff members in the school would be in the best position to build a trusting attachment with the child you can also question if they are in the best position to work with the child in this context, as they already have preconceived ideas of the child and their personal situations, rather than seeing the child as a blank slate to build and form a relationship with.

Therapeutic play incorporates a humanistic approach, meaning that it emphasises the importance of play to allow children to express their thoughts and feelings. This is a pivotal part of therapeutic play as it emphasizes the child's control over the therapy process to build on their strengths and manage their challenges (Joseph, 2025). Lac (2016) supported this by stating that the child is supported by being able to self direct their own learning and growth, leaning on Carl Rogers theory of the person centre approach (Rogers, 1995).

As previously discussed, play is crucial for children (Anderson, 2022), it is also believed that play is important in the development of the brain and a child's cognitive skills (Knee et al, 2006, Pane et al, 2025). When looking at play through a neuroscientific perspective, play is not purely for the entertainment and enjoyment of the child, but it also serves as an outlet for cognitive development, learning and brain growth allowing to child to develop problem solving skills. During play the brain forms new connections which are essential for learning and memory, with different types of play stimulating different areas of the brain. Neuroscientific theory also states that emotional regulation skills can be developed through play, which can help children to work through their emotions and experiences (LoBue et al, 2019). Emotional regulation is a challenge that is faced by many children with ADHD and ASD (Costa, 2026), this would therefor imply that therapeutic play sessions would be of benefit to children with ASD and ADHD as a way of supporting them in managing their emotional regulation.

When looking at play and the impact of therapeutic play it is important to recognise a western centric bias in how childhood and play is seen, as in many cultures' childhood is seen differently and what may be perceived as inappropriate in western cultures could be considered as cultural norms around the world (Tindle, 2021). An example of this could be in the emotional expression and suppression of children, in western cultures, emotional expression is encouraged, especially in children, however in some cultures emotional suppression is encouraged in order to maintain group harmony. It could also be argued that in some cultures emotional expression is labelled to the gender of the child, the expectation is that females are more emotional whereas males are meant to be more stoic and suppress emotions, however in many cultures these thoughts are no longer appropriate, and emotional expression is encouraged regardless of gender. When

looking at therapeutic play it would be wise to observe the play with the child's culture and background in mind so not to assume that the child's cultural norms are the same as the staff working with the child, highlighting the need for a more inclusive understanding of cultural contexts for children during play (Zangeneh & Al-Krenawi, 2019)..

Therapeutic play supports the child's emotional and social development (Zaharia et al, 2022). One way that play supports this development is through communication as play can act as a nonverbal means of expression, allowing for children to express their emotions and feelings in a nonverbal way (NHS. 2024). This can happen as play can act as a safe space for the child to express themselves, especially when the child may not have the language skills yet to verbalise their feelings and emotions. This can act as a way for the child to work through their emotions and experiences without having the complex language needed to verbally express themselves. This is an example of how therapeutic play may be more appropriate than cognitive behavioural therapy where the child would be required to use language to explain and discuss emotions and experiences.

Role play activities are popular activities for children and are often encouraged by adults in both the home and educational settings through home corners, fancy dress and role play areas. For children however, role play can play a more substantial role than the adults realise, as through role play children are given the opportunity to make sense of experiences and emotions as well as role play supporting them in developing problem-solving skills and understanding of the real world (Davey, 2024). Through role play children also have the opportunity to develop social skills, as role play often involves others, with would develop their social skills and help them to develop their conflict management skills and develop empathy skills. Through play, especially therapeutic

play, children can also develop resilience as they work through challenges, which will then equip the child with strategies that they can then translate to other areas of their life with therapeutic play acting as a gateway between play and enjoyment and emotional social and cognitive growth and development in a format that is natural for the child.

Therapeutic play can act as an effective tool to support children who have experienced trauma, anxiety, grief and stress (Cohen & Gadassi, 2018). This is because it can act as an outlet for their feelings in a safe and encouraging space where they will not face judgement or face misunderstandings. Therapeutic play can allow the child to process what they have been through with the activities and toys that have been provided for them which allows the child to freely explore their emotions. This will then support the child in their emotional development by allowing them to move forward with their emotional growth and development. Play can act as a tool to support the child in developing resilience and in supporting their emotional regulation as during therapeutic play the child can work through challenges which then can support them in real life situations. Townsend et al (2024) explain how students with ASD and ADHD often have co-occurring anxiety or mental health struggles, so having the opportunity to gain regular support through therapeutic play would be a benefit.

Therapeutic play is also beneficial when supporting a child's social development (Hashmi et al, 2025). An example of this would be in the way that a child is able to build empathy for others and the ability to see things through another's perspective. By a child engaging in pretend play the child will become the character that they are pretending to be, this gives them the perspective of seeing things through another's point of view. For the child, these skills can then be used outside of the play environment to support them

in being able to see from another's perspective, supporting them in building empathy skills for those around them. This skill would not just be beneficial to their empathetic skills but also to their communication skills and in the way the child can interact with others as it promotes understanding and cooperation.

Through play children have the opportunity to learn and develop skills such as turn taking and conflict management. For a child who struggles with these skills therapeutic play allows the child to work on these skills with a more knowledgeable other's support before putting the skills that they have learnt into practice. For example, during therapeutic play the adult may set role play scenarios for the child to work through, allowing them to develop these skills in a safe environment with the support of a trusted adult. Turn taking and conflict management are also struggles that may affect children with ASD and ADHD (CAMHS, 2018), as this is something that can be supported by a therapeutic support worker during sessions, it could be of benefit to children who have ADHD or ASD.

For children with additional learning needs, therapeutic play can be beneficial as play allows the child to build a variety of skills and also allows for the child with additional learning needs to communicate without the use of spoken language. For children with additional learning needs adaptations can be made to the therapeutic play in order to ensure that the child will be able to get the most out of the session. Anderson (2022) reports that for children with ASD, pretend play can be challenging for them, however using role play as a way for them to understand the feelings and experiences of others is beneficial to the child and it helps the child with ASD to build empathy skills. However, Besio, Bulgarelli & Stancheva-Popkostadinova (2017) believe that for children with communication challenges pretend play, including role play, can be more of a challenge,

as part of the pretend play is an agreed idea that an object is something, for a child who struggles with communication it may be that they are not able to communicate this to their peers, leading to misunderstanding and lack of acceptance.

Therapeutic play sessions for children with additional learning needs need to be accessible to the students and ensure that they are inclusive to all of the children who will be accessing the session (Jansens & Bonarini, 2020). For children with additional learning needs therapeutic play can also act as a tool to help them to better understand themselves and their own strengths and challenges (Bulgarelli, 2025). For example, a child accessing a therapeutic play session where there are toys that represent them, for example a doll in a wheelchair or a doll representing a child with autism, will help the child to communicate their needs as they will be able to see themselves represented in the sessions, It can also support inclusive learning for other children and having access to these toys who may represent different additional needs would open the topic of inclusivity to the children, would allow them to pretend play and have the opportunity to see the world through the child with additional learning needs eyes, allowing the child to build empathy and promotes understanding. Ainscow (1999) questions if there is such thing as 'inclusive education' or an inclusive school environment, as inclusivity is often discussed as participation in mainstream classroom activities, whereas real inclusion would not need specialist toys as it is about accepting everyone where they are and focusses on equity not equality.

The benefits of therapeutic play are clear, however there are negatives to therapeutic play that need to be recognised. The first being the adequate training of the staff that are providing the therapeutic play and if they are receiving the specialist training required to

support children. Although there is no standardised training to be able to support children through therapeutic play, Ofsted (2024) highlighted the need for high quality trained staff to support children and to provide the best care. This would imply that if untrained staff are providing the therapeutic play sessions, then the outcome for the children would not be as successful as if there were qualified staff. Another shortfall is the limited research into the benefits of therapeutic play in the school environment, as much of the research is based on the theories of play therapy. Further research into the outcomes of therapeutic play and the levels of training for therapeutic play staff could give more insight into how effective it can be for all children.

Another challenge that has been displayed is in the expectations and confusion between therapeutic play and play therapy. As previously discussed, play therapy has specialist qualified staff working with the children as well as them providing a specialist service, in contrast to therapeutic play which can be run in the school setting by trained staff. The outcomes for the different sessions would then be very different and the needs of the children attending play therapy would be different to those attending therapeutic play (British Association of Play Therapists, 2024).

In conclusion there are many benefits that would indicate that therapeutic play could act as a conditional benefit to some children within the school setting. It supports the development of emotional and social development and can support children through challenges; however, this would be reliant on trained staff who were knowledgeable on therapeutic play and what it does and does not entail. The benefits for children in a school setting with ASD or ADHD could be through supporting their emotional regulation when they are facing challenges, in turn taking and in the social skills, like empathy that will aid

them in the classroom environment, however to access this support there is the possibility that time it taken out of the classroom during learning time which could have the possibility of isolating them further from their peers, therefor having a negative effect on the child.

Therapeutic play does have a place in play work with children and young people, however for it to be seen as truly beneficial to the child more research would need to take place.

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